## MAINTENANCE RECORD FOR ONSITE SEWAGE DISPOSAL SYSTEMS

**PROPERTY INFORMATION**

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<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>TOWNSHIP</th>
<th>SEC #</th>
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<th>OWNER/AGENT</th>
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1. **Volume of Tanks(s):**
   - Tank #1: _______
   - Tank #2: _______
   - Tank #3: _______
   - Pump Chamber: _______

2. **Number of Tanks Pumped:** _______
   - Outlet Baffle(s) – In place and functioning? Yes ___ No ___

3. **Tank Construction:**
   - Precast: ___
   - Block: ___
   - Steel: ___
   - Other: ___

4. **Disposal System Type:**
   - Bed: ___
   - Tile Field: ___
   - Drywell: ___
   - Other: ___

5. **Was the drywell pumped?** Yes ___ No ___

6. **Was there any flow back into the tank?** Yes ___ No ___
   - Other signs of failure? Yes ___ No ___

7. **IF yes to either in line 6 – explain**

   ____________________________________________________________
   ____________________________________________________________

   ______________________________________________________________________________________
   ______________________________________________________________________________________

Name of Company: ____________________________________________  Date Pumped: ______________________

Pumper Signature: ____________________________________________  Date: _____________________________

Disposal Site: ________________________________________________

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**SITE PLAN DRAWING**

All submitted statements must be accompanied with a site plan drawing. PLEASE include all of the following that apply.

- Residence, garage, driveway, other out buildings, pools, fronting road, and any other pertinent property information