

SSTS MAINTENANCE REPORT

System Location		
Address	16508 SWEDG HILL DR. S.	
Telephone Number	605)376-8476	
City	State	ZIP
ARFON	MN	55001
Property ID No.	35.028.20.21.0009	
Owner	Pumping Date	
CHRISTOPHER J. BERNARDY	PUMPING NOT REQUIRED.	
Contractor		
Maintainer	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)

Report Liquid Capacity in Gallons

Tank 1: _____ Pumped Tank 2: _____ Pumped

Tank 3: _____ Pumped Tank 4: _____ Pumped

Total Gallons Pumped: _____

Visual Inspection (note any problems with the system):

NOTE: This does not serve as a compliance inspection.

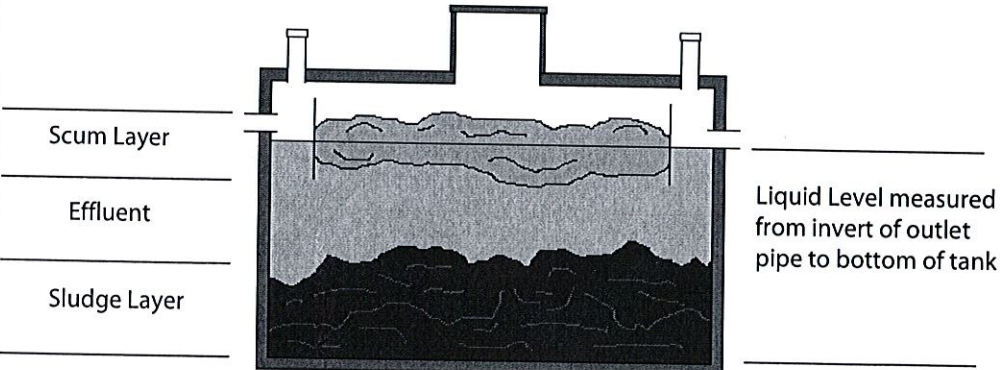
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***Tank Measurements-Use Only If Tank(s) Were NOT Pumped**

Liquid Level of Tank (Distance from invert of outlet pipe to bottom of tank) 41 in.

Sludge Level 3 in. + Scum Level 0 in. = Total Sludge and Scum Level 3

Total Sludge and Scum Level 3 / Liquid Level 41 = Percent Sludge and Scum in Tank 7.3 %



*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 Christopher J. Bernardy Date 5/16/16
 CHRISTOPHER J. BERNARDY

Reset Form