DAILY SEPTAGE PUMPER REPORT FORM

Address and Location of Septage Source	Date	Septage Amt (Gallons)	Location of Sewage Treatment Plant Used for Disposal	If Land Applied, Type of Alkaline Material Used (e.g. hydrated lime)	Amount (pounds)	Initial pH	pH after 30 minutes	Location of Site Application

I certify that the above information on this report form is true and accurate. I am aware that there are significant penalties for false certification of this report.

Signature of Septage Pumper **Printed Name of Septage Pumper**