

## DOOR COUNTY MAINTENANCE PUMPING REPORT

PROPERTY OWNER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical Address of Property: \_\_\_\_\_ (must be completed)

### NOTICE

Dear Property Owner:

The Door County Private Sewage System Ordinance and the Wisconsin Fund Grant Program require a maintenance program for all private sewage systems installed since January of 1980. In checking our records we have found that your septic tank is due for pumping or inspection to determine if service is needed this year.

Maintenance of your system involves the inspection of your septic tank **at least once** every three (3) years. The licensed plumber or waste hauler inspecting the tank shall certify on this form that either: (1) the tank is less than 1/3 full of solids or (2) the tank has been pumped and inspected. After this report is completed, it is the property owner's responsibility to return this form to the Door County Sanitarian's Department prior to October 31, 2002. The property owner shall also sign the form certifying inspection and/or pumping in of the tank AND note the physical address of the property in the area provided above.

**Please be advised that failure to have your septic tank inspected and/or pumped is in violation of Chapter s.21.04.L of the door County Private Sewage System Code and will result in the issuance of a citation for violation of this code. This report form shall be returned to the Door County sanitarian's Department for verification of inspection and/or service of the septic tank prior to October 31, 2002.**

The utility plants of Sister Bay, the Village of Ephraim, and the City of Sturgeon Bay are requesting that all septic tank wastes are disposed of prior to the end of September so that these plants are able to complete seasonal down-sizing prior to winter weather. If at all possible, please have your septic tank pumped prior to the end of September.

**NOTE TO PLUMBER OR LICENSED HAULER: Please complete the following portion of this notice noting if the tank was pumped and inspected OR inspected and found to not be in need of pumping.**

**SEPTIC TANK SERVICE REPORT:**

No Service Needed/Less than 1/3 of Solids: \_\_\_\_\_ (Indicate date of inspection here)

If tank was pumped indicate date of service: \_\_\_\_\_

Size of Tank: \_\_\_\_\_ Tank Material: \_\_\_\_\_

Condition of Baffles: Inlet \_\_\_\_\_ Outlet \_\_\_\_\_

Visual inspection of soil absorption area -effluent surfacing: yes \_\_\_\_\_ no \_\_\_\_\_

\_\_\_\_\_  
Signature of Licensed Plbr. or Licensed Waste Hauler      Print Name      Cert.No.      Date of Signature

\_\_\_\_\_  
*Owner Signature*

\_\_\_\_\_  
*Date of Signature*

**Return to: Door County Sanitarian's Department  
P.O. Box 670  
Sturgeon Bay, WI 54235-0670**

**THIS COMPLETED FORM MUST BE RETURNED BY OCTOBER 31, 2002.**

If you have any questions regarding this matter call (920) 746-2308 or write our office at the above noted address.