



Washtenaw County  
Health Department

Environmental Health Division

705 N. Zeeb Road • Ann Arbor, MI 48103  
Phone: (734) 222-3800 • Fax: (734) 222-3930  
www.washtenaw.org/envhealth

01/08/2026

JENNEFER HAINES  
1873 W HURON RIVER DR  
Ann Arbor, MI 48103

RE: Approval of Authorization for Sale of  
Property Located at:  
1873 W HURON RIVER DR, Ann Arbor, MI 48103  
Ann Arbor Township - I -09-07-460-008  
TOS2026-0004

Dear JENNEFER HAINES,

On 01/05/2026 this office received an inspection report for the well and/or septic system at the above referenced address. This report was reviewed to determine compliance with Washtenaw County Regulation for the Inspection of Residential Onsite Water and Sewage Disposal Systems at Time of Property Transfer. Based on the information submitted it has been determined that the system(s) is/are functioning properly and are adequate for their intended use.

As the result of this review this PROPERTY IS AUTHORIZED FOR TRANSFER OF THE DEED.

This letter does not imply that the system(s) meet new construction standards. Further, this authorization does not imply or express any warranty or guarantee as to the future function and suitability of the inspected systems. The referenced evaluation was performed based on current operation, and any change in use may change the operational status of the system(s). This authorization applies solely to residential use of the existing home as reported. Any intent to increase home capacity or alter use of the property will necessitate further evaluation(s) of the well and/or on-site sewage systems by this office. This may result in the need to expand, replace or upgrade systems/components. If such changes are anticipated, it is advised that you contact our office to discuss the implications of the proposed changes.

Although authorized for property transfer, we do make the following recommendations:

- The home has been vacant for 1 week and the condition of the system may not be representative of a system that is in use.
- The well casing terminates 11 inches above grade, increasing the possibility for surface contaminants to enter the water supply. The well casing should extend to at least 12 inches above grade
- A water treatment device is installed at the kitchen sink. Water samples from raw water revealed arsenic levels in the water were found below the US EPA recommended limit of 10 parts per billion (PPB) or less. It is recommended that the water treatment device be maintained as directed by the manufacturer.
- Provide an air gap for the water treatment discharge. It should be suspended above the drain to prevent contaminants from backing up into the water supply.
- Install a sample tap 8 inches of the floor near the pressure tank to facilitate sampling and troubleshooting any future problems that may occur.
- The septic tanks were not pumped or inspected as part of the inspection. According to the inspection report, the tanks were last pumped 1 year ago. The septic tanks are undersized by current standards. To compensate, this Department recommends pumping out the septic tanks every 3 to 4 years and that no "additives" be used in the tanks. Installing low flow plumbing fixtures would also extend the life of the drainfield. Property owners have full responsibility for upkeep, maintenance and repair of the systems. If replacement becomes necessary in the future, a system that meets current standards would be required.



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- The drainfield had 26 to 32 inches of cover. Cover should be maintained at 12 to 24 inches for optimum performance of the sewage system; however, re-grading is not recommended if it would cause ponding of surface water over the drainfield. Any future replacement system should be installed at an elevation to accommodate proper grading.
- The drainfield was showing signs of stress at the time of inspection. The inspection report indicates that more than 50% of the drainfield is saturated below the tile outlet holes and less than 50% of the drainfield is sludged below the tile outlet holes.
- An automatic sprinkler system was noted near the sewage system. Sprinkler heads that spray onto the sewage system should be closed off. Surface water interferes with the natural function of the drainfield and creates a burden on the system.

This Authorization should be kept with other important records concerning this property.

This AUTHORIZATION is valid until 12/29/2026.

Any questions regarding this letter should be directed to Washtenaw County Environmental Health.

A handwritten signature in cursive script that reads "Caitlin Handy".

