

Onsite Wastewater Management System Report - Worm Farm

Office Use Only
File No.:
Application No.:

In accordance with Onsite Wastewater Management System 'Certificate of Approval' maintenance requirements, the system installed at the address below has been inspected by me;

Property Address	No.: Le	ot No.:	PS/LP:	
	Street:		Locality:	
Owner (or Occupier)	Name:			
	Address:			
	Phone:		E-mail:	
Date of Inspection:/				
A) Septic System desludging				
□ Date desludged/ By:				
☐ Evidence attached (copy of receipt etc.)				
☐ Does not require desludging due to sludge level being approx % (being less than 50% of tank volume)				
B) The effluent disposal area has been inspected and has been found to be:				
☐ Operating satisfactorily				
☐ Not damaged - fenced and/or otherwise protected				
☐ Contains all wastewater				
☐ Requires no maintenance work				
C) Comments regarding works undertaken or required to meet EPA certificate requirements and standard performance criteria (please turn overleaf if more space is required):				
D) \Box A plan of the system layout is attached showing all principal system components and site features				
Certifiers Name:			Relevant Qualification:	
Phone:			Registration No. or level of competency:	
Address:				
Signed:				

Please return completed form to the Environmental Health Department - Mansfield Shire Council:

