

## 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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1000		- 10		stem Location			a engrava a dig
Address 1225	5	1209h	<u>54. 5</u>		Telephor	ne Number	
City HASTIN	95		State	UN ZIPSSO3-	ア Property ID No	o./GEO Code	
Owner KEn /	Cor	de5	Pumpii	ng Date 7/21	115		
			al guide de la companya de la compa	Contractor			
Maintainer MEY	ER S	SEWER	MPCA L	icense No. 915	Telephon	ne Number 651-4	159-016
What wa	s done	to the system?			Report Liquid (	Capacity in Gallons	Contract Contract
Tank(s) Pumped	2			Tank 1: /	Pumped	d Tank 2: 1000	Pumped
Sludge and scum				Tank 3:		Tank 4:	Pumped
Do tanks need to							
☐ Yes ☐ No (If no provide measurements below) ☐ Total Gallons Pumped: 2500							
Visual Inspection (note any problems with the system): NOTE: This does not serve as a compliance inspection.							
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and the second second		*Tank Me	asurements-Us	e Only If Tank(s) We	re NOT Pumped		
Tank Length	in. X	Tank Width	in. <b>X</b>	Tank Depth	in. = Tank Volu	me (cubic inches)	
Tank Radius	in. X	Tank Radius	in. <b>X</b>	3.14 = Tank Volu	me (cubic inches)		
Tank Volume (cu. in.)		/ <b>231.01</b>	= Liquid Capa	acity Ga	llons / Tank Depth	in. = Gallons	/Inch
Sludge Level	in. X	Gallons Per Inch	= Slu	ıdge Volume	Gallons		
Scum Level	in. X	Gallons Per Inch	1 = Sci	um Volume	- Gallons		
Sludge Volume	+	Scum Volume	= To	tal Sludge and Scum	~ Volume	Gallons	
Total Sludge and Scum Volume / Liquid Capacity = Percent Sludge and Scum in Tank %							
					*Tanks m	nust be pumped if ei	ther of the
<u>.</u>					following	g conditions exist:	
Scum Layer						p of the sludge layer s from the bottom of	
				Tank Depth measu	haffla. av		i is le outlet
Effluent				from invert of outl	et 2. Total s	ludge and scum volu	
Sludge Layer				pipe to bottom of	tank tnan 25 p capacity.	percent of the tank's	nquiu
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