Caitlin Handy,

[handyc@washtenaw.org](mailto:handyc@washtenaw.org)  
734-222-3941



TIME OF SALE INSPECTION REPORT
FOR RESIDENTIAL ONSITE WATER SUPPLY & SEWAGE DISPOSAL SYSTEMS

This report is submitted as required by the Washtenaw County Regulation for the Inspection of Residential Onsite Water and Sewage Disposal Systems at Time of Property Transfer. This report is to be completed by inspectors certified by the Washtenaw County Health Department.

Property owner name: Jennefer Haines

Property street address: 1873 W Huron River Dr city: Ann Arbor zip: 48103

Township: Ann Arbor Property Tax ID #: 1 - 0 9 - 0 7 - 4 6 0 - 0 0 8

Information in this box MUST be complete for report to be processed.

SEND REPORT TO:

Applicant name: same Phone: 734-709-4513

Street address:

City: State: Zip:

Email: jenshaines@gmail.com Email:

Age of home: 35 years Number of bedrooms: 3 Number of bathrooms: 3

Current number of residents: - OR - Time of vacancy: one week months

Date(s) inspected: 12-29-25

System(s) inspected: [X] Onsite Water Supply (Reason not inspected) [X] Onsite Sewage Disposal (Reason not inspected)

Being a Washtenaw County Certified Time of Sale Inspector, I personally inspected the onsite water supply and/or onsite sewage disposal system(s) indicated above. I certify that this inspection was conducted within the guidelines established by Washtenaw County and was completed in a thorough and complete manner. Further, I certify that this report includes all knowledge that I have concerning the operation and function of said system(s).

Inspector Name: Jack Spack Signature:

Date: 1-4-26 Certification Number: 041 signed Jack Spack

Water samples submitted/attached (bacteria, arsenic, nitrate): [X] Yes [ ] No [ ] N/A

Site plan submitted/attached: [X] Yes [ ] No

Upload completed form to: https://permits.ewashtenaw.org

RECEIPT

- [X] Applicant information complete
[X] Water samples (bacteria, arsenic, nitrate) included, if applicable
[X] Site plan included

TOS 20 26 - 0004

Project #: INV-79890

# WATER SUPPLY SYSTEM

Age of well(s): 35 yrs

Permit #: 90 00301

Approval date: 12-21-90

Well depth: 74 feet

### Verified from:

Well log  Driller  County records  Owner

Location:  On property  Off property

Number of other wells on property: 0

Complete for each additional well:

Use: \_\_\_\_\_

Diameter: \_\_\_\_\_ inches

In use and produces water:  Yes  No

Separate from potable water supply:  Yes  No

### Isolation distances to well not met:

(fill in actual distance if minimum not met)

Drainfield (<100 ft.): \_\_\_\_\_ ft.

Septic tank (<50 ft.): \_\_\_\_\_ ft.

Grinder pump (<50 ft.): \_\_\_\_\_ ft.

Sewer line (<50 ft.): \_\_\_\_\_ ft.

HazMat storage (<100 ft.): \_\_\_\_\_ ft.

Fuel oil tank (<100 ft.): \_\_\_\_\_ ft.

Buried:  Yes  No

In basement:  Yes  No

Concrete floor:  Yes  No

### Pump Type:

Submersible

Deep well jet\*

Shallow well jet\*

Other: \_\_\_\_\_ \*

\*Protected suction line:  Yes  No

### Cycling:

Long (>90 sec.)

Adequate (30-90 sec.)

Short (<30 sec.)

Yield (approx.): >7 gpm

Casing diameter: 5 inches

### Termination:

Above grade: 11 inches above ground

Basement offset: \_\_\_\_\_ inches above floor

Drained pit: \_\_\_\_\_ inches above floor

Undrained pit

Dug well

Not found / buried

### Well cap:

Structurally sound

Cap loose

Cap missing

Cap loose with insects

Cap / conduit / casing damaged

### Venting:

Not vented

Screened vent

Unscreened vent

Unscreened vent with insects

### Water treatment in use:

Softener

Sediment filter

Iron removal

Reverse osmosis\*\*  Point of use  Whole house

Other: \_\_\_\_\_

\*\*Arsenic sampling recommendations for homes with arsenic treatment: If there is a previous arsenic sample on file that was unsafe, take a sample of the treated water. If there are no previous arsenic sample results on file but the home has an arsenic treatment system, take a sample of untreated water and a sample of treated water.

