

Large On-Site Sewage System (LOSS) Maintenance Log / Annual Reporting Form

Recommended Frequency	System Component / Maintenance Task	Date Maintenance Task Performed (check when task is completed)																											
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec																
Pump / Pump Chamber																													
Monthly	Visual Inspection																												
Biannually	Check / Clean Screen(s)																												
Biannually	Test Run Pumps																												
Biannually	Check Float Switch Operation																												
Pump Controls / Electrical Panel																													
Weekly	Record Elapsed Time Meter Readings																												
Weekly	Record Dose Counters																												
Monthly	Calculate Average Daily Flows																												
Biannually	Manually Operate Controls																												
Biannually	Check for Moisture & Corrosion																												
Biannually	Test Alarm(s)																												
Distribution System / Drainfields																													
Monthly	Inspect Monitor Ports																												
Monthly	Inspect Drainfields for Ponding																												
Biannually	Inspect and Exercise Valves																												
Biannually	Rotate Fields																												
Septic Tanks / Pump Chambers																													
Biannually	Check Sludge Levels																												
Biannually	Check Floating Solids (Scum) Level																												
Biannually	Check / Clean Effluent Filters																												
Biannually	Check Inlets / Outlets																												
Operating Permit Requirements																													
Annually	Renew Permit																												
Annually	Annual Report																												
<p>Please provide the following information and / or make changes as needed to assist us in maintaining our records:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">County _____</td> <td style="width: 50%;">Manager _____</td> </tr> <tr> <td>System Name _____</td> <td>Title _____</td> </tr> <tr> <td>Approved Max. Flow _____</td> <td>Phone No. _____</td> </tr> <tr> <td>Contact Person _____</td> <td></td> </tr> <tr> <td>LOSS Legal Owner _____</td> <td style="text-align: center;">Information Provided By:</td> </tr> <tr> <td>Owner Address _____</td> <td>Name _____</td> </tr> <tr> <td>Phone / Fax No _____</td> <td>Title _____</td> </tr> <tr> <td></td> <td>Date _____</td> </tr> </table>														County _____	Manager _____	System Name _____	Title _____	Approved Max. Flow _____	Phone No. _____	Contact Person _____		LOSS Legal Owner _____	Information Provided By:	Owner Address _____	Name _____	Phone / Fax No _____	Title _____		Date _____
County _____	Manager _____																												
System Name _____	Title _____																												
Approved Max. Flow _____	Phone No. _____																												
Contact Person _____																													
LOSS Legal Owner _____	Information Provided By:																												
Owner Address _____	Name _____																												
Phone / Fax No _____	Title _____																												
	Date _____																												

This form may be used to track LOSS maintenance. A completed copy will satisfy annual reporting requirements associated with your permit (attach pump/service receipts, if available). Contact Mamdouh El-Aaraq at (509) 456-2754, or mamdouh.el-aaraq@doh.wa.gov for questions and/or assistance regarding maintenance, permits, or annual reporting requirements. Mail completed form to: Mamdouh El-Aaraq, DOH Large On-Site Program, 1500 West Fourth Avenue, Suite 403, Spokane, WA 99201-1656, or send facsimile (FAX) to (509) 456-3127.