

**INSPECTION FEE - \$100 PAYABLE TO OSAGE COUNTY LAND DEVELOPMENT OFFICE**

**SEPTIC TANK MUST BE LOCATED AND UNCOVERED AT THE TIME OF INSPECTION**

**PUMPER IS TO BE PAID AT TIME OF INSPECTION**

**WASTE WATER INSPECTION ORDER REQUEST**

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Fax 785-828-4749

PO Box 221; Lyndon, Ks 66451

**REALTOR:** Agency & Agent Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ (1st) \_\_\_\_\_ (2nd)

**SELLER:** Name: \_\_\_\_\_ # in Family \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Phone: \_\_\_\_\_ (1st) \_\_\_\_\_ (2nd)

**LOCATION:** Address: \_\_\_\_\_ Yr Built \_\_\_\_\_ Acres \_\_\_\_\_  
Legal Description: \_\_\_\_\_  
Directions: \_\_\_\_\_

**BUYER:** Name: \_\_\_\_\_ # in Family \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ (1st) \_\_\_\_\_ (2nd)

**TYPE OF SYSTEM:** Lagoon \_\_\_\_\_ Septic Tank \_\_\_\_\_ Other \_\_\_\_\_

**WATER SUPPLY:** Rural Water \_\_\_\_\_ Well Water \_\_\_\_\_ Other \_\_\_\_\_

**WELLS:** Yes \_\_\_\_\_ No \_\_\_\_\_ Location \_\_\_\_\_

**CISTERNS:** Yes \_\_\_\_\_ No \_\_\_\_\_ Location \_\_\_\_\_

**LENDER:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Loan Officer: \_\_\_\_\_ Phone: \_\_\_\_\_ **Closing Date:** \_\_\_\_\_

**INSPECTION ORDERED BY AND RESPONSIBLE FOR PAYMENT:** \_\_\_\_\_

**HOW DO YOU WANT THE REPORT SENT TO YOU: MAIL, FAX OR EMAIL?** \_\_\_\_\_

**WHO ELSE NEEDS A COPY OF THIS REPORT AND HOW DO WE SEND IT TO THEM?** \_\_\_\_\_

**Notes:** \_\_\_\_\_

DATE: \_\_\_\_\_