

Maintenance Checklist: Advanced Treatment System



Operational Checklist: Advanced Treatment System

Service provided on: Date: _____ Time: _____ Reference #: _____

Service provided by: Company: _____ Employee: _____

Date of last service: _____ By: ☐ You ☐ Other: _____ Date of last inspection: _____

1. Type of media filter: ☐ Acceptable ☐ Unacceptable

Fixed Film: ☐ AeroCell ☐ Bio-COIR
Sand Filter: ☐ Intermittent ☐ Recirculating
Wetlands: ☐ Lined ☐ Unlined

a. Manufacturer: _____ Model #: _____

b. Distribution method: ☐ Pressure distribution ☐ Gravity distribution

2. Conditions at media filter ☐ Acceptable ☐ Unacceptable

a. Evaluate presence of odor within 10 ft of perimeter of system:

☐ None ☐ Mild ☐ Strong ☐ Chemical ☐ Sour

b. Source of odor, if present: _____

3. Cover ☐ Acceptable ☐ Unacceptable

a. Type of cover: ☐ Free access ☐ Buried ☐ Lid

b. Filter cover intact ☐ Yes ☐ No

c. Method of securing cover: _____

d. Distribution component accessible ☐ Yes ☐ No

e. Surface water/infiltration into components. ☐ Yes ☐ No

4. Venting/Air supply: ☐ Acceptable ☐ Unacceptable ☐ Passive ☐ Active

a. Supply: ☐ Blower ☐ Free air

b. Operation: ☐ Continuous ☐ Timed (On _____ min., Off _____ min.)

c. Air supply unit operating properly. ☐ Yes ☐ No

d. Venting appears operable. ☐ Yes ☐ No

5. Media surface ☐ Acceptable ☐ Unacceptable

a. Biomat on surface. ☐ Yes ☐ No

b. Uniform spray pattern. ☐ Yes ☐ No

d. Ponding in/on media. ☐ Yes ☐ No

e. Plugging/clogging of nozzles. ☐ Yes ☐ No

f. Media appears to be settling. ☐ Yes ☐ No

g. Appropriate maintenance performed. ☐ Yes ☐ No

h. Pest activity at surface. ☐ Yes ☐ No

6. Effluent quality ☐ Acceptable ☐ Unacceptable

a. Turbidity: _____ NTU

b. Oily film on the surface of effluent. ☐ Yes ☐ No

c. DO at outlet: _____ mg/L

d. pH at outlet: _____

e. Temperature at outlet: _____

f. Bypass or overflow noticed. ☐ Yes ☐ No

g. Effluent odor after passing through media filter: ☐ None ☐ Mild ☐ Strong

h. Effluent color after passing through media filter: ☐ Clear ☐ Brown ☐ Black

Reference #: _____

7. Additional tasks for recirculating filters ☐ Acceptable ☐ Unacceptable

- a. DO in recirculation tank: _____ mg/L
- b. Inspected recirculating device. ☐ Yes ☐ No
- c. Cleaned recirculating device. ☐ Yes ☐ No
- d. Design recirculation ratio: _____ :
- e. Actual recirculation ratio: _____ :
- f. Recirculation changed to: _____ :

8. Pump System ☐ Acceptable ☐ Unacceptable

- a. Control panel in Auto. ☐ Yes ☐ No
- b. Current timer settings ☐ Yes ☐ No
- c. Floats in correct placement ☐ Yes ☐ No
- d. High water alarm operational ☐ Yes ☐ No
- e. Elapsed time reading _____
- f. Cycle counter reading _____
- g. Filtered pump vault serviced ☐ Yes ☐ No
- h. Tank lids secured after inspection ☐ Yes ☐ No

9. Primary Tank ☐ Acceptable ☐ Unacceptable

- a. Sludge and scum level checked ☐ Yes ☐ No
- b. Tank needs to be pumped ☐ Yes ☐ No
- c. Effluent filter serviced ☐ Yes ☐ No
- d. Tank lids secured after inspection ☐ Yes ☐ No

10. Manufacturer's required maintenance performed. ☐ Yes ☐ No

11. Lab samples collected for monitoring. ☐ Yes ☐ No

Types of analysis: _____

Other Comments:

Service Provider: _____ Date: _____

Home Owners Limited Warranty and Service Agreement



THIS AGREEMENT is made by and between:

(Name) _____ (Street address) _____ (City/state/zip code) _____

(Name) _____ (Street address) _____ (City/state/zip code) _____

Hereinafter SERVICE PROVIDER/INSTALLER; for the purpose of providing maintenance service for an AeroCell or Bio-COIR Advanced Treatment System, Hereinafter AeroCell/Bio-COIR; Installed at

(Name) _____ (Street address) _____ (City/state/zip code) _____

Service Period: The service period begins on the date of Final Inspection and approval by the governing regulatory authority or date of HOMEOWNER use, whichever comes first. This agreement is for a service period of two (2) years.

Service Charge: This initial two (2) year service agreement is included in the initial system purchase price. The manufacturer or authorized representative shall make available for purchase by the owner an extended service policy with terms comparable to those in the initial service policy. The cost of the extended service agreement is (\$ _____).

Additional Charges:

This contract price does not include the cost of the following items, a) pumping the septic tank or pump basin(s), b) repair or replacement of parts that are furnished or manufactured by parties other than **QUANICS**, or c) repair or replacement of parts manufactured by **QUANICS** for which the warranty has expired.

