



**CLERMONT COUNTY PUBLIC HEALTH**  
 2275 Bauer Road, Batavia, OH 45103 Phone: 513-732-7499 I Fax: 513-732-7936

**Homeowner Inspection Request**

Completed application must be submitted to Clermont County Public Health with payment. Checks can be made payable to the Clermont County Treasurer. Allow 14 business days for completion. Results will be emailed to the applicant or viewed online at <https://clermontcountyoh-energovpub.tylerhost.net/Apps/SelfService#/home>

Property Address: \_\_\_\_\_  
 Township: \_\_\_\_\_ Acreage: \_\_\_\_\_ Parcel ID#: \_\_\_\_\_  
 Homeowner's Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

I attest that the requested inspection is authorized by the owner of record and that I am making this application as either the owner or the owner's authorized representative.

Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Is the house occupied?: Yes \_\_\_ No \_\_\_ If no, how long has the house been vacant?: \_\_\_\_\_  
 Number of bedrooms: \_\_\_\_\_ Year the house was built: \_\_\_\_\_

**Inspection(s) Requested**  
 (Check all that apply)

**\$180.00 Household Sewage Treatment System Inspection**  
 Type: Leach Lines \_\_\_ Mound \_\_\_ Sand Filter \_\_\_ Aerobic \_\_\_ Other \_\_\_\_\_  
 Last time septic/aerobic tank was pumped? \_\_\_\_\_  
 Note any system problems: \_\_\_\_\_  
 Should the septic system be determined to be malfunctioning the owner will be required to repair the system and pay the cost of required reinspections until the problem has been corrected.

**\$250.00 Private Water System Inspection** (Includes water sample)  
 Type: Cistern \_\_\_\_\_ Hauled Water Storage Tank \_\_\_\_\_ Spring \_\_\_\_\_ Well \_\_\_\_\_  
 Does the system have an automatic disinfection unit? (Example: chlorinator) Yes \_\_\_ No \_\_\_  
 If your well or cistern does not have an automatic chlorinator no chlorine can be present at the time of collection of the water sample. If chlorine is present in system a sample cannot be collected.

\$ \_\_\_\_\_ **Total Due**

Email Results to: \_\_\_\_\_

**Office Use Only**

Existing Operation Permit Number: \_\_\_\_\_