

14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006 Office: 651-430-6655 TTY: 651-430-6246 FAX: 651-430-6730

This section must b	e completed in its entiret	y to constitute a v	alid maintenance	permit. This permit	must be complet
<u>prior</u> to perfe	orming maintenance activ	ities and remain o	n-site for the dur	ation of the mainten	ance activity.
Date of Maintenance	: 4)20/16 Reaso	n for Maintenance	Sword		
Property Address: 1	303 Yakama	yer Trail	Property Owner's	Name: HISW	lienus) Eu
Municipality:	ndia ZIP:	Property Id	entification Numbe	er:	
Maintenance Permit	No: 1226501064	Maintainer Name	and License No.	SSI #211	0
Maintena	ance Performed	Tank Mea	surement (must b	e completed if tanks	NOT pumped)
Tank(s) Pumped		Liquid Level of	Tank ir	1	
☐ Sludge and scum i	measured	Sludge Level in	Tank in	Scum Level in Tank	in
Do tanks need to	be pumped?	Sludge + Scum	/ Liquid	Level X 100)
☐ Yes ☐ No (if	no provide measurements	11		anks must be pumped	
1. Access used to rer	move septage: Mainten	ance Hole 🗌 Other (enter authorization	code)	
2. Were all covers se	curely replaced? 🛱 Yes	□No			12
3. Is there evidence evidence of dama	of tank leakage from a se aged, cracked, or structur	ptic, holding, pret ally unsound mair	reatment or pump ntenance hole cov	o tank below the ope ers?	rating depth or
	Tank	Leaking Out	Leaking In	Cover Damage	
	Septic/Holding Tank #1	☐ Yes 🛱 No	☐ Yes 风No	☐ Yes ☑ No	
	Septic/Holding Tank #2	☐ Yes No	☐ Yes ⋈ No	☐ Yes ⋈ No	
	Pretreatment Tank 3	☐ Yes ⋈ No	☐ Yes ☒No	☐ Yes ⋈ No	
	-Pump-Tank	□ Yes 🗵 No	☐ Yes 风No	☐ Yes ⋈No	
4. How many gallons	of septage were removed	?			
Tank #1	gal Tank #2	gal Pretreatment	tank g	al Pump Tank	gal
5. Other information:	List any troubleshooting,	minor repairs con	. (1)	ety concerns, or othe	r concerns.
6. Location of septage	disposal: Harris	-			



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This section must be completed in its entirety				
<u>prior</u> to performing maintenance activi	ities and remain o	n-site for the dura	ition of the mainten	ance activity.
Date of Maintenance: 4\a0 Reason	for Maintenance			
Property Address: 12303 Lakamac	porto-	Property Owner's	Name: Lil Soc	isomo) tu
Municipality: Scandia ZIP:	Property Id	entification Numbe	r:	
Maintenance Permit No: 64179 w 1065	Maintainer Name	and License No.	3SI #21V	2
Maintenance Performed	Tank Mea	surement (must b	e completed if tanks	NOT pumped)
Tank(s) Pumped	Liquid Level of	Tank in		
☐ 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 & So	:um Ta	inks must be pumped	if 25% or greater
1. Access used to remove septage: Maintena	nce Hole 🗌 Other	enter authorization c	ode)	
2. Were all covers securely replaced? Yes	□ No			
Is there evidence of tank leakage from a sep evidence of damaged, cracked, or structure				rating 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 #1 000 gal Tank #2	gal Pretreatmen	t tank ga	al Pump Tank	gal
5. Other information: List any troubleshooting,				
A\ 7				
b. Location of septage disposal? Mayou				



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prior to perfor	ming maintenance activiti	ies and remain o	n-site for the dura	tion of the mainten	ance activity.
Date of Maintenance:	4)20/1/2 Reason	for Maintenance			
Property Address:\2	03 Lakarage	M-	Property Owner's I	Name: Jul S	count Count
Municipality: 3cm	dier ZIP:	Property Id	entification Numbe	r:	
Maintenance Permit No	M STOLXEOPPW	aintainer Name a	and License No.	VIGF IZE	
Maintenan	ce Performed	Tank Mea	surement (must be	completed if tanks	s NOT pumped)
Tank(s) Pumped		Liquid Level of	Tank in		
☐ Sludge and scum me	easured	Sludge Level in	Tank in	Scum Level in Tank	< in
Do tanks need to b	e pumped?	Sludge + Scum	/ Liquid I	_evel X 10	0
☐ Yes ☐ No (if n	o provide measurements)	= % Sludge & So	:um Ta	nks must be pumped	d if 25% or greater
	ove septage: Maintenandurely replaced? Yes		enter authorization c	ode)	
evidence of damag	tank leakage from a septi ed, cracked, or structural	ic, nolding, pret lly unsound mair	reatment or pump ntenance hole cove	tank below the opers?	erating depth or
_	Tank	Leaking Out	Leaking In	Cover Damage	•
5	Septic/Holding Tank #1	☐ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☐ No	•
S	Septic/Holding Tank #2	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
F	Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
F	Pump Tank	\square Yes \square No	☐ Yes ☐ No	☐ Yes ☐ No	
4. How many gallons of	septage were removed?	3-4			
Tank #1 \\SO\	gal Tank #2 1500 g	gal Pretreatment	tank_1500_ ga	l Pump Tank	gal
5. Other information: L	ist any troubleshooting, n	ninor repairs cor	nducted, tank safe	ty concerns, or other	er concerns.
6. Location of septage d	isposal: Texto				



