

BUFFALO COUNTY ZONING DEPARTMENT

P.O. BOX 492, ALMA, WI 54610-0492

(608) 685-6265

POWTS MAINTAINERS CERTIFICATION OF INSPECTION

Sanitary Permit # _____

Tax Parcel ID# : _____

Owners Name: _____ Phone Number: _____

Address of System Serviced: _____

Type of System: In-ground At-grade Mound Drywell Cesspool

Buffalo County Sanitary Ordinance Section 133.1 and SPS 383 and 387, Wisconsin Administrative Code requires that owners of Private Onsite Wastewater Treatment Systems (POWTS) have their septic tank pumped by a licensed pumper / maintainer at least once every 36 months, unless upon inspection the tank is found to have less than 1/3 of the void volume occupied by sludge and/or scum. This program requires that your septic tank (and filter, if applicable) be inspected and pumped (if necessary), and certified that the drain field is functioning properly. This requirement is designed to protect and improve public health safety and groundwater quality in addition to prolonging the life of POWTS through proper maintenance.

INSPECTION CERTIFICATION

*Not Valid Without Inspectors Signature.

We certify that the above described wastewater treatment system:

_____ Septic tank was pumped and system is in proper operating condition.
or

_____ Septic tank was inspected and determined to be less than 1/3 of the void volume occupied by sludge and/or scum, and in proper operating condition.
or

_____ May be non-compliant or failing and should be inspected by the County. (please state concerns below)

Filter cleaned: YES NO N/A **Inlet Baffles:** INTACT DAMAGED N/A

Signs of surface discharge: YES NO N/A **Outlet Baffles:** INTACT DAMAGED N/A

Comments: _____

Inspector/Maintainer/Plumber Company Name: _____ Date of Inspection: _____

Inspector/Maintainer/Plumber Signature: _____ License #: _____

If you have a failing POWTS system please contact the Buffalo County Zoning Department at (608) 685-6265 for grant or loan funding availability.