

## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT CENTER

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## **SSTS MAINTENANCE REPORT**

PUBLIC HEALTH

			LODE	NHEAL
System Location				
Address 20640 Neewahtin	Ave		Telephone Number	
City Forest Lake	State M ZI	P 55025	Property ID No./GEO Code	
Owner Merri Voiss	Pumping Date	11/3/22	-	
Contractor				
Maintainer DT Septic Services	MPCA License No	o. #3663	Telephone Number	(763) 286-1815
What was done to the system?		ı	Report Liquid Capacity in Ga	allons
<ul><li>☐ Tank(s) Pumped</li><li>☐ Sludge and scum measured.</li><li>Do tanks need to be pumped?</li><li>☐ Yes</li><li>☐ No (If no provide measurements)</li></ul>	below)	Tank 1: /000 Tank 3: Total Gallons P	Pumped Tank 2: Pumped Tank 4:	Pumped Pumped
Visual Inspection (note any problems with the system): NOTE: This does not serve as a compliance inspection.				
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*Tank Measurements-Use Only If Tank(s) Were NOT Pumped				
Liquid Level of Tank (Distance from invert of outlet pipe to bottom of tank) in.				
Sludge Level in. + Scum Level in. = Total Sludge and Scum Level				
Total Sludge and Scum Level / L	iquid Level	= Perce	ent Sludge and Scum in Tank	%
Scum Layer  Effluent  Sludge Layer		Liquid Level n from invert of pipe to botton	outlet liquid capacity.	ditions exist: ludge layer is less m the bottom of or
Signature & A	Date	11/3/3	) a Res	set Form