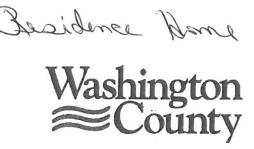
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<u>prior</u> to performing maintenance activ	vities and remain o	on-site for the dura	ation of the mainter	ance activity.
Date of Maintenance: 4 2011 Reason	on for Maintenance			
Property Address: 12303 Hakama	ge Tr.	Property Owner's	Name: Wilso	out Counce
Municipality Scandia ZIP:	Property Id	entification Numbe	r:	
Maintenance Permit No: 4908 7 1000	Maintainer Name	and License No.	251 · # 91	6
Maintenance Performed	Tank Mea	surement (must b	e 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	k in
Do tanks need to be pumped?	Sludge + Scum	/ Liquid	Level X 10	0
☐ Yes ☐ No (if no provide measurements	s) = % Sludge & So	tum Ta	anks must be pumped	d if 25% or greater
1. Access used to remove septage: Mainten		enter authorization c	ode)	
2. Were all covers securely replaced? Yes				
Is there evidence of tank leakage from a se evidence of damaged, cracked, or structu	ptic, holding, pret rally unsound mair	reatment or pump ntenance hole cove	tank below the ope ers?	erating 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	1?			
Tank #1 (550) gal Tank #2 (1000)	gal Pretreatmen	t tank ga	al Pump Tank	gal
5. Other information: List any troubleshooting	– , minor repairs co	nducted, tank safe	ty concerns, or other	er concerns.
6. Location of septage disposal:				



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prior to performing maintenance activiti	es and remain o	on-site for the dura	tion of the mainten	ance activity.
Date of Maintenance: 4 Reason	for Maintenance			
Property Address: 12303 Haka man	ga Tr-	Property Owner's N	Name: Wilson	out Council
Municipality: Searlie ZIP:	Property Id	entification Number	:	
Maintenance Permit Nor 17870 1008 M	aintainer Name	and License No.	ist fail	Q
Maintenance Performed	Tank Mea	surement (must be	completed if tank	NOT pumped)
Tank(s) Pumped	Liquid Level of	Tank in		
☐ Sludge and scum measured	Sludge Level in	Tank in	Scum Level in Tank	(in
Do tanks need to be pumped?	Sludge + Scum	/ Liquid L	.evel X 10	0
☐ Yes ☐ No (if no provide measurements)	= % Sludge & So	cum Tai	nks must be pumped	l if 25% or greater
1. Access used to remove septage: ☐ Maintenance	ce Hole 🗌 Other	enter authorization co	ode)	
2. Were all covers securely replaced? \Box Yes \Box] No			
Is there evidence of tank leakage from a septi evidence of damaged, cracked, or structural	ic, holding, pret ly unsound mair	reatment or pump ntenance hole cove	tank below the opers?	rating 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?				
	al Pretreatment	t tank ga	l Pump Tank	gal
Tank #1 gal Tank #2 g				
Tank #1 gal Tank #2 g				



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	orming maintenance activ				
Date of Maintenance	e: <u>4 60 116</u> Reason	n for Maintenance)	•	
Property Address:\ <u>\</u>	303 Lakamay	je h.	Property Owner's	NameLUSE	iones) Fre
Municipality:	maia ZIP:	Property Id	entification Numbe	er:	
Maintenance Permit	PJ01218PSG_:0N	Maintainer Name	and License No.	11st Ize	0
Mainten	ance Performed	Tank Mea	surement (must b	e completed if tank	s NOT pumped)
Tank(s) Pumped		Liquid Level of	Tank ir	1	
☐ Sludge and scum	measured	Sludge Level in	Tank ir	Scum Level in Tan	k in
Do tanks need to	be pumped?	Sludge + Scum	/ Liquid	Level X 10	0
☐ Yes ☐ No (if	no provide measurements	= % Sludge & So	:um Ta	anks must be pumped	d if 25% or greater
 Were all covers se Is there evidence 	move septage: Maintena ecurely replaced? Yes of tank leakage from a se aged, cracked, or structur	□ No ptic, holding, pret	reatment or pump	tank below the ope	erating 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 1100	gal Tank #2	gal Pretreatment	tankg	al Pump Tank	gal
5. Other information	List any troubleshooting	minor repairs co			
6. Location of septage	disposal: Havis				