



**Polk County Public Works**  
5885 NE 14<sup>th</sup> Street  
Des Moines, IA 50313  
(515) 286-3352

**REQUEST FOR INSPECTION OF PRIVATE WATER SUPPLY AND/OR  
ONSITE SEWAGE DISPOSAL SYSTEM (REAL ESTATE INSPECTION)**

SEP 20 \_\_\_\_\_ - \_\_\_\_\_

Site Address: \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_

Legal Description: \_\_\_\_\_

Property Access Allowed By:

Owner/Agent: \_\_\_\_\_

Please print

Report Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Inspection Request Is:

For Well: \_\_\_\_\_ Sewage Disposal: \_\_\_\_\_ Both: \_\_\_\_\_

**IT IS THE RESPONSIBILITY OF THE PROPERTY OWNER TO EXPOSE THE SEPTIC TANK  
AND IT MUST BE PUMPED AT THE TIME THAT THE REAL ESTATE INSPECTION IS TO BE  
PERFORMED. THE DISTRIBUTION BOX MUST ALSO BE EXPOSED AND OPENED.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner/Agent

**POLK COUNTY PERSONNEL WILL ENTER THE PROPERTY ONLY WHEN ACCOMPANIED  
BY THE OWNER OR BY THE OWNER'S AUTHORIZED AGENT.**

PERMIT FEE: Septic \$275 - Well \$135 CHECK #: \_\_\_\_\_ CASH: \_\_\_\_\_ RECEIPT #: \_\_\_\_\_ INITIALS: \_\_\_\_\_