
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
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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)

<input type="checkbox"/>	Certified Monitoring and Maintenance Specialist
<input type="checkbox"/>	Certified Installer
<input type="checkbox"/>	Wastewater System Designer licensed by Washington State
<input type="checkbox"/>	Snohomish Health District Sanitarian

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

<input type="checkbox"/>	Ponding over drainfield
<input type="checkbox"/>	Drains in home no longer draining properly
<input type="checkbox"/>	Sewage odors inside home
<input type="checkbox"/>	Strong sewage smell outside, above and adjacent to system
<input type="checkbox"/>	Noticeable variation in vegetation over drainfield
<input type="checkbox"/>	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