

**BUYER(S) AUTHORIZATION & DECLARATION  
 OF INTENDED USAGE FORM**

<b>BUYER(S) INFORMATION</b> (Email completed form to: justin@acebobcat.com)		
Name(s):		
Current Billing Address:		
City:	Province:	Postal Code:
Phone:	Cell:	Email:
<b>PROPERTY INFORMATION</b>		
Site Address:		
City:	Province:	Postal Code:
<b>BUYER AUTHORIZATION</b>		
I/we authorize Ace Bobcat Ltd. and its Registered Practitioner to assess the on-site sewage system located on the subject property as listed above. I/we permit Ace Bobcat Ltd. and its Registered Practitioner to perform the work and accept all costs associated with this inspection as defined below.		
1. Locate and expose all components if not to surface?	<input type="checkbox"/> YES or <input type="checkbox"/> NO	
2. Pump out septic tank(s)	<input type="checkbox"/> YES or <input type="checkbox"/> NO	
3. If not accessible or we are unable to locate certain components due to depth is machine intervention allowed? (Small excavator - Kubota U25)	<input type="checkbox"/> YES or <input type="checkbox"/> NO	
4. Conduct an assessment and performance evaluation of the on-site sewage system?	<input type="checkbox"/> YES or <input type="checkbox"/> NO	
I/we will take all reasonable steps to keep clear from all areas where the Practitioner is undertaking the work as defined above, and keep others clear from the same areas.	<input type="checkbox"/> INITIAL	
I/we understand(s) that the Practitioner assumes no liability on account of accidents to persons or property. The buyer(s) hereby consent to and authorize the above service and guarantee payment of all charges pertaining to the inspection. This includes the exposing and inspection of the distribution box(es) and inspection of the septic field(s) and the inspection of the septic tank(s).	<input type="checkbox"/> INITIAL	
Buyer Name:	Buyer Signature:	Date:
Buyer Name:	Buyer Signature:	Date:

**BUYER(S) QUESTIONNAIRE**

<b>INSPECTION INFORMATION</b>	
<p>The following information is needed to properly assess the future needs and suitability of the on-site sewage dispersal system as indicated on this form, in accordance with your intentions of estimated usage.</p> <p>Ace Bobcat Ltd. and its Practitioner, based on your responses to this questionnaire, will conduct an evaluation with your future needs at the forefront. With this information, the practitioner will assess, test and evaluate the multiple components that make up the sewage dispersal system including the distribution box, the septic tank and the dispersal field lines. The following questionnaire directly relates to the practitioner's ability to perform an accurate assessment of the system's ability to function with your intended usage.</p> <p>The information gathered here will be used only for the sole purposes of determining the current condition and suitability of the sewage system.</p> <p>During the inspection, the Practitioner may need to access the home/building that the dispersal system serves in order to verify that all water using components of the home/building are properly connected to the waste water dispersal system. This testing may take up to 15 minutes.</p>	
<p>Inspection Report Completion Date (Subject Removal Date):</p>	
<b>TYPICAL LAUNDRY USAGE</b>	
1. Projected number of loads per week	_____ /week
2. Most frequently used water temperature:	<input type="checkbox"/> Hot <input type="checkbox"/> Warm <input type="checkbox"/> Cold
3. Usual load size:	<input type="checkbox"/> Large <input type="checkbox"/> Medium <input type="checkbox"/> Small
4. Is laundry done all in one day or several loads distributed throughout the week?	<input type="checkbox"/> One day <input type="checkbox"/> Evenly distributed <input type="checkbox"/> Don't track
5. What type of machine do you currently use?	<input type="checkbox"/> Top load <input type="checkbox"/> Front load
<b>OCCUPANCY &amp; INTENDED USAGE</b>	
1. How many people will occupy the home on a full time basis?	_____
2. Do you have regular overnight or long-term guests?	<input type="checkbox"/> YES or <input type="checkbox"/> No    For how long? _____

<b>INTENDED CHANGES TO HOME OR BUILDING</b>	
1. Will any renovations to the home be done following the purchase of the home?	<input type="checkbox"/> YES <input type="checkbox"/> No    What type? _____
2. Will you be adding any substantial structure or feature near the onsite system?	<input type="checkbox"/> YES <input type="checkbox"/> No    What type? _____
3. Do you plan to install a garburator?	<input type="checkbox"/> YES <input type="checkbox"/> No    What type? _____
4. Do you plan to install a swimming pool? Location?	<input type="checkbox"/> YES <input type="checkbox"/> No    What type? _____
5. Do you plan to install a hot tub? Location?	<input type="checkbox"/> YES <input type="checkbox"/> No    What type? _____
6. Will you add out buildings?	<input type="checkbox"/> YES <input type="checkbox"/> No    What type? _____
7. Will you be landscaping or creating gardens? Location:	<input type="checkbox"/> YES <input type="checkbox"/> No    Describe: _____
8. Will you be adding a home-based business that may use chemicals?	<input type="checkbox"/> YES <input type="checkbox"/> No    Describe: _____
Additional Notes:	
<b>FINDINGS DISCLOSURE</b>	
It is recommended to have your realtor onsite. Sellers and their agents may ask for information on the condition and if they need to complete repairs on their system.	
1. Please provide consent to discuss the findings of the inspection with your realtor.	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Do we have your consent to discuss the findings with the owner of the subject property? (We cannot ask owners to leave their own property please send your agent if you do not wish for them to know the findings of the inspection.)	<input type="checkbox"/> YES <input type="checkbox"/> No
3. Are there any other 3 <sup>rd</sup> party members you would like us to share the findings and or report with, please provide the contact information.	Contact Name: _____  Phone: _____  Email: _____

