

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

**GOVERNMENT CENTER** 

14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006 Office: 651-430-6655 TTY: 651-430-6246 FAX: 651-430-6730

## Subsurface Sewage Treatment System Maintenance Permit

This section must be	completed in its entirety	to constitute a v	alid maintenance p	ermit. This permit	must be complete	
	rming maintenance activiti					
Date of Maintenance:	4-17-22 Reason	for Maintenance:	Rathue	_	,	
Property Address:	103 Kecits Av	e bo	Property Owner's N	lame: JUSTN-	e Christa	
Municipality: <u>Stull</u>	sector zip5508	2 Property Ide	entification Number	:	_ Line	
Maintenance Permit N	10:1831m27652 M	laintainer Name a	nd License No. Pink	y's Environmental Se	ewer Service/ L167	
	nce Performed			completed if tanks		
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				
$\square$ Yes $\square$ No (if	no provide measurements)		= % Sludge & Scum Tanks must be pumped if 25% or greater			
1. Access used to ren	nove septage:   Maintenan	ce Hole Other (			3	
	curely replaced? Yes		ericer additionization co	ode)		
3. Is there evidence	of tank leakage from a sept aged, cracked, or structura	ic, holding, pret	reatment or pump tenance hole cove	tank below the opers?  Yes	rating depth or	
	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 1) CC	_ gal Tank #2	gal Pretreatment	tankga	l Pump Tank	gal	
5. Other information:	List any troubleshooting,					
. Location of septage	disposal:					
				The second		

Pinky's Environmental Sewer Service Inc.

PO Box 354

Afton MN 55001

P: 651-439-4847 License Number: L1673