

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT GOVERNMENT 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

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Address 13460 18200 St		Telephone Number 651.433 - 35	) ( <i>0</i>
City MARINE	State NW ZIP 550	104 7 Property ID No./GEO Code	117
Owner MRANDE & CONCA Danhin	Pumping Date 👌 –	7-16	leaparine-species
	Science colors		
Maintainer Ol SUN Selves	MPCA License No. 21	Telephone Number 651 - 414 200	32
Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Yes No (If no provide measurements b		Pumped Tank 4: Pumped:	mped mped
the state of the s	system). NOTE	: This does not serve as a compliance inspec	ction.
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Company of the second s		Assault Parising	
Tank Length in. 🗶 Tank Width	in. X Tank Depth	in. = Tank Volume (cubic inches)	
Tank Radius in. X Tank Radius	in. <b>X 3.14</b> = Tank Vol	desirements of the second seco	
The state of the s			
Sludge Level in. X Gallons Per inch		Emilionius (Micorca)	
The second secon	= Sludge 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 Scum Volume / Liqui	d Capacity = F	Percent Sludge and Scum in Tank %	
Scum Layer Effluent Sludge Layer	Tank Depth measur from invert of outling pipe to bottom of	et 2. Total sludge and scum volume is grea	n t
Signature (I) ( N/ M)	Date 2-7	-1(p Resultation 1)	