

This testing and reporting record shall be completed, signed, and dated after each maintenance check and test. One copy shall be retained by the maintenance provider performing the maintenance. The second copy shall be sent to the local permitting authority and the third copy shall be sent to the system owner.

1. Required frequency of maintenance check and tests - (daily, weekly, monthly, quarterly, every 4 months).

Actual date of test: _____

2. System inspection:

Property Address: _____

Permit Number: _____

Person Performing Inspection: _____

(Signature of Licensed Maintenance Provider)

Inspected Item	Operational	Inoperative
Aerators		
Filters		
Irrigation Pumps		
Recirculation Pumps		
Disinfection Device		
Chlorine Supply		
Electrical Circuits		
Distribution System		
Sprayfield Vegetation/Seeding		

3. Repairs to system (list all components replaced):

4. Access ports secured after the maintenance and inspection activities were completed

Yes No

If not secured, explain:

5. Tests required and results:

Test	Required	Results	Test
	Yes No	mg/l, mpn/100 ml, or trace	Method

BOD (Grab)

TSS (Grab)

Cl₂ (Grab)

Fecal Coliform

6. Date(s) responded to owner complaints during reporting period (attach copy of complaint and findings):

7. General comments or recommendations:
