

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

			Sys	tem Loca	tion				······································
Address 8390	D	TER PER	nd TRO	a/			Telephone i	Number	
City Lake	Elm		State//	ZIP	5504	2 Prope	erty ID No./C	EO Code	
Owner Vinginia Holden Pumping Date 9/22/5									
/			1	Contracto	r			,	
Maintainer MEYE	RJ	SEWER	MPCA Li	cense No.	915	-	Telephone N	Number 65/-	459-016.
What wa			Report Liquid Capacity in Gallons						
Tank(s) Pumped Z				T	ank 1: /	900) Z		Tank 2: 1000	-
☐ Sludge and scum r Do tanks need to I	Tank 3: Pumped Tank 4: Pumped								
	nts below)	Total Gallons Pumped: 2000							
Visual inspection (note any problems with the system): NOTE: This does not serve as a compliance inspection.									
						107			
*Tank Measurements-Use Only If Tank(s) Were NOT Pumped									
Tank Length	in. X	Tank Width	in. X	Fank Deptl	٦ 	in. =	Tank Volum	e (cubic inches) -	
Tank Radius	in. X	Tank Radius	in. 🗶	3.14 =	Tank Volu	me (cubi	inches)		
Tank Volume (cu. in.) / 231.01 = Liquid Capacity Gallons / Tank Depth in. = Gallons / Inch									
Sludge Level	in. X	Gallons Per Inch	= Slu	ıdge Volur	ne	Gallon 	S		
Scum Level	in. X	Gallons Per Inch	= Sc	um Volum	e	Gallon	S		
Sludge Volume	+	Scum Volume	= To	tal Sludge	and Scum	Volume		Gallons	
Total Sludge and Scu	/ Liquid Capa	iquid Capacity = Percent SI				cum in Tank	<u></u> %		
Scum Layer Effluent Sludge Layer				from in	epth meas vert of out bottom of	let	following of 1. The top 12 inches for 2. Total slu	st be pumped if a conditions exist: of the sludge lay from the bottom adge and scum vo ercent of the tank	er is less than of the outlet blume is greater

Reset Form