



Wastewater Inspection Form

Pumper/Inspector Information

Pumper/Inspector		Inspection Date	
Email		Phone	
Address/Location of System			

Owner Information

Owner(s)			
Mailing Address			
Email		Phone	

Signatures

Owner Signature (Required)	
Pumper/Inspector Signature (attach report* in lieu of signature)	

System Information

Installation Date		Installer		Date Last Pumped	
Tank Size, Material, Manufacturer, and Overall Condition					
Tank Compartments		Amount of Sewage Removed from Tank			

1. Any back flow, root intrusion, evidence of flooding? yes no If yes, please describe:

2. Tank lids secure and watertight? yes no
3. Baffles in working condition? yes no
4. Is the system in compliance with Albany County Regulations yes no
 If "**not in compliance**", describe the actions that will be taken to comply: _____
5. Attach a general description of the system (type of system, size of leach field, etc.).
6. Attach a rough sketch of the system layout relative to the building(s) served. Please include as much information as possible. If surfacing of wastewater is observed, indicate the location and any other aspect of concern.
7. It is recommended that this septic system is pumped/serviced in _____ years.

***If the pumper creates a separate inspection report on company letterhead, please attach. This inspection form must be filled out regardless of whether the pumper uses their company form.**