

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
GOVERNMENT CENTER
14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006
Office: 651-430-6655 TTY: 651-430-6246 FAX: 651-430-6730

Subsurface Sewage Treatment System Maintenance Permit

This section must be completed in its entirety to constitute a valid maintenance permit. This permit must be completed prior to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance:	10/12/17 Reason	for Maintenance: _	Routine)		allright
Property Address: 8	391 /13th St.	<u>S. </u>	roperty Owner's Na	ame: <i>Robert L</i>	(Belleview)
Municipality: Otta	GOSTROVE ZIP: 550	Property Iden	tification Number:		
Maintenance Permit No	: <u>a.8254m9049</u> A	Aaintainer Name an	d License No. <u>Meye</u>	r Sewer Service, In	nc./L915
Maintenar	nce Performed	Tank Meas	Jrement (must be	completed if tank	s NOT pumped)
Tank(s) Pumped		Liquid Level of Tank in			
Sludge and scum measured		Sludge Level in Tank in Scum Level in Tank in Sludge + Scum / Liquid Level X 100			
Do tanks need to be pumped? ☐ Yes ☐ No (if no provide measurements)		= % Sludge & Scum Tanks must be pumped if 25% or greater			
1. Access used to rem	nove septage: Maintena	nce Hole 🗌 Other (e	nter authorization co	ode)	
 Were all covers securely replaced? ✓ Yes □ No Is there evidence of tank leakage from a septic, holding, pretreatment or pump tank below the operating depth or evidence of damaged, cracked, or structurally unsound maintenance hole covers?					
	Tank	Leaking Out	Leaking in	Cover Damage	
	Septic/Holding Tank #1	☐ Yes Alo	☐ Yes ⚠ Ho	☐ 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	
Tank #1_1500	7	_gal Pretreatmen	nducted, tank safe	ety concerns, or ot	
. Location of septage	. disposati				

Meyer Sewer Service, Inc. 5325 Manning Ave S

Afton, MN 55001

License# 915 P: 651-459-0162