



Sewage tank maintenance reporting form

Reporting information

Permit # j1821f33855

Date of maintenance (mm/dd/yyyy): 4-3-24 Reason for maintenance: Routine
 Property address: 1021 Stagecoach Tr S Parcel ID: _____
 City: Afton State: MN Zip code: 55001
 Property owner's name: Elain Sawyer
 Property-owner's address if different: _____
 City: _____ State: _____ Zip code: _____

- Access used to remove septage: Maintenance hole Other (Unless a holding tank, go to #3 below)
- If the maintenance hole was used, were all covers secured in place? Yes No If no, please explain below:
- If the 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, _____, refuse to allow the removal of the solids and liquids through the maintenance hole. I understand that removal of solids and liquids through other access points is not considered a compliant method of solids removal and does not fulfill the solids removal requirements of Minn. R. 7080.2450 and 7082.0600.

By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Owner's signature: _____ Date (mm/dd/yyyy): _____

- Is the tank designed as a leaky tank? (Example: seepage pit, cesspool, drywell, leaching pit)

Tank #1: Yes No Verification method used: Visual

Tank #2: Yes No Verification method used: Visual

- Is there evidence of the following?

Tank (check if present)	Tank leaks below the designed operating depth	Tank leaks above the designed operating depth	Maintenance hole cover is damaged, cracked, unsecured, or appears to be structurally unsound
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> Septic/holding Tank #2	<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
<input type="checkbox"/> 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
<input type="checkbox"/> Pump 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
Describe detail for any "Yes"			

- How many gallons of septage were removed?

Tank #1: 1000 Tank #2: 1000 Pretreatment Tank: _____ Pump Tank: _____

- Where was the septage taken? Wastewater treatment facility Land application Other

Explanation (Facility name/Site #): _____

- Did you identify any operational issues or unsafe conditions while assessing the sewage tanks in this system?

Yes No If yes, identify tank and explain:

Evidence of non-domestic waste Baffle(s) condition Effluent screen

Maintenance hole and extensions condition Other conditions (e.g. structural integrity of tank or lid, electrical hazard, etc.)

Explanation: _____

- List any troubleshooting and minor repairs completed or declined by owner:

Troubleshooting and repairs conducted:

Repairs declined by owner:

Additional comments or suggestions for owner's consideration:

Pumping record

Company information

Pinky's Sewer Service
 PO Box 354 Afton, MN 55001
 651-439-4847
 MN License 4251
 WI License 2118

Employee's signature: _____

[Signature]