

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

Subsurface Sewage Treatment System Maintenance Permit

This section must be completed in	its entirety t	o constitute a va	lid maintenance pe	ermit. This permit n	nust be complete
prior to performing mainte	nance activitie	es and remain on	site for the durati	on of the maintenar	nce activity.
Date of Maintenance: 9-5-18	Reason f	or Maintenance:	Rantine		
Property Address: 12903	300 5	J. Su. 1	roperty Owner's Na	ame: Daniel	Seffice
Municipality: 1	_ ZIP:	Property Idea	ntification Number:		
Maintenance Permit No: V9741					wer Service/ L167
Maintenance Performe	ed	Tank Meas	urement (must be	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			
☐ Yes ☐ No (if no provide measurements)		= % Sludge & Scum Tanks must be pumped if 25% or greater			
	-				20% or greater
1. Access used to remove septage:	∴ Maintenand	ce Hole Other (e	nter authorization co	de)	
2. Were all covers securely replace	ed? 🗌 Yes 🗆	No			
 Is there evidence of tank leakage evidence of damaged, cracked 					ating depth or
Ta	ank	Leaking Out	Leaking In	Cover Damage	
Septic/Holding	g Tank #1	☐ Yes ☐ No	☐ Yes ☐No	☐ Yes ☐ No	
Septic/Holding	g 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 we	ere removed?				
Tank #1 /250 gal Tank #	[‡] 2	gal Pretreatment	tankga	l Pump Tank	gal
5. Other information: List any trou	ubleshooting,	minor repairs cor	ducted, tank safet	y concerns, or othe	
Too old R- manhole					
6. Location of septage disposal:					

Pinky's Environmental Sewer Service Inc.

PO Box 354

Afton MN 55001

P: 651-439-4847 License Number: L1673