

## SSTS MAINTENANCE REPORT

Date of Maintenance 7-25-23 Reason for Maintenance: 25900C31298  
 Property Address: 9890 223rd St NE Property Owner's Name: Grant Campbell  
 Municipality: Forest Lake State \_\_\_\_\_ Zip Code \_\_\_\_\_ GEO Code/Property I.D.#: \_\_\_\_\_

<p><b>What was done to the system?</b></p> <p><input checked="" type="checkbox"/> Tank(s) Pumped</p> <p><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)</p>	<p><b>Tank Measurements (inches) (Sludge, Scum, Liquid Level)</b></p> <p>Liquid Level of Tank _____ in. Sludge Level _____ in. Scum Level _____ in.</p> <p>Total (Sludge + Scum) _____ / Liquid Level _____ = % Sludge &amp; Scum _____</p>
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\* Tank must be pumped if this value is greater than 25%.

1. Access used to remove septage:  Maintenance Hole  Other (Go to #3 below)
2. If maintenance hole was used, were all covers securely replaced?  Yes  No please explain

Explanation: \_\_\_\_\_

3. If owner refuses to allow a Subsurface Sewage Treatment System (SSTS) to be pumped through the maintenance hole, have them complete and sign the following statement:

I, \_\_\_\_\_ (owner's name), refuse to allow the removal of solids and liquids through the maintenance hole. I understand that removal of solids and liquids through other access points is not considered maintenance.

4. Is the tank designed as a leaky tank? example: seepage pit, cesspool, drywell, leaching pit

- Tank #1  Yes  No Verification Method Used: \_\_\_\_\_
- Tank #2  Yes  No Verification Method Used: \_\_\_\_\_

5. 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?

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

6. How many gallons of septage were removed?

Tank #1 1300 Tank #2 \_\_\_\_\_ Pretreatment Tank \_\_\_\_\_ Pump Tank 300

7. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.

8. Certification: I hereby certify as a State of Minnesota certified SSTS Maintainer that I personally conducted the work and made the observations, or directly supervised others in the performance of this job.

Maintainer's Name: Olson's Sewer Service, Inc. Maintainer's Address: 17638 Lyons Street NE, Forest Lake, MN

Maintainer's License #: 216 Maintainer's Phone #: 651-464-2082

Maintainer's Signature: [Signature] Date: 7-25-23