Tri-County Health Department

Systems Cleaners Log

System Cleaners Name _____

License # _____

Pumping Period _____

Quarter/Year _____

Name	Street Address/City/Zip	Date Pumped	Estimated Volume, gal.	Site of Disposal (1)	Condition of Tees or Baffles (2)

(1) The following codes may be used:
M = Metropolitan Sewage District
LE = Littleton/Englewood Wastewater Treatment Plant

(2) The following codes may be used:
P = Present and in acceptable condition
U = Present but in unacceptable condition (explain problem in the space provided above)
N= Tees and baffles not visible as a part of routine pumping