

# Septic Pump Checklist



Company Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

System Cleaner License No.: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Address of Pumping: \_\_\_\_\_

Pumping Date: \_\_\_\_\_

1. Tank Size: \_\_\_\_\_ Gallons Pumped: \_\_\_\_\_
2. Lift Station: Yes\_\_\_\_ No\_\_\_\_ If yes, functioning: Yes\_\_\_\_ No\_\_\_\_  
Pump Alarm: Yes\_\_\_\_ No\_\_\_\_ If yes, functioning: Yes\_\_\_\_ No\_\_\_\_
3. Excessive water running back into tank from field? Yes\_\_\_\_ No\_\_\_\_  
If yes, estimate in gallons: \_\_\_\_\_
4. Liquid level in tank over inlet line? Yes\_\_\_\_ No\_\_\_\_
5. Tank Construction (check one)  
Concrete \_\_\_\_\_ Metal \_\_\_\_\_ Brick \_\_\_\_\_ Plastic or Fiberglass \_\_\_\_\_  
Cesspool or Seepage Pit \_\_\_\_\_ Other \_\_\_\_\_
6. Tank Construction Observed: One Compartment \_\_\_\_\_ Two Compartment \_\_\_\_\_
7. Inlet/outlet tees and/or baffles in good condition? Yes\_\_\_\_ No\_\_\_\_
8. Filter on outlet cleaned and inspected (if applicable)? Yes\_\_\_\_ No\_\_\_\_
9. Access to clean-out lids within 8 inches of grade?  
Inlet: Yes\_\_\_\_ No\_\_\_\_ Outlet: Yes\_\_\_\_ No\_\_\_\_
10. 20 ml. plastic replaced and sealed over tank lid (flood plain only)? Yes\_\_\_\_ No\_\_\_\_
11. Tank structurally sound and water tight? Yes\_\_\_\_ No\_\_\_\_
12. Access lids structurally sound and water tight? Yes\_\_\_\_ No\_\_\_\_
13. Obvious cracks/leaks observed? Yes\_\_\_\_ No\_\_\_\_  
If yes, explain area: \_\_\_\_\_
14. Other conditions noted which may affect proper functioning of system?  
\_\_\_\_\_  
\_\_\_\_\_
15. Reason for Service:  
Maintenance \_\_\_\_\_ Real Estate Sale \_\_\_\_\_ Emergency/Backup \_\_\_\_\_ Other \_\_\_\_\_