

Wake County Septic Survey 2008 - Henley

* 1. Please provide us with your property address, city and zip code; these are required fields. The additional contact information although helpful, is optional.

Name:

Address:

Address 2:

City/Town:

ZIP/Postal Code:

Email Address:

Phone Number:

2. How many people live in your home? Please enter a number indicating how many from each of the following age groups.

Adults (ages 18+)

Teenagers (ages 13-17)

Children (ages 3-12)

Infants/Toddlers (ages 0-3) in Disposable diapers

Infants/Toddlers (ages 0-3) in Cloth diapers

3. Is this your first time living in a home with a septic system?

Yes

No

I don't know

4. How long have you lived in this home?

0-5 years

6-10 years

11-15 years

15+ years

5. Since you've lived in the home, how many times has the septic tank been pumped?

Never

1 time

2-4 times

5 or more times

Wake County Septic Survey 2008 - Henley

6. How frequently do you have your septic tank pumped?

- Every 0-2 years
- Every 3-5 years
- Every 5+ years
- Never

7. How many times per week do you use the following?

	1 to 2 times	3 to 4 times	5 or more times	Rarely	N/A
Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Garbage Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A filled Bathtub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whirlpool/Jacuzzi Tub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-head Shower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lawn Irrigation System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. If you have a laundry machine, how many loads do you run each week?

- 0 to 3 loads
- 4 to 6 loads
- More than 6 loads
- Not Applicable

9. When you do the laundry, do you typically wash your clothes...

- All in one day
- On the weekend, over two days
- Spread throughout the week
- Not Applicable

10. If you provide the following services from your home, please indicate the frequency per week.

	1 to 2 times	3 to 4 times	5 or more times	N/A
Catering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laundry Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Childcare/Daycare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Please answer the following.

	Yes	No	I don't know
Do you have a water softener?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the water softener backwash to the ground?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you use a drop-in toilet bowl sanitizer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wake County Septic Survey 2008 - Henley

12. Indicate the frequency with which the following are disposed of down the drain.

	Often	Occasionally	Rarely	Never
Septic tank treatments/additives	jn	jn	jn	jn
Drain Cleaners	jn	jn	jn	jn
Paint	jn	jn	jn	jn
Thinners/Mineral Spirits	jn	jn	jn	jn

13. Have the following site modifications been made in the area of the septic system since the system was installed?

	Yes	No	I don't know	I don't know where the septic system is located
Basement drain	jn	jn	jn	jn
Driveway	jn	jn	jn	jn
Gutter downspouts	jn	jn	jn	jn
Landscaping	jn	jn	jn	jn

14. Has work been performed on the following underground utilities?

	Yes	No	I don't know
Gas	jn	jn	jn
Water	jn	jn	jn
Cable	jn	jn	jn
Power	jn	jn	jn
Phone	jn	jn	jn

15. Do you have a copy of your septic tank permit?

jn Yes

jn No

jn I don't know

16. Have you received information related to the history or maintenance of your septic system from any of the following sources?

	Yes	No	N/A
A Real Estate Agent	jn	jn	jn
The Previous Homeowner	jn	jn	jn
County Staff	jn	jn	jn
The Internet	jn	jn	jn
Septic System Company	jn	jn	jn

Other (please specify)

Wake County Septic Survey 2008 - Henley

17. Have you had or are you currently experiencing the following problems?

	Yes, currently	Yes, previously	No
Slow Drains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surface Discharge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewage backup in the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. At what frequency did or does the problem occur?

- Daily
- Weekly
- Seasonally
- Not Applicable

19. Does the problem seem to be related to:

	Yes	No	I don't know	N/A
Doing Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visitors in the home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rainfall events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Season of the year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. If you have previously had your septic system repaired, what type of repair was performed?

- New lines were installed
- The tank was pumped
- Water usage was reduced
- The septic tank distribution was adjusted
- No repairs were done
- Other (please specify)

Wake County Septic Survey 2008 - Henley

21. Have any problems occurred since the repair?

Yes

No

I don't know

Not Applicable

If yes, describe

22. Other comments you would like to make.