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 entirety to constitute a valid maintenance permit. This permit must be completed <u>prior</u> to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance: **9-30-22**   Reason for Maintenance: **Routine**

Property Address: **228 St Croix Trl No**   Property Owner's Name: **Robert Bearl**

Municipality: **Cakidcnel**   ZIP: **55043**   Property Identification Number: _____

Maintenance Permit No: **40493L29009**   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) **TDD D'd**

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 **700** gal   Tank #2 **700** gal   Pretreatment tank **800** gal   Pump Tank _____ gal

5. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.
   nothing
   _____

6. Location of septage disposal: **WW Treatment Plant St Paul**

Pinky's Environmental Sewer Service Inc.

PO Box 354

Afton MN 55001

P: 651-439-4847   License Number: L1673

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