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 **prior** to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance: 5-17-22   Reason for Maintenance: Routine

Property Address: 5012 Isle Ave No   Property Owner's Name: Karen Magily

Municipality: Lake Elmo   ZIP: 55042 Property Identification Number: _____

Maintenance Permit No: V1119L27305 Maintainer Name and License No. Pinky's Environmental Sewer Service/ L1673

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? ☐ Yes ☑ No

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	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Pump Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

4. How many gallons of septage were removed?

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

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

   _____

   _____

6. Location of septage disposal: L. A.

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