

Intermittent Dosing Sand Filter

## Maintenance Log

Owner \_\_\_\_\_ Street Address \_\_\_\_\_  
Phone \_\_\_\_\_ Legal Desc. \_\_\_\_\_ PID \_\_\_\_\_

### Septic Tank:

•Sludge level \_\_\_\_\_ inches •Pumping: required yes no •Pumping completed yes no

### Absorption Field:

•Liquid level \_\_\_\_\_ inches •Flushing valves per approved design yes no  
•All flushing valves opened, distribution lines flushed, and flushing valves closed yes no

### Lift station:

•Pump basket cleaned yes no •Biotube effluent filter cleaned yes no  
•Timer float setting \_\_\_\_\_ inches •High level float setting \_\_\_\_\_ inches •Reference point \_\_\_\_\_  
•Pump on \_\_\_\_\_ seconds •Pump off \_\_\_\_\_ minutes  
•Cumulative lifetime cycles \_\_\_\_\_ •Cumulative run time \_\_\_\_\_ hours  
•Operation satisfactory yes no

### Air System:

•Air pump filter cleaned yes no •Air pressure \_\_\_\_\_ psi  
•Date of latest install or rebuild \_\_\_\_\_ •Air system operation satisfactory not satisfactory

### Alarm System:

•Dedicated electrical circuit yes no •Audible and visual alarm inside dwelling yes no  
•Float setting \_\_\_\_\_ inches •Alarm system operation satisfactory not satisfactory

### Comments:

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### Maintenance Provider:

Technician \_\_\_\_\_ Date of maintenance \_\_\_\_\_

Company \_\_\_\_\_

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