

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

GOVERNMENT CENTER

14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006 Office: 651-430-6655 TDD: 651-430-6246 FAX: 651-430-6730

## SSTS MAINTENANCE REPORT

		System Location	<u> </u>		and the state of t
Address 15824	50th 545			Telephone Number	
City Afton		State MM ZIP 54	"COD! Prop	erty ID No./GEO Code	
Owner Herb 1	Boeckerman	Pumping Date /(0) /	14/15		
Contractor					
Maintainer MEYER	RSEWER	MPCA License No.	715	Telephone Number 65	1-459-016.
What was o	done to the system?		Repo	rt Liquid Capacity in Gall	lons
Tank(s) Pumped		Tank	1: 1500 Z	Pumped Tank 2:	Pumped
Sludge and scum me		Tank		Pumped Tank 4:	Pumped
Do tanks need to be	pumpea: no provide measurement	s below) Tota	Gallons Pump	ed: <i>1500</i>	
w.,	te any problems with t			s not serve as a compli	iance inspection.
				RECEIV	General Same
				JAN 07 20	)16
				PUBLIC HE	ALTH
	*Tank Measu	rements-Use Only If Tan	k(s) Were NOT	Pumped	
Tank Length in	n. 🗶 Tank Width	in. <b>X</b> Tank Depth	in. =	Tank Volume (cubic inche	es)
Tank Radius is	n. <b>X</b> Tank Radius	in. $X = 3.14 = Tar$	ık Volume (cubi	ic inches)	-
Tank Volume (cu. in.)	/ 231.01 =	Liquid Capacity	Gallons / 7	Tank Depth in. = Ga	llons/Inch
Sludge Level i	n. <b>X</b> Gallons Per Inch	= Sludge Volume	Gallor	าร	
Scum Level i	n. <b>X</b> Gallons Per Inch	= Scum Volume	Gallor	15	
Sludge Volume	+ Scum Volume	= Total Sludge and	l Scum Volume	Gallons	
Total Sludge and Scum	Volume /	Liquid Capacity	= Percent S	ludge and Scum in Tank	%
Scum Layer  Effluent  Sludge Layer		from inver	n measured of outlet ctom of tank	*Tanks must be pumper following conditions ex 1. The top of the sludge 12 inches from the bott baffle; or 2. Total sludge and scur than 25 percent of the t capacity.	ist: : layer is less than :om of the outlet m volume is greate
Cinnak		Data		Pas	et Form

Data