

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT GOVERNMENT CENTER



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## SSTS MAINTENANCE REPORT

System Location	
Address 9970 223rd STN	Telephone Number
City Forest Lake State	ZIP Property ID No./GEO Code
Owner Chis Zenk Pump	ing Date 1/-10-15
	Contractor
Maintainer alsons sewer MPCA	License No. Telephone Number
What was done to the system?  Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Yes No (If no provide measurements below)	Tank 1: Pumped Tank 2: Pumped  Tank 3: Pumped Tank 4: Pumped  Total Gallons Pumped: 1900
Visual Inspection (note any problems with the system): NOTE: This does not serve as a compliance inspection.	
Punged for pump replacement	
*Tank Measurements U	se Only If Tankis) Were NOT Pumped
Tank Length in. X Tank Width in. X	Tank Depth in. = Tank Volume (cubic inches)
Tank Radius in. X Tank Radius in. X 3.14 = Tank Volume (cubic inches)	
Tank Volume (cu. in.) / 231.01 = Liquid Capacity Gallons / Tank Depth in. = Gallons/Inch	
Sludge Level in. <b>X</b> Gallons Per Inch = SI	udge Volume Gallons
Scum Level in. <b>X</b> Gallons Per Inch = Sc	cum Volume Gallons
Sludge Volume + Scum Volume = To	otal Sludge and Scum Volume Gallons
Total Sludge and Scum Volume / Liquid Capa	city = Percent Sludge and Scum in Tank %
Scum Layer  Effluent  Sludge Layer	*Tanks must be pumped if either of the following conditions exist:  1. The top of the sludge layer is less than  12 inches from the bottom of the outlet baffle; or  2. Total sludge and scum volume is greater than 25 percent of the tank's liquid capacity.
Signature 210, n	Date 11-10-15 Resett Form