

**HOLDING TANK PUMPING REPORT**

Permit # \_\_\_\_\_  
(to be completed by County)

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

MAILING ADDRESS: \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_ TOWNSHIP: \_\_\_\_\_

VILLAGE: \_\_\_\_\_

CITY: \_\_\_\_\_

TYPE OF OCCUPANCY: Residential: Single Family \_\_\_\_\_ Duplex \_\_\_\_\_  
Commercial \_\_\_\_\_  
Industrial \_\_\_\_\_  
Other \_\_\_\_\_ (specify) \_\_\_\_\_

Give the dates of each month and the total volume of sewage pumped

January _____ Gallons _____	July _____ Gallons _____
February _____ Gallons _____	August _____ Gallons _____
March _____ Gallons _____	September _____ Gallons _____
April _____ Gallons _____	October _____ Gallons _____
May _____ Gallons _____	November _____ Gallons _____
June _____ Gallons _____	December _____ Gallons _____

TYPE OF DISPOSAL:

\_\_\_\_\_ Public Sewage System    Governmental Entity: \_\_\_\_\_

\_\_\_\_\_ Land Fill    Owner's Name: \_\_\_\_\_

Location: Section \_\_\_\_\_ Town \_\_\_\_\_ Range \_\_\_\_\_  $\frac{1}{4}$   $\frac{1}{4}$

Has the land fill site been approved by DNR under CH. NR113 Wis Adm Code?

Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_ System did not require pumping, but was inspected and is code conforming

PUMPER INFORMATION:

Pumper/Company Name \_\_\_\_\_ License # \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_