**FORD COUNTY PUBL IC HEALTH DEPARTMENT**

Phone 217/379-9281 ◆ 235 North Taft Street ◆ Paxton, IL 60957

**PRIVATE SEWAGE PUMPER INSPECTION REPORT**

**GENERAL**

1. Inspection Date

2. Person(s) Interviewed

3. Contractor’s Name License Number -

4. Telephone Number Currently Licensed [ ] Yes [ ] No

**TRANSPORTATION**

5. License Plate Number

6. Make (Ford, Chevy, etc.) Year

7. Tank Capacity Gallons

**COMPLIES WITH COD**

**YES NO**

8. Name & Address - 8 Inches High - Both Sides of Truck ( ) ( )

9. Tank Condition (Leak Proof & Tightly Sealed) ( ) ( )

10. Type of Pump ( ) ( )

11. Self-Priming ( ) ( )

12. Discharge Nozzle-Capped-No Discharge on Truck ( ) ( )

13. Condition of Hoses-No Leaks, Cracks, Etc. ( ) ( )

14. Cleaning Procedures of Tank, Hoses, Tools, Etc. ( ) ( )

15. Overall Cleanliness of the Equipment ( ) ( )

**MISCELLANEOUS**

List of Persons Using This Truck:

Name License Number

Name License Number

Name License Number

Name License Number

**COMMENTS-REQUIRED CORRECTIONS**

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Contractor’s Signature Inspector’s Signature