

# INSTALLER CONSTRUCTION COMPLETION FORM

Name of Installation Firm: \_\_\_\_\_

Folder Sequence # \_\_\_\_\_

Tax Parcel # \_\_\_\_\_

Date installed: \_\_\_\_\_

Tank Manufacturer: \_\_\_\_\_

Tank size: Septic Tank \_\_\_\_\_  
Pump Chamber \_\_\_\_\_

Effluent Filter: Manufacturer \_\_\_\_\_  
Model # \_\_\_\_\_

Effluent Pump: Manufacturer \_\_\_\_\_  
Model # \_\_\_\_\_

Control Panel/Alarm: Manufacturer \_\_\_\_\_  
Model # \_\_\_\_\_

Floats: Manufacturer \_\_\_\_\_  
Model # \_\_\_\_\_

Timer Settings: Actual run time on \_\_\_\_\_  
time off \_\_\_\_\_

Pump chamber draw down in inches per minute: \_\_\_\_\_

Squirt Test: Sand Filter \_\_\_\_\_  
Mound/trench/bed \_\_\_\_\_

Corrected deficiency items identified by TCEH during the final inspection.

---

---

---

Installer Signature: \_\_\_\_\_

Print name \_\_\_\_\_

