**TOWN OF IRVINGTON**

**SEPTIC SYSTEM PUMP-OUT/INSPECTION PROGRAM**

**VERIFICATION AND COMPLIANCE FORM**

Section 9VAC 10-20-120 7A of the Regulations and Section 3A-9 B (5) of the Town’s Chesapeake Bay Preservation Overlay District Ordinance

**This form must be completed and returned to the Town of Irvington, P.O. Box 174, Irvington, VA. 22480.**

**PROPERTY OWNER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Tax Parcel Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Property Description\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The Town’s records indicate there is a septic system on your property. Your septic system was inspected and/or pumped-out on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ . Septic Systems must be inspected and/or pumped out every five years to be in compliance with the above regulations. Your system needs to be inspected and/or pumped out.**

**COMPLIANCE: DATE OF INSPECTION AND OR PUMP-OUT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.(Indicate which method of compliance.) ALSO, INDICATE IF THERE IS AN EFFLUENT FILTER INSTALLED IN THE OUTFLOW PIPE FROM THE SEPTIC TANK AND WHEN IT WAS INSTALLED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOCUMENTATION: PLEASE ATTACH A COPY OF THE INSPECTION/PUMP-OUT RECEIPT AND/OR CANCELLED CHECK MADE OUT TO THE LICENSED SEWAGE HANDLER, WHO PERFORMED THE INSPECTION AND/OR PUMP-OUT.**

**IF THE SEPTIC SYSTEM HAS BEEN INSPECTED BY A LICENSED SEWAGE HANDLER AS AN ALTERNATIVE TO PUMP OUT, PLEASE SUBMIT SIGNED DOCUMENTATION FROM THE LICENSED SEWAGE HANDLER STATING THAT THE SYSTEM “HAS BEEN INSPECTED, AND IS FUNCTIONING PROPERLY, AND DOES NOT NEED TO BE PUMPED-OUT.”**

**Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**PROPERTY OWNER DATE**