Subsurface Sewage Treatment System Maintenance Permit

Property/Owner Information Permit #: h4794136161
Complete 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: 68/3/2011 Property ID #:
Property Address: 7101 Jucelyn Rd N Stillwath MN 55082 Street Address City State Zip
Property Owner Name: Dong Errin
Maintenance Performed
Tanks Pumped: ☐ Emergency ☐ Home Sale Sludge and Scum Measured: (must be completed if tanks NOT pumped) Liquid Level of Tank:in Sludge Level:in
☐ High-level alarm Scum Level:in
☐ Compliance Inspection ☐ Repair ☐ Other: Sludge+Scum/Liquid Levelx100=%Sludge & Scum Tanks must be Pumped if 25% or greater
Maintenance Information Access used to remove septage: Maintenance Hole Other (enter authorization code) Were all covers securely replaced? Yes No If No, Explain: Is the tank designed as a leaky? Ex. Seepage pit, cesspool drywell leaching pit Tank #1: Yes No Verification Method Used: Gallons Removed: ISO Leaking Out: Yes No Leaking In: Yes No Cover Damaged: Yes No Tank #2: Yes No Verification Method Used: Gallons Removed: Gallons Removed: Leaking Out: Yes No Leaking In: Yes No Cover Damaged: Yes No Tank #3: Yes No Verification Method Used: Gallons Removed: Gallons Removed: Leaking Out: Yes No Leaking In: Yes No Cover Damaged: Yes No Tank #4: Yes No Verification Method Used: Gallons Removed: Gallons Removed: Leaking Out: Yes No Leaking In: Yes No Cover Damaged: Yes No Pump Tank: Yes No Verification Method Used: Gallons Removed: Gallons Removed: Leaking Out: Yes No Leaking In: Yes No Cover Damaged: Yes No Waste Disposal Method: Treatment plant Apply: Location Other remarks or Concerns: Main was An Inchemy. Wharle Yeachess
Maintainer Information Maintainer Name: Pinky's Sewer Service Inc. Maintainer Signature: Maintainer Address: P.O. Box 354 Afton, MN 55001 Phone Number: 651-439-4847 License Number: L4251 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. Maintenance activities must be reported to the Department within 90 days.

Washington County