

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

GOVERNMENT CENTER

14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006
Office: 651-430-6655 TTY: 651-430-6246 FAX: 651-430-6730

Subsurface Sewage Treatment System Maintenance Permit

This section must be completed in its entirety to constitute a valid maintenance permit. This permit must be completed <u>prior</u> to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance:	12-12-19 Reason f	or Maintenance:	Reg M	aint	
Property Address: 10	151 Kerry CT		Property Owner's Na	ame: Brad 1	Souchen
Municipality:	2 (ZIP: 5503)	Property Ide	ntification Number:		
Maintenance Permit No	o: 4 19 44:17 987 M	— aintainer Name aı	nd License No. Smili	ie's Sewer Service/L	2428
2.2500,000.0.83001000000000 dev decompositions (new					
/ Maintana	Dorformed	Tank Moas	surament (must be	completed if tanks	NOT numand)
Maintenance Performed		Tank Measurement (must be completed if tanks NOT pumped)			
Tank(s) Pumped		Liquid Level of Tank in Sludge Level in Tank in Scum Level in Tank in			
Sludge and scum measured		Sludge + Scum / Liquid Level X 100			
Do tanks need to be pumped? ☐ Yes ☐ No (if no provide measurements)		= % Sludge & Scum Tanks must be pumped if 25% or greater			
☐ 1es ☐ 140 (II 1	io provide measurements)				
1. Access used to remove septage: Maintenance Hole Other (enter authorization code) Pre 1980					
2. Were all covers securely replaced? Yes \sum No					
3. Is there evidence of tank leakage from a septic, holding, pretreatment or pump tank below the operating depth or					
evidence of damaged, cracked, or structurally unsound maintenance hole covers? Yes No					
	Tank	Leaking Out	Leaking In	Cover Damage	
	Septic/Holding Tank #1	☐ Yes ☐ No	☐ Yes ☐No	☐ Yes ☐No	-3"
	Septic/Holding Tank #2	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	h
	Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
	Pump Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
4. How many gallons of septage were removed?					
Tank #1 250 gal Tank #2 gal Pretreatment tank gal Pump Tank gal					
5. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.					
-			1 "		
6. Location of septage disposal: ('sags Land Apply					
				'/	

Smilie's Sewer Service PO BOX 100

Scandia, MN 55073

License# 2428 P: 651-433-3934