Water treatment discharge air gapped:  Yes  No

Sample tap present and 8 inches above floor:  Yes  No

Pressure gauge working properly:  Yes  No

Wellhead covered (fake rock, etc.):  Yes  No

Yard hydrant:  Yes  No

Shared well:  Yes  No

Flowing well:  Yes  No

If Yes, flow discharged properly:  Yes  No

# SEWAGE DISPOSAL SYSTEM

Age of system(s): 35 yrs

Permit #: 90 00300

Approval date: 12-6-90

Location:  On property  Off property

Municipal / sanitary sewer available:  Yes  No

Plumbing in secondary structures:  Yes  No

If Yes, explain: \_\_\_\_\_

Sewage exposed (backup, discharge, surface, etc.):  Yes  No

### NOT CONNECTED TO SYSTEM:

- Toilet(s)
- Sink(s)
- Shower(s)
- Tub(s)
- Laundry
- Other: \_\_\_\_\_

### CONNECTED TO SYSTEM:

- Footing drains
- Water treatment discharge(s)
- HVAC discharge(s)
- Storm water drain(s)
- Other: \_\_\_\_\_

### SEPTIC TANK(S):

*If tanks have not been inspected and approved by our office, attach a Septic Tank Maintenance Report from a MI licensed septage pumper.*

Number of tanks: 2

Total capacity: 2000 ~~1800~~ gallons 90%

Verified by:  County records  Pumping receipts

Last pumped: 1 years ago

Type of system:  Gravity  Pump

If pump, is alarm functional:  Yes  No

Accessible for pumping:  Yes  No

Tank lid / riser to grade:  Yes  No

If lid / riser to grade, is it secure and watertight:

Yes  No

If lid / riser not to grade, is tank access within 18" of grade:

Yes  No

### Isolation distances to septic tank(s) not met:

(fill in actual distance if minimum not met)

Surface water (<25 ft.) \_\_\_\_\_ ft.

Nearest well (<50ft.) \_\_\_\_\_ ft.

### DISPOSAL AREA(S): (add another page 3 if there are 2 drainfields)

#### Number of disposal area(s):

- None found
- One
- Multiple - one connected
- Multiple connected\*
- Multiple with diverter\*

\*Fill out drainfield information for each field and show on site plan.

#### Type of disposal area(s):

- Bed - conventional
- Bed - deep excavation
- Bed - raised
- Modified fill

Size of bed: <u>1232</u> sq. ft. ( <u>28</u> ft. x <u>44</u> ft.)
Verified by: <input checked="" type="checkbox"/> County records <input type="checkbox"/> Field measurement

Trenches

Number of trenches: _____
Trench width: _____ ft. Trench length: _____ ft.

Dry well

Other: \_\_\_\_\_

Depth of cover: 26 min. inches to 32 max. inches

#### Wetness in drainfield:

- None
- Yes, below tile holes in less than 50% of field area
- Yes, below tile holes in more than 50% of field area
- Yes, above tile holes in less than 50% of field area
- Yes, above tile holes in more than 50% of field area

#### Sludge / Biomat in drainfield:

- None
- Less than 50% below tile holes
- More than 50% below tile holes
- Less than 50% above tile holes
- More than 50% above tile holes

#### Tile:

- Plastic - per records / age / observed
- Plastic - per owner
- Concrete / clay - per records/age
- Concrete / clay - per owner
- Concrete / clay - observed / detected

#### Isolation distances to field not met:

(fill in actual distance if minimum not met)

Nearest well (<100 ft.): \_\_\_\_\_ ft.

Surface water (<50 ft.): \_\_\_\_\_ ft.

