Washington County Subst

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 comple | ted in its entirety of | to constitute a v | alid maintenance | permit. This permit mu | ist be complet |
|---|--------------------------|--|------------------------|---------------------------|----------------|
| Date of Maintenance: 1-10 | -17 Donner | es and remain o | 1-site for the dura | tion of the maintenance | e activity. |
| Date of Maintenance: 1-10 | Keason 1 | for Maintenance: | Routine | | |
| Property Address: | ximaca (| t No | Property Owner's 1 | Name: Stan Ho | auser |
| Municipality: We Elm | <u>0</u> zip:550 | 12 Property Ide | ntification Number | : | |
| Maintenance Permit No: 91 4 6 | 69629675 M | aintainer Name a | nd Linnar N. D. I | | _ |
| Maintenance Permit No: 9 46 | MI CONTROL | antamer Name a | nd License No. Pink | (y's Sewer Service Incorp | orated/ L425 |
| 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 sep | t age: Maintenanc | te Hole Other (| enter authorization co | ode) | - greater |
| 2. Were all covers securely re | | | | ode) | |
| 3. Is there evidence of tank le | | | eatment or numn | tank halamatha | |
| evidence of damaged, crae | cked, or structural | ly unsound main | tenance hole cove | rs? Yes No | ng depth or |
| | Tank | | | | |
| | | Leaking Out | Leaking In | Cover Damage | |
| Septic/Ho | olding Tank #1 | Yes No | Yes No | ☐ Yes ☐ No | |
| Septic/Ho | olding Tank #2 | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No | |
| Pretreatment Tank | | ☐ Yes ☐ No | Yes No | ☐ Yes ☐ No | |
| Pump Tar | nk | Yes □ No | Yes No | Yes No | |
| . How many gallons of septag | e were removed? | | 100 | | |
| Tank #1 1000 gal Ta | | al Pretreatment | tank ga | I Pump Tank 757 | wal |
| . Other information: List any | troubleshooting, m | ninor repairs con | ducted tank safet | V concerns or other co | _ gat |
| Slow drainage be | timen 1st ton | k and lift | pup tank | y concerns, or other co | incerns. |
| | | | / / | | |
| . Location of septage disposal: | wwtp | | | | |
| | 1 | | | | |
| | Pinky | 's Sewer Service | ncorporated | | |

PO Box 354

Afton MN 55001