

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

			Sy	stem Locat	tion		······································		
Address 1740 Olene Aux				Telephone Number					
City Stillust	2		State	Med ZIP	64082	Property	ID No./GEO Coc	ie	***
Owner David	Ho	n Phresis	Pumpii	ng Date [/	2/15		· ·		· ······
				Contractor	- <i>70</i>				
Maintainer MEY	ER.	SEWER	MPCA L	icense No.	915	Tele	phone Number	651-459-6	016
What was done to the system?							quid Capacity in		
Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Yes No (If no provide measurements below)				T	ank 1: 100 ank 3: otal Gallons F	_ Pu	imped Tank 2: imped Tank 4:		nped
Visual Inspection (note a	ny problems with t	the system)	:	NOTE: This	s does no	t serve as a co	mpliance inspec	ction
Tank Length	in. 🕽	*Tank Measu	· · · · · · · · · · · · · · · · · · ·	se Only If T	······································		nped < Volume (cubic	inches)	

Tank Radius	m.) (Tank Radius	ın. X	3.14 =	Tank Volume	(cubic inc	ines)		
Tank Volume (cu. in.)		/ 231.01 =	Liquid Cap	acity	Gallo	ns / Tank	Depth in. :	■ Gallons/Inch	
Sludge Level	in. X	Gallons Per Inch	= SI	udge Volum	ne (Gallons			
Scum Level	in. 🕽	Gallons Per Inch	= Sc	:um Volume					
	-			COLLY VOIGILIS	;	Gallons			
Sludge Volunie	-	Scum Volume	= Tc		and Scum Vo		Gallon	ıs	
Sludge Volume Total Sludge and Scu			= To Liquid Capa	otal Sludge a	and Scum Vo	lume —	Gallon le and Scum in T		