

On Lot Sewage Pump out Certification – Upper Bern Township, Berks County, PA

Tax Parcel # (This is on your tax bill.) _____

Phone # _____

Name: _____

Property (Site) Address: _____

Number of Residents: _____ Due for Pumping by _____

Date Pumped: _____ Volume Pumped: _____ Tank Volume _____

Septic Tank ___ Cesspool ___ Holding Tank ___ Baffle Intact: Yes/No

Depth of Pipe _____ Diameter of Pipe Pumped _____

Tank Material: Concrete ___ Metal ___ Rock Lime Pit _____

The undersigned certifies that the above property sewage septic tank, cesspool, or holding tank has been inspected and pumped on the above referenced date. The septic tank pumper shall mark N/A on any item which may not be checked due to the existing tank installation.

Signature of PA Licensed Septic Tank Pumper Date

Pumpers Name & Address: _____

PLEASE RETURN TO TOWNSHIP SECRETARY ONCE PUMPING HAS BEEN COMPLETED.

Office Hours: Monday thru Thursday 9 a.m. - 4:00 p.m.
Board of Supervisors meet every 2nd Thursday of month
Planning Commission meets 4th Monday of month

“Upper Bern Township is an Equal Opportunity Provider and Employer”