

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

Subsurface Sewage Treatment System Maintenance Permit

This section must be completed in its entirety to	o constitute a va	lid maintenance pe	ermit. This permit m	ust be completed
prior to performing maintenance activities	s and remain on	site for the durati	on of the maintenan	ce activity.
Date of Maintenance: $8 30 17$ Reason for	or Maintenance:	Routine		
Property Address: 16201 4th St N	F	Property Owner's Na	ame: Tom Hag	gerty
Municipality: <u>Lakeland</u> ZIP: <u>550</u>	13 Property Ide	ntification Number:	24	_
Maintenance Permit No: P467507656 Ma	aintainer Name ar	nd License No. Pinky	y's Environmental Sew	ver Service/ L1673
Maintenance Performed	Tank Meas	surement (must be	completed if tanks N	IOT pumped)
Tank(s) Pumped	Liquid Level of Tank — in			
Sludge and scum measured	Sludge Level in	Sludge Level in Tank in Scum Level in Tank in		
Do tanks need to be pumped?	Sludge + Scum / Liquid Level X 100			
\square Yes \square No (if no provide measurements)	= % Sludge & Scum Tanks must be pumped if 25% or greater			
 Access used to remove septage: Maintenance Were all covers securely replaced? Yes Is there evidence of tank leakage from a septime evidence of damaged, cracked, or structural 	No ic, holding, pretr	eatment or pump	tank below the opera	ating depth or
Tank	Leaking Out	Leaking In	Cover Damage	
Septic/Holding Tank #1	☐ Yes No	☐ Yes 🌣 No	☐ Yes No	
Septic/Holding Tank #2	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
Pump Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
4. How many gallons of septage were removed? Tank #1 gal Tank #2	gal Pretreatmen	tankga	al Pump Tank	gal
5. Other information: List any troubleshooting, in No Manhale > of	minor repairs co			
6. Location of septage disposal:				

Pinky's Environmental Sewer Service Inc.

PO Box 354

Afton MN 55001

P: 651-439-4847 License Number: L1673