

SSTS MAINTENANCE REPORT

| System Location | | |
|--|----------------------------------|-------------------------------------|
| Address <u>3649 Stagecoach Trail N</u> | Telephone Number | |
| City <u>Stillwater</u> | State <u>MN</u> ZIP <u>55082</u> | Property ID No./GEO Code |
| Owner <u>JOE DEVINE</u> | Pumping Date <u>10/22/15</u> | |
| Contractor | | |
| Maintainer <u>MEYER SEWER</u> | MPCA License No. <u>915</u> | Telephone Number <u>651-459-016</u> |

What was done to the system?

Tank(s) Pumped 2

Sludge and scum measured.

Do tanks need to be pumped?

Yes No (If no provide measurements below)

Report Liquid Capacity in Gallons

Tank 1: 1000 Pumped Tank 2: 1000 Pumped

Tank 3: _____ Pumped Tank 4: _____ Pumped

Total Gallons Pumped: 2000

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**

Tank Length _____ in. Tank Width _____ in. Tank Depth _____ in. = Tank Volume (cubic inches) _____

Tank Radius _____ in. Tank Radius _____ in. **3.14** = Tank Volume (cubic inches) _____

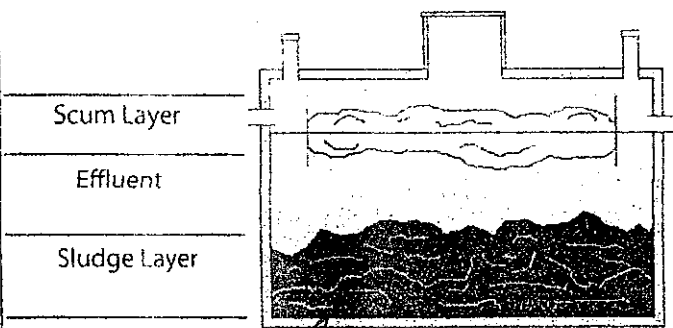
Tank Volume (cu. in.) _____ / **231.01** = Liquid Capacity _____ Gallons / Tank Depth _____ in. = Gallons/Inch _____

Sludge Level _____ in. Gallons Per Inch _____ = Sludge Volume _____ Gallons

Scum Level _____ in. 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 [Handwritten Signature]

Date 10/22/15

Recat Form