



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 prior to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance: 7-14-23 Reason for Maintenance: Routine  
 Property Address: 9660 Juliane Ave N Property Owner's Name: Ron Knutson  
 Municipality: Scandia ZIP: 55013 Property Identification Number: \_\_\_\_\_  
 Maintenance Permit No: 12679030941 Maintainer Name and License No. Ross Sewer Service/L3448

Maintenance Performed	Tank Measurement (must be completed if tanks NOT pumped)
<input checked="" type="checkbox"/> Tank(s) Pumped <input type="checkbox"/> Sludge and scum measured Do tanks need to be pumped? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no provide measurements)	<del>           Liquid Level of Tank _____ in            Sludge Level in Tank _____ in Scum Level in Tank _____ in            Sludge + Scum _____ / Liquid Level _____ X 100            = % Sludge &amp; Scum _____ Tanks must be pumped if 25% or greater         </del>

- Access used to remove septage:  Maintenance Hole  Other (enter authorization code)
- Were all covers securely replaced?  Yes  No
- 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? None.

Tank	Leaking Out	Leaking In	Cover Damage
Septic/Holding Tank #1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Septic/Holding Tank #2	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pretreatment Tank	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pump Tank	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

4. How many gallons of septage were removed?  
 Tank #1 1,500 gal Tank #2 N/A gal Pretreatment tank N/A gal Pump Tank 500 gal

5. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.  
None.

6. Location of septage disposal: 29052 Dimaggio St NE North Branch MN 55056

Ross' Sewer Service, inc  
 9288 County Rd 5 NE  
 North Branch, MN 55056  
 License# 3448 P: 651-674-4349

**RECEIVED**  
**JUL 20 2023**  
**PUBLIC HEALTH**

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