GOVERNMENT CENTER 14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006 Office: 651-430-6655 TDD: 651-430-6246 FAX: 651-430-6730

## SSTS MAINTENANCE REPORT

Date of Maintenance 5/3/3			ner uri	
Date of Maintenance 5/3/3	H Reason for Mainte	nance: nagua	0211	
Property Address: 7680	66th St N	- 176	D34759	
		Property Owner's I	. 7db	ilver gerg
Municipality: Pinc Sprin	State Mr	J Zip Code 55115	GEO Code/Property I.D. F.	3-3
The state of the s		No. of Concession, Name of Street, or other party of the Concession, Name of Street, or other pa	- The state of the	
Tank(s) Pumped		individual of the same	The accordance for our	Drum Hizara
Sludge and scum measured.	Liquid Le	evel of Taffix in.	Sludge Level in. Sci	
Do tanks need to be pumped?	11_		. Sci	um Level in.
Yes No (If no provide med	isurements) Total (Slu	dge + Scum) / Li	iquid Level = 444	
T. Access used to remove septage: 1	Maintenancelle		***	dge & Scum
2. If maintenance hole was used were a	Il sovere en en e	Other (Go to #3 below)	* Tank must be pu	imped if this vilve
2. If maintenance hole was used, were a Explanation:	" covers securely replac	ed? Wes No plea	is greater than 25	<b>3%.</b>
<ol> <li>If owner refuses to allow a Subsurfaction them complete and sign the following.</li> </ol>	Ce Counce Page			
tnem complete and sign the followin	g statement:	System (SSTS) to be pum	ped through the maintenant	
				ice hole, have
hole. I understand that removed of called	(owner's name), refu	se to allow the removal of	Solids and travers	
hole. I understand that removal of solid.  6. Is the tank designed as a leaky tank? example the solid.	s and liquids through of	her access points is not co	solids and liquids through th	e maintenance
Tooling Tooling to the service of th	mple: seepage pit, cesspo	ol, drywell, leaching pit	maintenance.	
Tank#1  Yes No Verificatio Met	thod Used:	200		
Tanken Fin				
5. Is there evides — No Verificatio Met	hod Used:			
5. is there evidence of tank leakage from a damaged, cracked, or structurally unsou	septic, holding, pretr	ealment or numa seek a		
Tank	ing maintenance hole	covers?	elow the operating depth or	evidence
	1 ceeking Offi	Leaking In	3	-
Septic/Holding Tank #1	Yes No	Yes INO	Cover Damage	
Septic/Holding Tank #2	☐Yes ☐No	Yes No	Yes No	
Pretreatment Tank	□Yes □No	Yes No	LIYes TNo	2
Pump Tank	Fiver Five		☐Yes ☐No	
6. How many gallons of septage were remove	ed?	Yes No	[ Yes [ No	
Tank#1  500 Tank#2				
	Pretreatment Tax	nk Pui	mp Tank	
7. Other information: List any troubleshooting	g, minor repairs condu	cted, tank safety conse		
& Courter.		concent	ns, or other concerns.	
8. Certification: I hereby certify as a State of Mir and made the observations, or	nesota certified SSTS M	aintaine et	15	
and made the observations, or of Maintainer's Name: Olson's Source Committee	directly supervised other	is in the performance of a	conducted the work	
Maintainer's Name: Olson's Sewer Service, Inc.		in the second	ns JOD.	
Maintainest Lieures	The state of the s	Address: 17638 Lyons St	reet NE, Forest Lake, MN	
Maintainer's Signature	651-464-2	082		
- Advistorie	211	Date: 5/	2/24	
			5/24	
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