



# ON-SITE SEWAGE SYSTEM OPERATIONS & MAINTENANCE REPORT: SEPTIC TANK PUMPING INSPECTION REPORT

# EM- 6

Address: \_\_\_\_\_  
 Owner Name: \_\_\_\_\_ Parcel #: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ # of Bedrooms : \_\_\_\_\_ Email : \_\_\_\_\_  
 Date of Pumping: \_\_\_\_\_ Date of last pumping: \_\_\_\_\_  
 Licensed Pumper: \_\_\_\_\_ Type of Drainfield: \_\_\_\_\_

### 1. Overall System Status:

SURFACING EFFLUENT AND / OR PONDING PRESENT  Yes  No

### 2. Septic Tank / Pump Chamber Status:

- ◆ Tank Size \_\_\_\_\_ gallons
- ◆ Septic tank appears to be watertight & in good condition  Yes  No
- ◆ Tank Material  Concrete  Fiberglass/Polyethylene  
 Steel\*  Other \_\_\_\_\_
- ◆ Number of Compartments  Single  Double  Other \_\_\_\_\_
- ◆ Tank Access at Grade  Yes  No Lid buried \_\_\_\_\_ ft. deep
- ◆ Condition of Tank Risers  Intact & Watertight  Damaged  Not Present
- ◆ Condition of Tank Lids  Intact & Watertight  Damaged  Not Present
- ◆ Condition of Inlet Baffle  Intact  Damaged  Not Present
  - Condition of Outlet Baffle  Intact  Damaged  Not Present
  - Condition of Compartment Baffle  Intact  Damaged  Not Present
- ◆ Effluent Filter Present  Yes  No
  - Effluent Filter Clean\*\* & Free of Debris  Yes  No  NA
- ◆ Liquid Level Relative to Invert of Outlet  At  Above  Below
- ◆ After pumping tank, did sewage flow back into tank from drainfield?  Yes  No
- ◆ Layers in Tank: Tank pumping required per CCC 15.42 if total sludge and scum occupy 25% to 33% of your total septic tank volume or if any sludge is present in pump chamber.

	Scum Depth (inches)	Clear Zone Depth (inches)	Sludge Depth (inches)
Compartment #1			
Compartment #2			
Pump Chamber			

\*Steel tanks should be replaced. Contact CCB&P for tank replacement information.  
 \*\*Effluent filter should be hosed off into 1<sup>st</sup> compartment of septic tank every 6 months.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Cowlitz County Building & Planning assumes no responsibility for the accuracy of the information provided, nor does it guarantee the future condition or function of the on-site sewage system. Homeowners are responsible for correcting any problems noted on this form, and obtaining the proper permits prior to repair. If your septic system is not functioning properly, please contact CCB&P for assistance.

### For Official Use Only

Report Reviewed By: \_\_\_\_\_ Deficiencies Noted:  Yes  No  
 Pumper Contacted:  Yes, Date: \_\_\_\_\_  No Deficiencies Corrected:  Yes  No  NA

Notes: \_\_\_\_\_