Washington County

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 entire					
prior to performing maintenance activ	rities and remain on	site for the durati	on of the maintenar	nce activity.	
Date of Maintenance: 6-10-22 Reason	on for Maintenance: _	Paytine			
Property Address: 12050 81 t 5	St Cir No F	roperty Owner's N	ame: Heather	Wendorf	
Municipality: Stillwater zip: SS	Property Ider	ntification Number:	-	_	
Maintenance Permit No.9601+27434	Maintainer Name ar	d License No. Pink	y's Environmental Se	wer Service/ L1673	
	*				
Maintenance Performed	Tank Meas	Tank Measurement (must be completed if tanks NOT pumped)			
Tank(s) Pumped	Liquid Level of	Liquid Level of Tank ——— in			
☐ Sludge and scum measured	Sludge Level in	Sludge Level in Tank in Scum Level in Tank in			
Do tanks need to be pumped?	Sludge + Scum	Sludge + Scum / Liquid Level X 100			
\square Yes \square No (if no provide measurement	s) = % Sludge & Sci	= % Sludge & Scum Tanks must be pumped if 25% or greater			
3. Is there evidence of tank leakage from a sevidence of damaged, cracked, or struct				3 7	
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 remov					
Tank #1 gal Tank #2	gal Pretreatmen		al Pump Tank	gal	
5. Other information: List any troubleshooti					
6. Location of septage disposal:					
1		ewer Service Inc			

PO Box 354

Afton MN 55001

P: 651-439-4847 License Number: L1673