## Subsurface Sewage Treatment System Maintenance Permit

Property/Owner Information Permit #: x 0335v 36603
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: Property ID #:
Property Address: 9655 190 St N Forest Lake MIU 55025  Street Address City State Zip
Property Owner Name: 10m John
Maintenance Performed
Tanks Pumped:    Emergency
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: Ûi 5 4 9 ☐ Gallons Removed: ☐ Gallons Removed: ☐ Gallons Removed: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Leaking Out: ☐ Yes XNo Leaking In ☐ Yes XNo Cover Damaged: ☐ Yes XNo
Tank #2:□Yes No Verification Method Used: 1/854al Gallons Removed: 1/000
Leaking Out: ☐ Yes ☑ No Leaking In: ☐ Yes ☑ No Cover Damaged: ☐ Yes ☐ No
Tank #3:□Yes □ No Verification Method Used: Gallons Removed:
Leaking Out: ☐ Yes ☐ No Leaking In: ☐ Yes ☐ No Cover Damaged: ☐ Yes ☐ No  Tank #4: ☐ Yes ☐ No Verification Method Used: Gallons Removed:
Leaking Out: ☐ Yes ☐ No Leaking In: ☐ Yes ☐ No Cover Damaged: ☐ Yes ☐ No
Rump Tank:  Yes  No Verification Method Used: Gallons Removed:
Leaking Out: ☐ Yes ☐ No Leaking In: ☐ Yes ☐ No Cover Damaged: ☐ Yes ☐ No
Waste Disposal Method: Treatment plant Dand Apply: Location 24052 Dimaggio 67 North Branch M
Other remarks or Concerns: Nether
Maintainer Information  Maintainer Name: Ross' Sewer Service, Inc.  Maintainer Address: 9288 County Road 5 NE North Branch, MN 55056  Phone Number: 651-674-4349 License Number: L 3448  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.