

SSTS MAINTENANCE REPORT

System Location

Address 16170 2nd St. N Telephone Number _____
 City Lakeford State MN ZIP 55043 Property ID No./GEO Code _____
 Owner TERESA BRENNAN Pumping Date 10/27/15
 Contractor _____

Maintainer MEYER SEWER MPCA License No. 915 Telephone Number 651-459-0162

What was done to the system?

Tank(s) Pumped 2
 Sludge and scum measured.
 Do tanks need to be pumped?
 Yes No (If no provide measurements below)

Report Liquid Capacity in Gallons

Tank 1: 1000 Pumped Tank 2: 1000 Pumped
 Tank 3: _____ Pumped Tank 4: _____ Pumped
 Total Gallons Pumped: 2000

Visual Inspection (note any problems with the system):

NOTE: This does not serve as a compliance inspector

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*Tank Measurements-Use Only If Tank(s) Were NOT Pumped

Tank Length _____ in. Tank Width _____ in. Tank Depth _____ in. = Tank Volume (cubic inches) _____

Tank Radius _____ in. Tank Radius _____ in. 3.14 = Tank Volume (cubic inches) _____

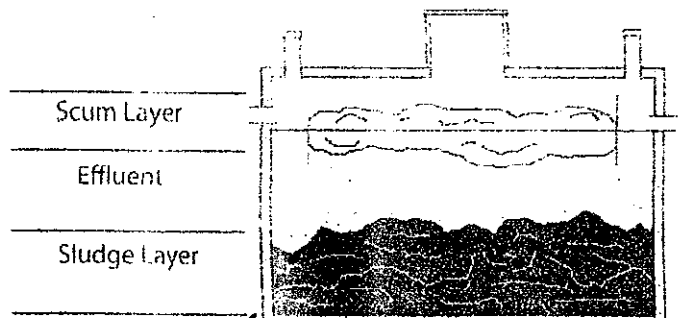
Tank Volume (cu.in.) _____ / 231.01 = Liquid Capacity _____ Gallons / Tank Depth _____ in. = Gallons/Inch _____

Sludge Level _____ in. Gallons Per Inch _____ = Sludge Volume _____ Gallons

Scum Level _____ in. 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.

MTL

10/27/15