

DELAKTWENT OF SORFIC HEALTH AND ENVIRONMENT

GOVERNMENT CENTER

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SSTS MAINTENANCE REPORT

	· · · · · · · · · · · · · · · · · · ·	System	Location			
Address 1275	0 1209h	St. N	Telephone Number			
City Stillwa		State MN	V ZIPS 5082 Property ID No./GEO Code			
Owner Paula An	d Jesse Kunt	Pumping Da	ate 9/1/15			
			tractor			
Maintainer MEYE	RSEWER	MPCA Licens	se No. 915	Telephone N	lumber 657-4	159-016
What was done to the system?			Report Liquid Capacity in Gallons			
Tank(s) Pumped			Tank 1: /4	Pumped	Tank 2:	Pumped
Sludge and scum measured.			Tank 3:	Pumped		Pumped
Do tanks need to be pumped? Yes No (If no provide measurements below)			Total Gallon	s Pumped: 150	(TC)	
	note any problems with	NOTE: This does not serve as a compliance inspection.				
	*Tank Meas	surements-Use O	nly If Tank(s) We	re NOT Pumped		
Tank Length	in. X Tank Width	in. X Tanl		in. = Tank Volum	e (cubic inches)	
Tank Radius	in. 🗶 Tank Radius	in. X 3.1	4 = Tank Volui	ne (cubic inches) —		
Tank Volume (cu. in.)	/ 231.01 =	= Liquid Capacity	, Ga	llons / Tank Depth	in. = Gallon	s/Inch
Sludge Level	in. X Gallons Per Inch	= Sludg	e Volume	Gallons -		
Scum Level	in. X Gallons Per Inch	= Scum	Volume	Gallons		
Sludge Volume	+ Scum Volume	= Total :	Sludge and Scum	Volume	Gallons	
Total Sludge and Scu	ım Volume	/ Liquid Capacity	= P	ercent Sludge and S	cum in Tank	<u></u> %
Scum Layer Effluent Sludge Layer			Tank Depth meas from invert of out pipe to bottom o	following 1. The top 12 inches ured baffle; or 2. Total sl than 25 p	ust be pumped if conditions exist: of the sludge lay from the bottom udge and scum vercent of the tank	er is less than of the outlet olume is greate
Signature	11	Da	ate 9/	15	Reset F	orm
Signature /				<u>/ - </u>		