

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	y to constitute a va	alid maintenance p	ermit. This permit	must be completed	
prior to performing maintenance activi					
Date of Maintenance: 11-25-22 Reason				,	
Property Address: 3583 Osgotol P	the UD	Property Owner's N	ame: Michall	e Kleman	
Municipality: Stillwater zip:550	82 Property Ide	ntification Number	:		
12(2-1,30.0.0			y's Sewer Service Inc	orporated/ L4251	
Maintenance Performed	Tank Mea	surement (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 measurements)	= % Sludge & Sc	= % Sludge & Scum Tanks must be pumped if 25% or greater			
3. Is there evidence of tank leakage from a seperidence of damaged, cracked, or structur Tank	rally unsound main	tenance hole cove	rs? Yes No Cover Damage	ating depth or	
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 See gal Tank #2 5. Other information: List any troubleshooting	_gal Pretreatment	tankga	al Pump Tank ty concerns, or othe	gal r concerns.	
Nore					

Pinky's Sewer Service Incorporated

PO Box 354

Afton MN 55001

P: 651-439-4847 License Number: L4251