

Environmental Health Division

Serving Crawford, Kalkaska, Lake, Manistee, Mason, Mecosta, Missaukee, Newaygo, Oceana, and Wexford Counties

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Evaluation Repo	ort: Wat	er Supp	ly - Sew	age Sy	stem				1 ugc	1 01 3
Evaluation Date: 07/18/2022				Parcel #: 53-012-105-011-00						
Site Address: 6265 N. Larson Rd. Fountain, MI 49410										
Township: Sheridan			Section: 5							
Subdivision and Lot #: Blu	ue Lake Lo	t #11								
Present Owner:										
Applicant Name:										
ON-SITE Water Supp	oly									
Well Log Available		Yes	X No	Depth: Unknown		Age: Unkn	iown			
Protected Aquifer (10 feet/i	more of clay or	shale)	Yes	No		Permit # N	N/A			
Satisfactory Bacteriological Analysis	区	Yes	No	Satisfact Nitrate C	ory oncentrat	tion	⊠ Ye	es		No
Satisfactory - Other:		Yes	No	Correction	ons Requi	red	Ye	es	X	No
Comments: Well is located bellow group type well. There are isolation distance to the sereplaced at the next major	e no records eptic system	on file for th	e well so the	e depth an	d age are	unknown.	The well is r	not the re	equire	ed
Meets Regulations	Yes	⊠ No	If <u>No</u> , deg	*	riority ub code (i	l 🔵	II ()	III () в ()	IV C	00
ON-SITE Sewage Tre	eatment Sy	ystem								
Size of Septic Tank	Size of Septic Tank Type of Septic System			Record of Permit on File						
Age of Septic System		Size of Sep	tic System			Permit #				
Date Septic Tank Last Pu	ımped:			Correction	ns Requi	red	☐ Ye	s		No
Comments:										
Meets Regulations	Yes	☐ No	If <u>No</u> , degree hazard*		riority ub code (l C	~	III O	IV C	00
Environme Signature		Representat	ive	L		71.	22/22			8

NOTICE: A number of factors affect the longevity of an on-site sewage system. Routine, periodic pumping of the septic tank and the use of water conservation practices are encouraged. Garbage disposal units are not recommended.

While every effort has been made by District Health Department #10 to provide a careful disclosure of available facts and observations, this report does not signify "approval" or "non-approval" and does not constitute a guarantee concerning future sanitary or operational adequacy.

^{*} See reverse side for explanation on degree of hazard.

Water Supply - Degree of Hazard Defined

Priority I - Substantial Hazard

- A. Unsatisfactory bacteriological and/or chemical content of water samples from the supply.
- B. Sewage, surface water or other pollutants can enter the water supply.

Recommendations:

- 1. Discontinue the use of the water for all human consumption.
- 2. Provide water from an approved water supply until corrections are completed.
- 3. Consult with the health department concerning water treatment possibilities.

Priority II - Potential Hazard

- A. Well terminates in an unapproved pit where water has been known to accumulate.
- B. Buried well seal or unprotected suction line is jeopardized by a high water table.
- C. Unprotected suction line within specified minimum isolation distances.

Recommendations:

- Contact a licensed well driller and/or the health department as to upgrading the well construction. A permit
 may be needed.
- 2. Sample the water at least yearly.

Priority III - Minimal Hazard

- A. A buried well seal or an approved suction line not jeopardized by a high water table.
- B. Well terminates in an unapproved pit where water does not accumulate.

Recommendation:

1. Contact a licensed well driller and/or the health department as to upgrading the well construction. A permit may be needed.

Priority IV - Deviation

When a water supply does not fully comply and the deficiencies do not constitute a potential hazard, a deviation may be authorized if constructed prior to current standards. This will be documented and be made a part of the permanent records for the facility(ies.)

NOTICE: Follow-up water sampling is the responsibility of the property owner. Health Department staff may review the results of water samples to assure compliance.

Sewage System - Degree of Hazard Defined

Priority I - Substantial Hazard

- A. Sewage is surfacing onto the ground. This is a violation of the Sanitary Code and must be corrected as soon as possible. A new septic system is needed. A permit must be obtained from the health department.
- B. Sewage is accumulating in the septic system. This condition indicates that the septic system is under stress and will likely need to be replaced. A permit from the health department is needed.
- C. Sewage is flowing back into the building. Obtain a contractor to remove any blockage in the sewer lines.

Priority II - Potential Hazard

Septic system is <u>considerably</u> undersized for its expected amount of wastewater. Institute strict water conservation practices. It is recommended that the septic system be expanded. If so, a permit is needed from the health department.

Priority III - Minimal Hazard

Septic system is <u>somewhat</u> undersized. Institute strict water conservation practices and pump out the septic tank on a yearly basis.

Priority IV - Deviation

The septic system does not fully comply with the Sanitary Code but does not appear to present a foreseeable public health hazard. No changes are required to the system except for regular maintenance

A. Septic system was permitted, installed and approved under a previous sanitary code. Due to code changes, the septic system does not meet current sizing requirements.

FORM: EH-901_Mortgage Eval Approved: 2016-01 Effective: 2016-11

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Site Plan				
Septic Permit #:	Well F	Permit #:	N/A	
Site Address: 6265 N. Larson Ro	d. Fountain, MI 49410			
Property Tax ID #: 53-012-105-011-0	0			
N	Site Plan Area Dra	awing		
$W \longrightarrow E$	(drawing not to sc	ale)		
	- 44			
	N. GATSON	RD.		
1	1			
			Į.	
	STEEP SIO	De	1	
				*
V	Private Roc	20		
M	A .			
	Sewer Line *		, 1	
	T 48	DC26		*
BIL	etate			
	- Cat			
XEVATI				
* Exact location	of Septic Tankly	xywells co	UID NOT BE	Found





District Health Department #10 Drinking Water Laboratory 916 Diana Street, Ludington, MI 49431 Phone: (231) 316-8579

www.dhd10.org

WATER ANALYSIS REPORT

MDEQ# 9990

Date Reported: 7/19/2022

Site Information

Claire Baird 6265 N. Larson Fountain, MI, 49410

Parcel #: 53-012-105-011-00

Township: Sheridan

County: Mason

Source: Residential

WSSN #/Source ID/Well #:

Test Purpose: Real Estate Transaction

Report Information

Lisa Hofmann

DHD #10

Collection Information

Sample Point: Kitchen Tap

Date/Time Collected: 7/18/2022 2:13 PM

Sample Collected By: Lisa Hofmann

Sample Matrix: Drinking Water

Date/Time Received: 7/18/2022 4:00 PM

Results

Sample ID #	Analysis	Result	Date/Time Analyzed	Standard Method	
26066	Total Coliform	ABSENT	7/18/2022 5:00 PM	9223 B*	
26066	E.Coli	ABSENT	7/18/2022 5:00 PM	9223 B*	
26067 Nitrate		< 1 mg/L	7/18/2022 5:00 PM	10206*	

Maximum Contaminant Levels (MCL):

Coliform

Nitrate

Absent

10 mg/L

Comments

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