

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	n Location		
Address 8308	Stilluster Blue	11		Telephone Number	
City Lake El	no	State ///	ZIP 55042	Property ID No./GEO Code	
Owner Brittaes	1 Malmouist	Pumping D	ate N/a4/15		
		Con	itractor		
Maintainer MEYE	ER SEWER	MPCA Licen	se No. 915	Telephone Number 65	1-459-0162
What was done to the system?			Report Liquid Capacity in Gallons		
Tank(s) Pumped			Tank 1: /500	Pumped Tank 2: 100	Pumpecy
Sludge and scum measured. Do tanks need to be pumped?			Tank 3:	Pumped Tank 4;	Pumped
Yes No (If no provide measurements below)			Total Gallons Pumped: 2500		
	note any problems with		NOTE: This	does not serve as a compl	iance inspectior
Table		·	nly If Tank(s) Were I		
Tank Length	in. X Tank Width	in, X Tank	cDepth in.	= Tank Volume (cubic inche	es)
Tank Radius	in. 🗶 Tank Radius	in. X 3,1	4 = Tank Volume (cubic inches)	
Tank Volume (cu. in.)	/ 231.01 =	Liquid Capacity	, Gallon	s / Tank Depth in. = Ga	llons/Inch
Sludge Level	in. X Gallons Per Inch	= Sludge	e Volume G	allons	
Scum Level	in. X Gallons Per Inch	= Scum	Volume G	allons	
Sludge Volume	+ Scum Volume	= Total S	iludge and Scum Volu	ume Gallons	
Total Sludge and Scu	m Volume /	Liquid Capacity	= Perce	ent Sludge and Scum in Tank	%
Scum Layer Effluent Sludge Layer		fi fi	ank Depth measured rom invert of outlet sipe to bottom of tan	2. Total sludge and scur	ist: layer is less than rom of the outlet m volume is greate