

Private Sewage System Maintenance Report - The purpose of this report is to comply with WI Administrative Code Section 83.52-83.55 and Section 8.12.220A of the Eau Claire County Sanitary Code. This report needs to be filled out by a licensed POWTS (Private Onsite Waste Treatment System Maintainer) and returned to the Department within the due date. This report is NOT intended to fulfill the requirements of a septic system inspection for sale of property.

Name:
 Address:
 City, State, Zip:

REPORT DUE DATE:

Private Sewage System Inspection Certification
 (This section needs to be completed by a licensed Maintainer)

Property Location:

I have performed the following services at the above premises on _____ (date w/year) and certify the following inspection findings as being true and accurate:

1. The (septic tank) (pump chamber) was pumped.
 Total Gallons Pumped: _____
 Septage Disposal Location: _____
 Pumping not required at time of inspection due to sludge/scum NOT occupying more than 1/3 of tank.
2. Effluent filter present? Yes No If Yes - Was the filter cleaned? Yes No
3. I observed illegal pumping or outfall pipe: Yes No
4. I observed problems that may cause backup of wastewater into home: Yes No
5. I observed liquid discharge/ponding from the system onto the ground surface: Yes No

 Signature of Inspecting Person License Number

 PRINTED Name and Company providing service

Please Return Form To:
 Eau Claire City-County Health Department
 720 Second Ave
 Eau Claire, WI 54703

For Office Use Only
 Sewer ID #
 PIN #
 Alternate #: