

Private Water Systems ADMINISTRATIVE SUMMARY

Permit #

Health Department Use Only

I. Well Log

Well log #	Date Received	Reviewed by
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II. Sealing Report

Report #	Date Received	Reviewed by
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III. Job Status / Completion Forms

PWS Contractor 1	Job Status - Date Received	Completion Form - Date Received
PWS Contractor 2	Job Status - Date Received	Completion Form - Date Received
PWS Contractor 3	Job Status - Date Received	Completion Form - Date Received

IV. Final Inspection

Date Performed	Performed by	Worksheet Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
Observations, Noted violations, and Corrective Actions (include dates and information of all performed inspections)		

V. Variance – Attach the variance request and board of health decision letter to this permit.

Variance Requested OAC 3701-28-_____	Date of Request	Approved by Board of Health <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Approved / Denied
Comments			

VI. Water Samples

Bacteria Sample One	Collected by	Date	Sample Collection Point	Results
Bacteria Sample Two	Collected by	Date	Sample Collection Point	Results
Bacteria Sample Three	Collected by	Date	Sample Collection Point	Results
Water Sample Comments				

Nitrates

Nitrate Pre-screen Results	Collected by	Date	Sample Collection Point	Results
Nitrate Laboratory Analysis / Results	Collected by	Date	Sample Collection Point	Results

VII. Private Water System Approval / Disapproval

<input type="checkbox"/> System approved	Sanitarian Signature	Date of approval
<input type="checkbox"/> System disapproved	Sanitarian Signature	Date of disapproval
Reason for Disapproval		
Enforcement action taken		