

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

prior to performing maintenance activity	to constitute a v	alid maintenance p	permit. This permit	must be complete	
prior to performing maintenance activit	ies and remain o	n-site for the dura	tion of the mainten	ance activity.	
Date of Maintenance: 7-1-18 Reason	for Maintenance:	Partius			
Property Address: 13777 Paraga	n Pre. No	Property Owner's N	Name: XXIC	Hencacons	
		entification Number		The foreign	
Maintenance Permit No: <u>L9334g 11610</u> A	Maintainer Name a	and License No. Pink	ov's Environmental S		
)		and Electise No. 1 mir	ty 3 Environmental 3	ewer Service/ L16/.	
Maintenance Performed	Tank Mea	surement (must be	completed if tanks	NOT pumped)	
Tank(s) Pumped	Liquid Level of Tank — in				
\square Sludge and scum measured	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 & Sc	= % Sludge & Scum Tanks must be pumped if 25% or greater			
1. Access used to remove septage: Maintenan	ce Hole Dother			and an greater	
 Were all covers securely replaced? Yes [Is there evidence of tank leakage from a septential evidence of damaged, cracked, or structural 	tic, holding, pret	reatment or pump	tank below the ope	rating depth or	
Tank	Leaking Out				
	0	Leaking In	Cover Damage		
Septic/Holding Tank #1	☐ Yes ☑ No	☐ Yes ☐ No	Cover Damage ☐ Yes ☑ No		
Septic/Holding Tank #1 Septic/Holding Tank #2			20.50		
	☐ Yes ☑ No	☐ Yes ☑No	☐ Yes ☑No		
Septic/Holding Tank #2 Pretreatment Tank Pump Tank	☐ Yes ☑ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☑ No		
Septic/Holding Tank #2 Pretreatment Tank Pump Tank 4. How many gallons of septage were removed? Tank #1 1250 gal Tank #2	☐ Yes ☐ No ☐ gal Pretreatment	☐ Yes ☐ No ☐ tank	Yes No Yes No Yes No Yes No	gal	
Septic/Holding Tank #2 Pretreatment Tank Pump Tank	☐ Yes ☐ No ☐ gal Pretreatment	☐ Yes ☐ No ☐ tank	Yes No Yes No Yes No Yes No	gal er concerns.	
Septic/Holding Tank #2 Pretreatment Tank Pump Tank 4. How many gallons of septage were removed? Tank #1 1250 gal Tank #2	☐ Yes ☐ No ☐ gal Pretreatment	☐ Yes ☐ No ☐ tank	Yes No Yes No Yes No Yes No	gal er concerns.	
Septic/Holding Tank #2 Pretreatment Tank Pump Tank 4. How many gallons of septage were removed? Tank #1 1250 gal Tank #2	Yes No Yes No Yes No Yes No Yes No Percentage No	☐ Yes ☐ No ☐ tank	Yes No Yes No Yes No Yes No Pump Tank Yes concerns, or other	gal er concerns.	

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