

## DELAKIWENT OF LARPIC HEALTH AND FUNKONWENT

**GOVERNMENT CENTER** 

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## SSTS MAINTENANCE REPORT

		System Locat	ion			
Address 13/76 20	th StV	7.3	<del></del>	Telephone i	Number	
City Stillwester		ate Mul ZIPS	5082 Pro	perty ID No./0	GEO Code	
Owner Part Lengy		mping Date /C				
		Contractor				
Maintainer MEYER S	EWER MP	CA License No.	915	Telephone I	Number 65/-	459-016
What was done to the system?		7 [	Report Liquid Capacity in Gallons			
🗷 Tank(s) Pumped		Ta	ank 1: /200	Pumped	Tank 2:	Pumper
Sludge and scum measured.		į i	ank 3:	Pumped		Pumper
Do tanks need to be pumped?  Tes No (If no provide measurements below)		Т	otal Gallons Pum	ped: /20	<i></i>	ant.
Visual Inspection (note any		<del></del>	NOTE: This do	es not serve	as a compliand	e inspection
				PE	CENTRE	* Tarana
					07	nd.
	*Tank Measurement	s-Use Only If T	ank(s) Were NO	T Pumped		
Tank Length in. X	Tank Width in.	<b>χ</b> Tank Depth	in. =	Tank Volum	e (cubic inches)	· · · · · · · · · · · · · · · · · · ·
Tank Radius in. X	Tank Radius in.	X 3.14 =	Fank Volume (cul	bic inches)		
Tank Volume (cu. in.)	/ <b>231.01</b> = Liquid	Capacity	Gallons /	Tank Depth	in. = Gallon	s/Inch
Sludge Level in. X	Gallons Per Inch	= Sludge Volum	ne Gallo	ons		
Scum Level in. X	Gallons Per Inch	= Scum Volume	Gallo	ons		
Sludge Volume + 1	Scum Volume :	= Total Sludge a	and Scum Volum	e	Gallons	
Total Sludge and Scum Volum	e/ Liquid 0	Capacity	= Percent	Sludge and Se	- cum in Tank 	%
,		1			ist be pumped if conditions exist:	either of the
Scum Layer  Effluent		from inv	pth measured vert of outlet bottom of tank	12 inches i baffle; or 2. Total slu	of the sludge lay from the bottom udge and scum vo ercent of the tank	of the outlet