



**Public Health**  
Prevent. Promote. Protect.

Karen DeMarco, MPH  
Health Officer/Director

# Hunterdon County Department of Health



[www.co.hunterdon.nj.us/health.html](http://www.co.hunterdon.nj.us/health.html)

## SEPTIC TANK WATER TIGHTNESS TEST CERTIFICATION

Engineer

Manufacturer

Township: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Street Address: \_\_\_\_\_

Owner/Applicant: \_\_\_\_\_

I, \_\_\_\_\_, certify that the Septic Tank installed on the above referenced block and lot has passed the Watertightness Test as described by the ASTM, C-1227, or the National Pre-cast Concrete Association (NPCA) testing criteria as set by N.J.A.C. 7:9A "Standards for Individual Subsurface Disposal Systems".

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Test

Size of Tank: Septic \_\_\_\_\_ Pump \_\_\_\_\_ Advanced Treatment \_\_\_\_\_

Type of Tank:  Concrete  Fiberglass  Polyethylene

Type of Test:  Vacuum Testing  Hydrostatic

\_\_\_\_\_  
Name of Tester (Please Print)

\_\_\_\_\_  
Signature of Tester

*Engineer  
Seal*

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number with Area Code

\_\_\_\_\_  
Hunterdon County Health Department: Approved By

\_\_\_\_\_  
Date

**NOTE: Repairs of existing tanks, water tightness test shall be done by a professional engineer**

\_\_\_\_\_  
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