

SSTS MAINTENANCE REPORT

System Location		
Address <u>11820 Lockridge Ave S.</u>	Telephone Number _____	
City <u>Hastings</u>	State <u>MN</u> ZIP <u>55033</u>	Property ID No./GEO Code _____
Owner <u>Greg John</u>	Pumping Date <u>8/20/15</u>	
Contractor		
Maintainer <u>MEYER SEWER</u>	MPCA License No. <u>915</u>	Telephone Number <u>651-459-0111</u>

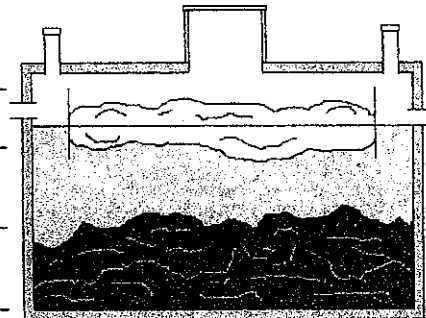
What was done to the system?
<input checked="" type="checkbox"/> Tank(s) Pumped <input type="checkbox"/> Sludge and scum measured. Do tanks need to be pumped? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no provide measurements below)

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 _____	%



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 [Signature]

Date 8/20/15

Reset Form