

## SSTS MAINTENANCE REPORT

<b>System Location</b>		
Address <u>9620 51st St. N</u>	Telephone Number	
City <u>Lake Elmo</u>	State <u>MN</u> ZIP <u>55042</u>	Property ID No./GEO Code
Owner <u>Henry Larmie</u>	Pumping Date <u>9/25/15</u>	
<b>Contractor</b>		
Maintainer <u>MEYER SEWER</u>	MPCA License No. <u>915</u>	Telephone Number <u>651-459-016</u>

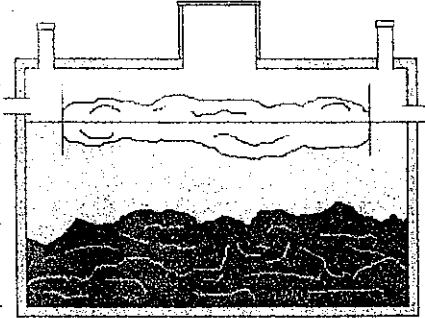
<b>What was done to the system?</b>
<input checked="" type="checkbox"/> Tank(s) Pumped <u>2</u> <input type="checkbox"/> Sludge and scum measured. Do tanks need to be pumped? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no provide measurements below)

<b>Report Liquid Capacity in Gallons</b>
Tank 1: <u>1500</u> <input checked="" type="checkbox"/> Pumped    Tank 2: <u>1000</u> <input checked="" type="checkbox"/> Pumped Tank 3: _____ <input type="checkbox"/> Pumped    Tank 4: _____ <input type="checkbox"/> Pumped Total Gallons Pumped: <u>2500</u>

Visual Inspection (note any problems with the system):

NOTE: This does not serve as a compliance inspection.

<b>*Tank Measurements-Use Only If Tank(s) Were NOT Pumped</b>			
Tank Length _____ in.	<input checked="" type="checkbox"/>	Tank Width _____ in.	<input checked="" type="checkbox"/>
= Tank Volume (cubic inches) _____			
Tank Radius _____ in.	<input checked="" type="checkbox"/>	Tank Radius _____ in.	<input checked="" type="checkbox"/>
= Tank Volume (cubic inches) _____			
Tank Volume (cu. in.) _____	/	<b>231.01</b>	= Liquid Capacity _____ Gallons / Tank Depth _____ in. = Gallons/Inch _____
Sludge Level _____ in.	<input checked="" type="checkbox"/>	Gallons Per Inch _____	= Sludge Volume _____ Gallons
Scum Level _____ in.	<input checked="" type="checkbox"/>	Gallons Per Inch _____	= Scum Volume _____ Gallons
Sludge Volume _____	+	Scum Volume _____	= Total Sludge and Scum Volume _____ Gallons
Total Sludge and Scum Volume _____	/	Liquid Capacity _____	= Percent Sludge and Scum in Tank _____ %



Tank Depth measured from invert of outlet pipe to bottom of tank

\*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 <u>[Signature]</u>	Date <u>9/25/15</u>	Reset Form
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