HOLDING TANK SERVICING CONTRACT

This contract is being made on _____/___ 20____ and is between the Holding Tank Owner(s) and Licensed Septage Servicing Operator

Holding Tank Owner(s) Name (s)	Licensed Septage Servicing Operator (Pumper)
We acknowledge the installation of a holding tank(s) on the following property: (Provide COMPLETE Legal Description)	
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- 1. The owner agrees to file a copy of this contract with the local municipality that has signed the holding tank agreement and/or the Rock County Health Department (RCHD).
- 2. The owner agrees to have the holding tank(s) serviced by the pumper and guarantees to permit the pumper to have access and to enter upon the property for the purpose of servicing the holding tank(s). The owner agrees to maintain the access road or drive so that the pumper can service the holding tank(s) with the pumping equipment. The owner further agrees to pay the pumper for all charges incurred in the servicing the holding tank(s) as mutually agreed upon by the owner and pumper.
- 3. The pumper agrees to submit to the municipality that has signed the holding tank agreement and/or the Rock County Health Department, a report for the servicing of the holding tank(s) on at least a semi annual basis and in accordance with Comm 383.55 Wis. Adm. Code. The pumper further agrees to include the following in the semi-annual report:
 - a. The name, address, and registration number of the person responsible for servicing the holding tank(s);
 - b. The name of the owner of the holding tank(s) and the unique County Holding Tank Number (if available);
 - c. The location of the property on which the holding tank is installed (Computer ID# and/or Parcel# are strongly recommended);
 - d. The sanitary Permit number issued for the holding tank(s);
 - e. The dates on which the holding tank(s) was(were) serviced;
 - f. The volumes in gallons of the contents pumped from the holding tank(s) for each servicing;
 - g. The disposal sites to which the contents of the holding tank(s) were delivered.
- 4. This contract will remain in effect until the owner or pumper terminates this contract. In the event of a change or termination of this contract, the owner agrees to file a copy of any changes to this contract or a copy of a new servicing contract with the Rock County Health Department and the municipality within ten (10) business days from the date of the change or new contract.

Owner(s) Name(s)-Please Print	Pumpers Name and Registration Number-Please Print
Owner(s) Signature(s)	Pumpers Signature

This instrument was drafted by the Rock County Health Department (01/18).