Clear Form

PUMPOUT AND DUMP STATION MAINTENANCE REPORTING LOG

Report Period: July 1 - June 30 Two Years

Owner:			Location:	
--- *Check*	*Equipment*	*Type* ---		Disposal Type: Holding Tank ☐
Combo ☐	Dump Station Only ☐	Pumpout Only ☐		Sewer Connection ☐ Other ☐

Date	Unit Maintained Y/N	Hour Meter Reading[1]	Flow Test Number[2]	Unit Operable? Y/N	Comments & Notes Describe Maintenance Needs / Issues and Repair Actions
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	
	□Yes □ No			□Yes □ No	

[1]*Helpful, but not required for remotely monitored units.*

[2]*Flow Test = Number of seconds to empty 5 gal. bucket.*

Attach additional sheets as needed. *Copies of the form are available online at boat.oregon.gov in the library.*

Return completed log to: ann.fleckner@boat.oregon.gov when requesting reimbursement