

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT **GOVERNMENT CENTER**

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SSTS MAINTENANCE REPORT

Z2547p1710	SSTS MAINTENANCE REPORT
	System Location
Address ///30 PANAMA	AUE Telephone Number
City HASTINGS	State Mr ZIP (303) Property ID No./GEO Code
Owner BILL RVITR	Pumping Date /2 - 21 - 15
	Contractor
Maintainer LESE STATEL	MPCA License No. 299 4 Telephone Number 651-437-6554
What was done to the sys	
Tank(s) Pumped	Tank 1: 1000 Pumped Tank 2: 1000 Pumped
Sludge and scum measured.	Tank 3: Pumped Tank 4: Pumped
Do tanks need to be pumped? Yes No (If no provide mea	Total Gallons Pumped: _ A • 00
Visual Inspection (note any problem	
	RECEIVED
	JAN 13 2016
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	PUBLIC HEALTH
*Ta	nk Measurements-Use Only If Tank(s) Were NOT Pumped
Tank Length in. X Tank Wid	in. X Tank Depth in. = Tank Volume (cubic inches)
Tank Radius in. X Tank Rad	in. X 3.14 = Tank Volume (cubic inches)
Tank Volume (cu. in.) / 23	Gallons / Tank Depth in. = Gallons/Inch
Sludge Level in. X Gallons P	er Inch = Sludge Volume Gallons
Scum Level in. X Gallons P	Per Inch = Scum Volume Gallons
Sludge Volume + Scum Vo	lume = Total Sludge and Scum Volume Gallons
Total Sludge and Scum Volume	/ Liquid Capacity = Percent Sludge and Scum in Tank %
- Farm Lavor	*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
Scum Layer Effluent Sludge Layer	Tank Depth measured from invert of outlet pipe to bottom of tank Tank Depth measured from invert of outlet pipe to bottom of tank baffle; or 2. Total sludge and scum volume is greate than 25 percent of the tank's liquid capacity.
Simple 1	Date