

RFR-RFL QUESTIONNAIRE

Site Location & Information:

Name of Contact: Kingsley Brown
Site Address: 2750 Provincial Dr.
City: Ann Arbor State: MI Zip: 48104 County: Washtenaw
Phone: 734-677-3792 Email: kingsley.browne@comcast.net

Building Type: Commercial ☐ Residential ☒ Industrial ☐ Agricultural ☐ Governmental ☐

Type of Commercial Service: _____ (Examples: Golf course, office, gas station)

Type of Residency: Home (Examples: Home, condo, apartment)

Type of Industrial Service: _____ (Examples: Warehouse, factory, mill)

Type of Agricultural Property: _____ (Examples: Farm, vineyard, field)

Type of Governmental Property: _____ (Examples: Road, park, suite)

Prequalifications for all sites:

Does the property contain a well? Yes ☐ No ☒

Is the property within 200 ft. from a TypeI or TypeIIA water supply well? Yes ☐ No ☒
(TypeI = any community well, TypeIIA = Any well supplying > 20,000 gal/day)

Is the property within 75 ft. from a Type IIB or TypeIII water supply well? Yes ☐ No ☒

Is the property within 50 ft. of a domestic well? Yes ☐ No ☒

Is the property on a large lake or in a flood plain? Yes ☐ No ☒

Is the property 500 ft. within a wetland or an inland lake or stream? Yes ☐ No ☒

Currently are there or has there ever been any underground tank(s) on the property? Yes ☐ No ☒
(i.e. - septic, fuel, gas, chemical)

_____ **If NO was answered to the questions above, continue on.** _____

Site History:

Was the site previously industrial? Yes ☐ No ☒

Was the site refilled? Yes ☐ No ☒

Was the site contaminated? Yes ☐ No ☒

If yes to the questions above, provide explanation such as when, where, why.

Does the property have a septic tank or septic field? Yes ☐ No ☐

If yes, check all that apply:

Existing septic tank ☐ Removed septic tank ☐ Existing septic field ☐ Removed septic field ☐

Parjana Representative Contact Information:

Name : Mike Wynn

Phone: 734-883-9425

Date of Request: 4-16-14

Company : Aqua-Channel

Email : mwynn@aqua-channel.net

Client's Budget expectation: Hope to keep it under \$6k

Draining Objective:Standing water ☒Waterproofing (foundation) ☐

Please indicate specific problem area(s) for standing water or waterproofing on drawing/picture.

Comments and/or additional explanation if needed:

Get a 10' X 10' area of standing water that stays for several days after a rainfall, can get up to 8" deep and overflow to a secondary area along the fence line where it also pools for several days.

Water Supply:Well Water ☐City Water & City Sewer ☒

What is the type and depth of the well?

Have you experienced any of the following issues?

			<i>North</i>	<i>South</i>	<i>East</i>	<i>West</i>
Water in walls <input type="checkbox"/>	Chimney door/pipe <input type="checkbox"/>	Bowed walls <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water over/under footer <input type="checkbox"/>	Rod Holes <input type="checkbox"/>	Cracked walls <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window cap crack <input type="checkbox"/>	I-Beam Leak <input type="checkbox"/>	Leaking gutters <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor crack <input type="checkbox"/>	Sewer backups <input type="checkbox"/>					

Discuss the severity of each checked issue.

Potential Barriers/ Concerns:Underground obstacles ☐Sprinkler system ☐Lakes, ponds, surrounding bodies of water ☐Fertilizer storage ☐Underground pool ☒Surrounding environment inclines/declines ☐Accessibility Barriers (decks, paver patios, wires, landscaping, narrow gates, steep inclines/declines) ☐

If accessibility barriers checked, please describe: Note: Describe the type of patio/deck and whether it is removable.

Will need to hand-auger, there isn't room for the drilling rig to maneuver in the area. If the problem can't be solved with 5" and 10' EGRPs, we can't install.

Foundation Description:Basement ☐Crawl Space ☐Slab ☐Partial ☐

Please indicate slab area(s) on map/drawing.

Foundation Type:Block wall ☐Concrete wall ☐Brick wall ☐Stone wall ☐

Depth of basement:
(measurement from ground level to basement floor)

Sump pump depth:
(measurent from basement floor to bottom of pit)


Ground level slope:
(Postive or negative grade?)

Note: If any grade, indicate on the map/drawing where along the building the grade occurs.

Sump pump: Yes ☒ No ☐

Number of pumps:

Frequency:

Location of each pump:  Note: If any, indicate on the map/drawing location of each and every one with the sump pump symbol.

Additional comments:

Attachments:Map ☒CAD ☐Blue Print ☐Drawing ☐Other ☐**Screenshot Checklist:**

- ☒ Identify exact location on aerial view
- ☒ Highlight specific problem area(s) on property to be addressed
- ☐ If not a full basement, indicate slab and/or crawl space areas
- ☐ Note where issues/potential barriers/concerns are on the property
- ☐ Highlight specific area(s) that cannot be accessed by drill
- ☒ Draw on map/drawing property lines
- ☐ Provide additional photos of property, problem area(s) and surrounding area
- ☐ If problem is complex, follow-up with layout enginner to provide additional explanation/details.