

OUTENIAMENT 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 Location			
Address 5930	Deer Tr Circ	k	Telephone	Number	
City U South	inv	State MM ZIP 55/29	Property ID No.	/GEO Code	
Owner Ry Charol		Pumping Date 6/30/	5-		
		Contractor			
Maintainer MEYE	ERSEWER M	MPCA License No. 91	5 Telephone	Number 651-459-016	
What wa	s done to the system?		Report Liquid C	apacity in Gallons	
Tank(s) Pumped		Tank 1: 🔏	Sas Pumped	Tank 2: Pumped	
Sludge and scum		Tank 3:	Pumped	Tank 4: Pumped	
Do tanks need to I	pe pumped? (If no provide measurements belo	Total Gall	Total Gallons Pumped:		
	note any problems with the sy		This does not serv	e as a compliance inspection	
			Park Park	CEIVED	
			J	AN 05 2016	
			PUBL	CHEALTH	
	*Tank Measurem	ents-Use Only If Tank(s) \	Were NOT Pumped		
Tank Length	in. X Tank Width i	in. X Tank Depth	in. = Tank Volui	me (cubic inches)	
Tank Radius	in. X Tank Radius i	n. X 3.14 = Tank Vo	olume (cubic inches)		
Tank Volume (cu. in.)	/ 231.01 = Liqu	uid Capacity	Gallons / Tank Depth	in. = Gallons/Inch	
Sludge Level	in. X Gallons Per Inch	= Sludge Volume	Gallons		
Scum Level	in. X Gallons Per Inch	= Scum Volume	Gallons		
Sludge Volume	+ Scum Volume	= Total Sludge and Scu	ım Volume	Gallons	
Total Sludge and Scu	um Volume / Liqu	id Capacity ====================================	Percent Sludge and	Scum in Tank %	
Scum Layer Effluent Sludge Layer		Tank Depth me from invert of c pipe to bottom	following 1. The to 12 inche baffle; o 2. Total s than 25	sludge and scum volume is great percent of the tank's liquid	
Signature		Date		Reset Form	
Digitature				<u> </u>	