AeroCell/Bio-COIR Systems: The AeroCell/Bio-COIR Systems includes the septic tank(s), septic tank filter or filter plates, pump basin(s), pump(s) and controls, recirculation device, final dispersal system, AeroCell/Bio-COIR Modules/ and all miscellaneous parts attached to and required for the operation and service of the system.

HOMEOWNER Responsibilities:

The HOMEOWNER confirms that he has read and understands the AeroCell/Bio-COIR Operation Manual and agrees to operate the **QUANICS** AeroCell/Bio-COIR Advanced Treatment System in accordance with **QUANICS**'s operating instructions. Failure to use the system in accordance with the Operation Manual will void all warranties. All repairs required to restore the system to normal operation will be at the HOMEOWNER's expense.

Service Provided:

Under this agreement, normal service means minor adjustments and repairs required to keep the system in proper operation and does not include repairs required by improper installation or misuse of the system by others. Service also does not include repair or replacement of any components that may be required due to normal use and wear that are not covered by **QUANICS**'s warranty. **QUANICS** or **QUANICS**'s Certified SERVICE PROVIDER shall inspect the AeroCell/Bio-COIR systems once each six (6) months for a period of two (2) years, and service the components as outlined below:

General Service:

1. Waste Flow Usage: Determine the daily waste flow by reading the water meter or, if so equipped, the system flow meter.
2. Collect Effluent Sample: Sample should be clear with a slight yellow tint, free from suspended solids and free from septic odor. Samples not meeting this criteria should be analyzed for BOD and TSS levels.
3. HOMEOWNER Notification: Send a copy of the service report to the HOMEOWNER. Advise the HOMEOWNER in writing of any problems or corrections including excessive water use. Notify the owner in writing about improper system operations that cannot be remedied at the time of inspection.
4. Regulatory Notification: Send a copy of the service report to the applicable regulatory agency, if required.
5. Manufacturer Notification: Send a copy of the service report to **QUANICS** as required to continue the AeroCell Limited Warranty.

QUANICS Components:

1. AeroCell/Bio-COIR: Remove and clean the spray nozzles. Inspect the pipe orifice and clean as needed. Inspect the foam media and clean as needed.
2. Pump(s) and Controls: Inspect the pumps(s) and controls for proper operation and settings. Activate the components and observe for proper function. Adjust settings as needed.
3. Septic Tank Filter/Filtered Pump Vault: Inspect the filter or filter plates and clean as needed.
4. Pump Basin(s): Inspect for excessive solids buildup and notify the HOMEOWNER to have the Basin pumped or upon HOMEOWNER's request pump the tank at the HOMEOWNER's expense.
5. Miscellaneous **QUANICS** Components: Check any other **QUANICS** components and adjust as necessary.

NON-QUANICS Components:

1. Septic Tank & Pump Tank: Inspect for excessive solids buildup and notify the HOMEOWNER to have the tank(s) pumped or upon HOMEOWNER's request pump the tank at the HOMEOWNER's expense.
2. Final Dispersal System: Inspect the system for signs of improper effluent discharge. Inspect the system for proper surface diversions. Advise the system HOMEOWNER of any corrections they should make.
3. Miscellaneous Components: Check any other components and adjust as necessary. Advise the HOMEOWNER if repairs are required.

Emergency Service: In the event the AeroCell/Bio-COIR unit(s) stops operating, service shall be provided within 48 hours of notification to the authorized SERVICE PROVIDER/INSTALLER. Emergency Service required because of HOMEOWNER abuse or misuse, or because of repairs or service to the AeroCell/Bio-COIR unit(s) by an unauthorized third party shall be at the HOMEOWNER'S expense.

QUANICS Limited Warranty:

QUANICS warrants each AeroCell® & Bio-COIR® wastewater treatment system to be free from defects in material and workmanship as follows: AeroCell and Bio-COIR treatment modules, controls, filters, risers & basins for a period of two (2) years from the date of installation; pumps for a period of three years from the date of installation date; AeroCell foam media for a period of ten years from installation date; Bio-COIR media for a period of two years from installation date. Discontinued parts will be replaced with the closest current **QUANICS** equivalent. In no event shall **QUANICS** be liable for any incidental or consequential damages or any labor, material, freight or any other expense required to replace, correct or reinstall the product. **QUANICS**'s liability is limited to repair or replacement of the part. Except as stated herein, there are no warranties express or implied, including the warranty of merchantability or warranty of fitness for a specific purpose. All warranties are void if the product has been improperly modified, applied or installed, subjected to misuse or abuse. All warranties are void if this Service Contract is terminated for lack of payment or is not renewed at the end of the contract period.

SERVICE PROVIDER/INSTALLER Limited Warranty

The SERVICE PROVIDER/INSTALLER extends to the HOMEOWNER all limited warranties as provided by any manufacturers. Any parts not specifically warranted by any manufacturer shall be warranted by the SERVICE PROVIDER/INSTALLER for material and workmanship including labor to repair or replace any defective parts for a period of two years beginning on the date of final inspection and approval by the governing regulatory authority or date of HOMEOWNER use whichever comes first.

This agreement contains all warranties, representations and conditions made by and between the parties hereto. No modification, amendment, discharge or supplement to this agreement or waiver or release of any term hereof shall be valid or binding unless in writing and signed by all of the parties hereto. This agreement shall be governed, construed and interpreted in accordance with the laws of the Commonwealth of Kentucky.

Accepted by:

Accepted by:

HOMEOWNER SIGNATURE

INSTALLER/SERVICE PROVIDER SIGNATURE

Date _____

Date _____

