



**MONROE COUNTY DEPARTMENT OF PUBLIC HEALTH
BUREAU OF PUBLIC HEALTH ENGINEERING**

**111 Westfall Road, Room 910, Rochester, NY
14620 585-753-5060**

PARTIAL REPAIR – ONSITE WASTEWATER TREATMENT SYSTEM

OWNER:

TOWN:

ADDRESS:

INSTALLER:

INSTALLATION DATE:

OF BEDROOMS:

DESCRIBE MODIFICATIONS TO EXISTING SYSTEM:

SEPTIC TANK:

DISTRIBUTION BOX:

CONNECTING PIPES:

Draw a sketch showing location of house, septic tank, distribution box and leachfield. Give distances between house and septic tank, house and distribution box and leachfield and well.

Blank area for sketching the location of house, septic tank, distribution box, and leachfield, with distances between them.