

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

NO. 10 S.		' torongo porr	nit This permit must	t be completed	
This section must be completed in its entirety t	to constitute a valid	maintenance peri	of the maintenance	activity.	
prior to performing maintenance activiti	ies and remain on-si	e for the daracion			
(0-6-1) Peason	for Maintenance:	Kaltine	,		
Property Address: 9157 122nd Stra	eet N Pro	perty Owner's Nan	ne: Tim Stoc	Kness	
111/10 710.550	38 Property Identi	fication Number: _		-	
Municipality: <u>Hugo</u> 211.330 Maintenance Permit No: <u>V91399 (4072</u>)	Waintainer Name and	License No. Pinky'	s Environmental Sewe	r Service/ L1673	
Maintenance Permit No: V917399 4012					
Maintenance Performed	Tank Measu	rement (must be	completed if tanks NC	T pumped)	
✓ Tank(s) Pumped☐ Sludge and scum measuredDo tanks need to be pumped?	Sludge Level in To	Liquid Level of Tank in Sludge Level in Tank in Scum Level in Tank in Sludge + Scum / Liquid Level X 100 = % Sludge & Scum Tanks must be pumped if 25% or greater			
Yes ☐ No (if no provide measurements1. Access used to remove septage: ☐ Mainten	/				
 Were all covers securely replaced? Yes Is there evidence of tank leakage from a see evidence of damaged, cracked, or structum 		enunce note cons			
l		Looking In	Cover Damage		
Tank 	Leaking Out	Leaking In	Cover Damage		
Septic/Holding Tank #1	☐ Yes ☑ No	☐ Yes ☐ No	☐ Yes ☑No		
		,	☐ Yes ☑ No		
Septic/Holding Tank #1	☐ Yes ☑No	☐ Yes ☐ No	☐ Yes ☑No		
Septic/Holding Tank #1 Septic/Holding Tank #2	☐ Yes ☑No	☐ Yes ☐ No	☐ Yes ☑ No		
Septic/Holding Tank #1 Septic/Holding Tank #2 Pretreatment Tank	☐ Yes ☑ No ☐ Yes ☑ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No red?	☐ Yes ☐ No	☐ Yes ☑ No ☐ Yes ☑ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	gal er concerns.	
Septic/Holding Tank #1 Septic/Holding Tank #2 Pretreatment Tank Pump Tank 4. How many gallons of septage were remov Tank #1 500 gal Tank #2 1500 5. Other information: List any troubleshooti 6. Location of septage disposal:	☐ Yes ☑No ☐ Yes ☑No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Ro red? gal Pretreatmenting, minor repairs co	Yes No Yes No Yes No Yes No Yes No At tank	☐ Yes ☑ No ☐ Yes ☑ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No		

Afton MN 55001

P: 651-439-4847 License Number: L1673

Maintenance activities must be reported to the Department within 90 days.