

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

GOVERNMENT CENTER

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SSTS MAINTENANCE REPORT

			Sy	stem Locati	on			M
Address 157 Oyanwell Aucs				Telephone Number				
City Lakelone	•	State	te////ZIP 55043 Property ID No./GEO Code					
Owner Pete	5./	5	Pumpi	ng Date	16/15			
				Contractor				
Maintainer MEY	ER	SEWER	MPCA L	icense No.	915	Telephon	e Number 65/-	459-0162
What was done to the system?				[Re	port Liquid C	apacity in Gallon	S
Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Yes No (If no provide measurements below)				Tank 1: Pumped Tank 2: Pumped Tank 3: Pumped Tank 4: Pumped Tank 4				
Visual Inspection	(note d	any problems with	n the system)	: !	NOTE: This o	ioes not serv	e as a complian	ce inspectior
Tank Length	in. 1	*Tank Mea	surements-U	se Only If Ta Tank Depth		· · · · · · · · · · · · · · · · · · ·	me (cubic inches)	
Tank Radius	 in.)	 χ Tank Radius	in. X	3.14 = Ta	ank Volume (c	ubic inches)		
Tank Volume (cu. in	.)	/ 231.01	= Liquid Cap	acity	Gallons	/ Tank Depth	in. = Gallor	ns/Inch
Sludge Level	in.]	K Gallons Per Inch	= SI	udge Volum	e Ga	Ilons		
Scum Level	in. Y	X Gallons Per Inch	≕ Sc	tum Volume	Ga	llons		
Sludge Volume		F Scum Volume	= To	otal Sludge a	nd Scum Volu	me 	Gallons	
Total Sludge and Sc	um Vol	ume	/ Liquid Capa	acity	= Percer	nt Sludge and	Scum in Tank	%
Scum Layer Effluent Sludge Layer				from inve	oth measured ert of outlet ottom of tank	followin 1. The to 12 inche baffle; or 2. Total s	ludge and scum vo percent of the tank	ver is less than of the outlet