Washington ≈ County

Subsurface Sewage Treatment System Maintenance Permit

This section must be completed in its entirety to constitute a valid maintenance permit. This permit must be completed <u>prior</u> to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance: 5/20/16   Reason for Maintenance: Routine Maint.

Property Address: 14808 Oakhill Rd.   Property Owner's Name: Scot-Meister's Bar + Grill

Municipality: Scandia   ZIP: 55073   Property Identification Number: _____

Maintenance Permit No: 57641 y 1635   Maintainer Name and License No. Smilies Sewer Service 2428

Maintenance Performed	Tank Measurement (must be completed if tanks NOT pumped)
☐ Tank(s) Pumped	Liquid Level of Tank _____ in
☐ Sludge and scum measured	Sludge Level in Tank _____ in Scum Level in Tank _____ in
Do tanks need to be pumped?	Sludge + Scum _____ / Liquid Level _____ X 100
☐ Yes ☐ No (if no provide measurements)	= % Sludge & Scum _____ Tanks must be pumped if 25% or greater

1. **Access used to remove septage:** ☒ Maintenance Hole ☐ Other (enter authorization code) _____

2. **Were all covers securely replaced?** ☒ Yes ☐ No

3. **Is there evidence of tank leakage from a septic, holding, pretreatment or pump tank below the operating depth or evidence of damaged, cracked, or structurally unsound maintenance hole covers?**

Tank	Leaking Out	Leaking In	Cover Damage
Septic/Holding Tank #1	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Septic/Holding Tank #2	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Pretreatment Tank #3	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
Pump Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

4. **How many gallons of septage were removed?**   3rd

   Tank #1 1500 gal   Tank #2 1500 gal   ~~Pretreatment~~ tank 1500 gal   Pump Tank _____ gal

5. **Other information:** List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.

_____

_____

Maintenance activities must be reported to the Department within 90 days.