



Rhode Island Department of Environmental Management
Onsite Wastewater Treatment System Program

Phone: 401-222-6820
Fax: 401-222-6177

INSPECTION REPORT

1125-0957

APPLICATION NUMBER:

111 Sayles Hill Road

Pittman

STREET:

North Smithfield

INSPECTOR:

07/03/2019

CITY/TOWN:

17 127

83

INSPECTION DATE:

PLAT/LOT:

No Installer/Unknown XCELX

POLE NO:

Designer: D4043

ARRIVAL TIME:

OWTS INSTALLER:

0

WEATHER CONDITIONS:

PHONE NO:

INSPECTION NUMBER:

TYPE OF INSPECTION: Inspection for Soil

Scheduled @ 11:00 AM

FINDINGS/COMMENTS

- Concave TH1 28" w.r. d=120"
- Concave TH2 28" w.r. d=120"

RESULTS OF INSPECTION/ACTION REQUIRED

**CONSTRUCTION - DESIGNER MUST
INSPECT/APPROVE PRIOR TO DEM INSPECTION**

- Bottom inspected
- Cover inspected
- Correct items listed
- (RFA) Address items listed and call for re-inspection.
- (ASB) Designer must submit As-Builts
- (RPREQ) Redesign required. Submit new application.
- (RFAD) Stop Construction. Contact OWTS office. DO NOT CONTINUE.
- (COC) Designer submit COC
- (O&M) O&M agreement and permit must be recorded in Land Evidence Records.
- (Fee) A \$100.00 fee is required before re-inspection.
- Inspection waived

SITE TESTING

- Soil Evaluation - Concur
- Soil Evaluation - Do not concur
- Soil Evaluation - Inconclusive
- Alteration Test Hole - Verified
- Alteration Test Hole - Unacceptable
- Ledge Test
- Fill Tests
- Repair Test Hole

Signature of Inspector _____