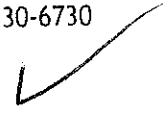


SSTS MAINTENANCE REPORT



System Location	
Address <u>4343 Penfield Ave. S</u>	Telephone Number
City <u>Afton</u>	State <u>MN</u> ZIP <u>55001</u> Property ID No./GEO Code
Owner <u>Tom Vermeiland</u>	Pumping Date <u>9/17/15</u>
Contractor	
Maintainer <u>MEYER SEWER</u>	MPCA License No. <u>915</u> Telephone Number <u>651-459-0165</u>

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: 1250 Pumped Tank 2: 1250 Pumped

Tank 3: _____ Pumped Tank 4: _____ Pumped

Total Gallons Pumped: 2500

Visual Inspection (note any problems with the system):

NOTE: This does not serve as a compliance inspection.

***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

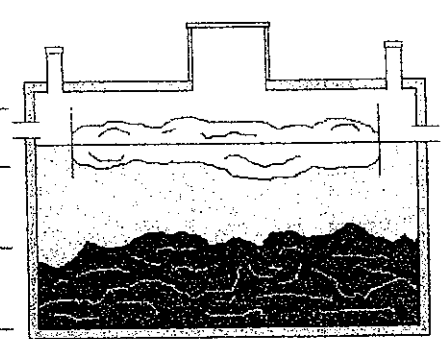
Sludge Volume _____ + Scum Volume _____ = Total Sludge and Scum Volume _____ Gallons

Total Sludge and Scum Volume _____ / Liquid Capacity _____ = Percent Sludge and Scum in Tank _____ %

Scum Layer

Effluent

Sludge Layer



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.

Signature [Handwritten Signature]

Date 9/17/15

Reset Form