Savvy Septic Replacement
Grant Program

Septic Failure Determination Instructions

Instructions:

1. Contact one or more Snohomish Health District certified Monitoring and Maintenance Specialist or Installer or a Washington State Licensed Wastewater System Designer to inquire about their help determining if your septic system has failed.
   a. Let them know you are in the process of applying for a Savvy Septic grant.
   b. Ask if a fee will be charged. The Savvy Septic Grant program cannot cover fees to determine if a system has failed.
   c. Contractors who are certified as Installers may be interested in providing the determination as they may be eligible to complete the work if a grant is awarded.
   d. You can find certified contractors at: http://www.snohd.org/Septic/Septic-Contractors

2. Return the Declaration of Septic System Failure to Snohomish County Human Services by fax at (425)259-1444 or by mail to Snohomish County Government, ATTN: Savvy Septic, 3000 Rockefeller Ave, M/S 305, Everett WA 98201-4046

3. If you have questions, call 425-388-3636
Declaration of On-Septic System Failure Determination

This form is to be completed by a Snohomish County Health District Sanitarian, a Snohomish Health District certified Monitoring and Maintenance Specialist or Installer, or Washington State Licensed Wastewater System Designer.

A Written Notice for System Correction from Snohomish County Health District may be provided in lieu of this Determination form, if applicable.

Determination

On this date, ________________, the on-site septic system serving the property at ________________________________
(date)
(address)
was determined to be failing. The basis of this determination is given below. I attest that in my independent,
professional judgment the on-site septic system at the aforementioned address is in need of major repair or replacement.

___________________________                      ____________________
Printed Name                                                                 Signature

Qualification (check one or more)

Certified Monitoring and Maintenance Specialist
Certified Installer
Wastewater System Designer licensed by Washington State
Snohomish Health District Sanitarian

This system was determined to be failing because (select all that apply):

Ponding over drainfield
Drains in home no longer draining properly
Sewage odors inside home
Strong sewage smell outside, above and adjacent to system
Noticeable variation in vegetation over drainfield
Other (please explain):

Return form to Snohomish County Human Services by fax at (425) 259-1444, or by mail at: Snohomish County, ATTN: Savvy Septic Grant, 3000 Rockefeller Ave, M/S 305 Everett WA 98201