

Robeson Township Sewage Management Program

Pumper's Inspection Report

Submit completed report, pumping receipt and a \$35 check made payable to Robeson Township by mail or at the administration office at 8 Boonetown Road, Monday through Friday, 7am - 4pm. If you have any questions or require additional information please contact us at 610.582.4636 or visit www.co.berks.pa.us/Muni/Robeson.

Property Owner Information:

Name (print): _____ Tax Parcel ID #: _____
Signature (required): _____ Date of Last Pumping: _____
Property Address: _____ Property Use: Residential Non-Residential
Telephone #: _____ Email address: _____

Inspector/Pumper Information:

Date of Inspection: _____ PSMA#: _____
Name (print): _____ Signature: _____
Company Name: _____
Business Address: _____
Telephone #: _____ Email address: _____

This inspection does not warranty or guarantee the proper functioning of the on-lot system for any period of time. By signing above, the property owner and inspector each attest that all information provided in this report is true and accurate to the best of his or her knowledge.

Section 1. General Information

Does sewage or gray water effluent discharge to the ground level? Yes No
Is there a garbage grinder connected to the system: Yes No

Section 2. Inspection Information

A. Septic Tank Cesspool Aerobic Tank Holding Tank Other: _____

1. Is there a 24" diameter access extended to within 12" of final grade? Yes No
If the answer is no, please describe: _____
2. Is the tank structurally sound, with no evidence of leaks and cracks? Yes No
3. Is the tank lid/access structurally sound? Yes No
4. Are the baffles intact? **Inlet:** Yes No **Outlet:** Yes No N/A (Cesspool, Holding tank, etc.)
5. Is there an effluent filter? Yes No
6. Was it cleaned at pump out? Yes No N/A
7. Depth of scum/sludge greater than 1/3 liquid depth in tank? Yes No N/A
8. Absorption area backflow into tank during/after pumping? Yes No N/A
9. Quantity pumped (gallons): _____ (please attach pumping receipt)

B. Pump Tank Siphon Tank N/A

1. Is the tank structurally sound, with no evidence of leaks and cracks? Yes No
2. Is the tank lid/access structurally sound? Yes No
3. Is the tank access at grade? Yes No
4. Is the pump/siphon/alarm functioning? Yes No
5. Are the electrical connections satisfactory? Yes No

C. Other Observations:

1. Is surface/storm water directed over tank(s) or drain field? Yes No
2. Are any of the following present? Water ponding or surfacing Piped Discharge
 Wetness or spongy areas Lush Green Grass Other: _____ No Problem Observed
3. Maintenance Recommendations: _____
4. Repair Recommendations: _____
5. Additional Notes: _____