

SSTS MAINTENANCE REPORT

| System Location | | |
|--|----------------------------------|--------------------------------------|
| Address <u>3724 Manning Ave. S</u> | Telephone Number | |
| City <u>Woodbury</u> | State <u>MN</u> ZIP <u>55129</u> | Property ID No./GEO Code |
| Owner <u>Maplewood Development Inc</u> | Pumping Date <u>8/11/15</u> | |
| Contractor | | |
| Maintainer <u>MEYER SEWER</u> | MPCA License No. <u>915</u> | Telephone Number <u>651-459-0163</u> |

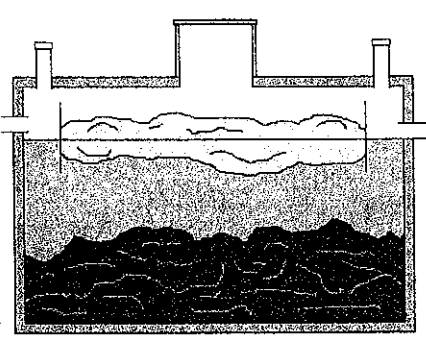
| What was done to the system? |
|---|
| <input checked="" type="checkbox"/> Tank(s) Pumped <u>1</u> <input type="checkbox"/> Sludge and scum measured. Do tanks need to be pumped? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no provide measurements below) |

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

Visual Inspection (note any problems with the system):

NOTE: This does not serve as a compliance inspection.

| *Tank Measurements-Use Only if Tank(s) Were NOT Pumped | | | |
|--|--|--|---|
| Tank Length _____ in. | <input checked="" type="checkbox"/> Tank Width _____ in. | <input checked="" type="checkbox"/> Tank Depth _____ in. | = Tank Volume (cubic inches) _____ |
| Tank Radius _____ in. | <input checked="" type="checkbox"/> Tank Radius _____ in. | <input checked="" type="checkbox"/> 3.14 | = Tank Volume (cubic inches) _____ |
| Tank Volume (cu. in.) _____ | / 231.01 | = 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 _____ | % |



Scum Layer

Effluent

Sludge Layer

*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.

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

Signature [Signature]

Date 8/11/15

Reset Form