

## 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 v	alid maintenance	permit. This permit	must be completed	
prior to performing maintenance activit	ies and remain o	n-site for the dura	tion of the maintena	nos activity	
Date of Maintenance:  Reason	for Maintenance:	Routine		ince activity.	
Property Address: 10140 Jody	Are lo	Property Owner's I	Name: May K	Pfeiffer	
Municipality: Stillwater ZIP: 550	82 Property Ide	entification Number	••		
Maintenance Permit No: <u>+3630931047</u> N	Maintainer Name	and License No. Dial			
	tameanier Name a	and License No. Pini	ky's Sewer Service Inc	corporated/ L4251	
Maintenance Performed	Tank Mea	asurement (must be	e completed if tanks	NOT pumped)	
☑ Tank(s) Pumped	and the second s	Tank — in			
☐ Sludge and scum measured	II Scall Ecycl II Jaik				
Do tanks need to be pumped?	Sludge + Scum / Liquid Level X 100				
$\square$ Yes $\square$ No (if no provide measurements)	= % Sludge & So	cum Ta	nks must be pumped	if 25% or greater	
1. Access used to remove septage: $\Box$ Maintenan	ce Hole 🗹 Other (	enter authorization c	ode)		
2. Were all covers securely replaced?   Yes					
3. Is there evidence of tank leakage from a sept	ic, holding, pret	reatment or pump	tank below the oper	ating depth or	
evidence of damaged, cracked, or structura	lly unsound mair	tenance hole cove	ers?  Yes  No	amig depth of	
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?		0 N N			
Tank #1 15 00 gal Tank #2	gal Pretreatment	tankga	l Pump Tank	gal	
5. Other information: List any troubleshooting, r	minor repairs cor	nducted, tank safe	y concerns, or other	gat	
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nathing	minor repairs cor	nducted, tank safe	ty concerns, or other	concerns.	
6. Location of septage disposal:	ninor repairs con	nducted, tank safer	ty concerns, or other	concerns.	

Pinky's Sewer Service Incorporated

PO Box 354

Afton MN 55001

P: 651-439-4847 License Number: L4251