#### Sandy soil under field:

Yes  No

#### Surface water diverted from system:

Yes  No

#### Woody vegetation on / within 5 feet of system:

Yes  No

#### Automatic sprinklers on / near system:

Yes  No

#### Encroachment on field:

Yes  No

If Yes, show type and location on site plan.

## SITE PLAN

**A. The site plan must be an accurate representation of the property.**

The plan must include building footprints and all relevant site features, such as driveways, pools, ground-based solar panels, ponds/streams, overhead power lines, etc. The site plan must:

- Be drawn to scale -OR-
- Show distances to specific points (such as the house) for the well(s), septic tank(s), and drainfield(s)

**B. The site plan must contain the location and conditions of each test hole.**

The plan must include the minimum and maximum amount of drainfield soil cover. It must also include where moisture and/or sludge/biomat is found, and if it is observed in the stone and/or the sand. Examples:

- 22" cover, clean dry stone, clean dry sand
- 18" cover, dirty wet stone below tile, gray damp sand

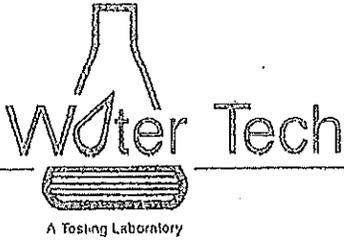
**C. The sewage system evaluation must include a minimum number of test holes.**

- At least 2 augers required for permitted or previously inspected systems
- At least 3 augers required for systems showing wetness / biomat / sludge
- At least 4 augers required for unpermitted or never inspected systems

## INSPECTOR OBSERVATIONS / COMMENTS / RECOMMENDATIONS

Based on data presented in this inspection report, the Washtenaw County Environmental Health Division will issue a letter stating whether the water supply and/or sewage disposal system(s) meet minimum standards for transfer of the property. If an inspection report shows the system(s) to be acceptable, authorization will be granted for the deed to be transferred to the new homeowners. If the inspection report reveals significant issues with the system(s), the home sale can take place once repairs are made, or once a corrective action plan is submitted to and approved by the Environmental Health Division.

The following are observations or recommendations made by the certified Time of Sale inspector. Note that these observations or recommendations are in addition to any requirements addressed by the Environmental Health Division:



718 S. Michigan

Howell, MI 48843

(517) 548-2505

Fax (517) 548-3434

## WATER ANALYSIS RESULTS

Date Sampled: 12/29/2025 12:00

Date Received: 12/29/2025

Collected By: Spack

Sample Point: Kitchen

To:

Jack Spack  
7415 Carpenter Rd  
Ypsilanti, MI 48197

Sample ID:

1873 W. Huron River Drive  
Ann Arbor

Lab Sample Number: 204979-02

Test Parameter	Result	Units	RL	Method	Analysis Date	Analyst	Maximum Desired Limit
Total Coliform	Absent	Pres/Abs.		SM9223B	12/29/2025 16:45	CTM	MCL=Abs. Or 0
Nitrate-N	< 0.20	mg/L-N	0.1	SM4500NO3	12/29/2025 18:13	CTM	MCL=10
Total Arsenic	Not Detected	mg/L	0.001	EPA200.8	12/30/2025 0:00	CTM	MCL=0.010

Released By: 

Date: 12/30/2025

Laboratory #0023 assigned by the Michigan Department of Environment and Great Lakes (EGLE) for the microbiological and chemical analysis of drinking water.

### ABBREVIATIONS:

RL = Lowest reporting level

MCL = Maximum Contaminant Level - The maximum permissible level established by the USEPA and or EGLE for safe drinking water.

SMCL = Secondary Maximum Contaminant Level - Suggested maximum level established by the USEPA for desirable water quality.

CFU/100 ml = Colony Forming Units/100 milliliter sample volume.

mg/L = Milligrams per liter (= parts per million).

T.O.S. 1873 W HURON RIVER DR.

12-29-25 SPACK

