



Medina County Environmental Health
Floodplain Administrator

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"Protecting Medina County's Air and Water Resources through Reducing and Preventing Pollution."

Septic System Data and Inspection Form

Property Owner: _____ **Address:** _____

Subdivision: _____ **Lot #:** _____ **Block #:** _____

Property Type: ☐ Single Family ☐ Commercial **How many dwellings on property:** _____

How many septic tanks on property: _____ **How many electric meters on property:** _____

Bedrooms: _____ **Square footage:** _____ **Deed/ Tax ID Card** ☐ **Septic Drawing Included** ☐

Electrical Provider: _____ **ESID# or CPS Rep Email:** _____

☐ Well or ☐ Public Water **Water Provider Name:** _____

Is system adequate for service of this home? If no, explain: _____

System Details: Installation Date _____ # of Tanks _____ Compartments: _____ Size: _____ gallons

☐ Conventional ☐ GP ☐ LC ☐ P&G ☐ Aerobic **Number of Sprinkler Heads:** _____

Type of Tank: ☐ Concrete ☐ Steel ☐ HDPE ☐ Fiber Glass **Other:** _____

Was there evidence of overflow: ☐ NONE ☐ RePermitting ☐ Effluent Surfacing ☐ Cesspool ☐ Odor

☐ Marshy Area ☐ Depression ☐ Other: _____

GPS Coordinates: _____

RECOMMENDATIONS: _____

Service Provider/ Installer/ Inspector : _____ **Phone#:** _____

License Number: _____ **Expiration Date:** _____

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that a false statement may disqualify me for benefits.

Inspector of Septic Signature

Date

Medina County Authority

Date of Receipt

Revised 11/18/2025