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

Sludge and scum measured. Do tanks need to be pumped? Yes No (If no provide measurements) 1. Access used to remove septage: Maintenance Hole Other (Go to #3 below) * Tank must be pumped if this vais greater than 25%. 2. If maintenance hole was used, were all covers securely replaced? No please explain Explanation: 3. If owner refuses to allow a Subsurface Sewage Treatment System (SSTS) to be pumped through the maintenance hole, have them complete and sign the following statement: I, (owner's name), refuse to allow the removal of solids and liquids through the maintenance hole. I understand that removal of solids and liquids through other access points is not considered maintenance. 4. Is the tank designed as a leaky tank? example: seepage pit, cesspool, drywell, leaching pit Tank#1 Yes No Verificatio Method Used: Tank#2 Yes No Verificatio Method Used:	Date of Maintenance S M21 Reason for Maintenance: 4686 22371					
What was done to the system? Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Total (Sludge + Scum) Liquid Level in. Scum Level	Property Address: 2100 Old	vild Ow. Prop	erty Owner's Name:	ent bussman		
Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Total (Sludge + Scum) Total (Sludge + Scum) Liquid Level = % Sludge & Scum Total (Sludge + Scum) Total (Sludge	Municipality: Scandia	State Zip Cod	e GEO Co	ode/Property i.D. #:		
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Do tanks need to be pumped? Total (Sludge + Scum)		Liquid Level of Tar	nk in. Sludge	Level in. Scum Level	in.	
Yes No (If no provide measurements)	I— -	nts)				
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Tank#1	hole. I understand that removal of solids an	d liquids through other	access points is not consid	dered maintenance.		
Tank#2	4. Is the tank designed as a leaky tank? example	le: seepage pit, cesspool, a	rywell, leaching pit			
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Tank Leaking Out Leaking In Cover Damage Septic/Holding Tank #1	Tank#2 Yes No Verificatio Metho	od Used:				
Tank Leaking Out Leaking In Cover Damage Septic/Holding Tank #1	5. Is there evidence of tank leakage from a septic, holding, pretreatment or pump tank below the operating depth or evidence of					
Septic/Holding Tank #1	-	i l	i'	Cover Damage		
Septic/Holding Tank #2						
Pump Tank			7	Yes No		
6. How many gallons of septage were removed? Tank #1 / OTO Tank #2 Pretreatment Tank Pump Tank 7. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns. 8. Certification: I hereby certify as a State of Minnesota certified SSTS Maintainer that I personally conducted the work	Pretreatment Tank	Yes No	Yes No	Yes No		
Tank #1 / OTT Tank #2 Pretreatment Tank Pump Tank 7. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns. 8. Certification: I hereby certify as a State of Minnesota certified SSTS Maintainer that I personally conducted the work	Pump Tank	Yes No	Yes No	Yes No		
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8. Certification: I hereby certify as a State of Minnesota certified SSTS Maintainer that I personally conducted the work	Tank #1 / OOC Tank #2 / OOC Pretreatment Tank Pump Tank					
8. Certification: I hereby certify as a State of Minnesota certified SSTS Maintainer that I personally conducted the work and made the observations, or directly supervised others in the performance of this job.	7. Other information: List any troubleshoot	ing, minor repairs cond	ucted, tank safety conc	erns, or other concerns.		
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	8. Certification: I hereby certify as a State of and made the observations,	Minnesota certified SSTS or directly supervised ot	Maintainer that I persona hers in the performance o	illy conducted the work of this job.		
Maintainer's Name: Olson's Sewer Service, Inc. Maintainer's Address: 17638 Lyons Street NE, Forest Lake, MN	Maintainer's Name: Olson's Sewer Service,	Inc. Maintain	er's Address: 17638 Lyon	s Street NE, Forest Lake, MN		
Maintainer's License #: 216 Maintainer's Phone #: 651-464-2082	Maintainer's License #: 216 Maint	ainer's Phone #: 651-46	64-2082	. 7		
Maintainer's Signature Date: 5-14-2	Maintainer's Signature	(m	Date: <u></u>	-14-21		
Maintainer's Name: Olson's Sewer Service, Inc. Maintainer's Address: 17638 Lyons Street NE, Forest Lake, MN	and made the observations,	or directly supervised ot	hers in the performance o	of this job.		