



On-Lot Septic Pumping & Inspection Report

LOWER FREDERICK TOWNSHIP



PROPERTY OWNER:

Name:

Address:

Phone:

REPORT:

Property Location: (if different than above)

Name of Company Pumping System:

Date of System Pumping/Inspection:

Type of Tank: Steel: Concrete: Other:

Size of Tank: gallons **No. of gallons pumped:**

Tank Condition: Okay: Needs Repair: (type of repair)

Are there signs of Malfunction? (circle all that may apply)

- | | |
|--|--|
| <p>Lush grass/vegetation</p> <p>Surface Water</p> <p>System overflow</p> <p>Wetness or spongy areas</p> <p>Other</p> | <p>Building Sewer Inlet Line</p> <p>Inspection port over inlet baffle</p> <p>Inlet baffle</p> <p>Outlet baffle</p> <p>Effluent delivery line</p> |
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Additional Notes/Comment:

REPORT VERIFICATION:

- On- Lot Pumping and Inspection Reports must be submitted to the township every three years at minimum.
- Complete and return this form to the township office within 10 days from the date of service.
- The above information is true and accurate to the best of my knowledge and belief.

Name: (print)

Signature: **Date:**