STATE OF NEW MEXICO
ENVIRONMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
ON-SITE LIQUID WASTE SYSTEM ABANDONMENT

NMED Permit No.: ____________________________
System Owner's Name: ____________________________
Address: ______________________________________

___________________________________________

BUILDING SEWER:
____ Connected to Sewer Lines or Plugged/Capped based on UPC Requirements

ON-SITE LIQUID WASTE SYSTEM TYPE:
☐ Septic Tank  ☐ Sec./Tert. Treatment Unit  ☐ Holding Tank
☐ Seeage Pit  ☐ Other: Cesspool

ABANDONMENT PROCEDURE:
☐ System Pumped
☐ Bottom of System Opened or Ruptured or Unit Collapsed
☐ System filled with Earth, Sand, Gravel, Concrete, or Other Approved Material
☐ Top Cover Removed or Collapsed
☐ System Filled to the Top of Sidewalls or above the Level of any Outlet Pipe
☐ System Filled Level with Top of Ground Surface

COMMENTS/VIOLATIONS:
___________________________________________
___________________________________________
___________________________________________

ABANDONMENT PERFORMED BY:
Company Name: ____________________________
Address: __________________________________

___________________________________________

NMED ACTION TAKEN:
☐ Abandonment Approved
☐ Abandonment Approved w/conditions (See Comments/Violations)
☐ Abandonment Not Approved (See Comments/Violations)

FINAL APPROVAL:
☐ Granted  ☐ Not Granted

NMED Inspector Date

OK - If Abandoned and meets Requirements  NC - Not Compliant
NI - Not Inspected  NV - Not Verified
NA - Not Applicable