

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 valid maintenance permit. This permit must be completed <u>prior</u> to performing maintenance activities and remain on-site for the duration of the maintenance activity.

| Date of Maintenance: | 11/13/24 Reason | for Maintenance: _ | Routine | | |
|--|---|--|---------------------------|------------------------------|---|
| Property Address: _5 | 410 Lake Elmo Ave N | F | Property Owner's Name: | | Kristina Lundquist |
| Municipality: | ZIP: _550 | 42 Property Idea | ntification Number: | | |
| Maintenance Permit I | No: | Maintainer Name ar | nd License No. Sch | nlomka Service LL | C/L2989 |
| Maintena | ance Performed | Tank Meas | urement (must be | completed if tank | s NOT pumped) |
| ✓ Tank(s) Pumped☐ Sludge and scumDo tanks need to☐ Yes ☐ No (if | | Liquid Level of Tank in Sludge Level in Tank in Scum Level in Tank in Sludge + Scum / Liquid Level X 100 = % Sludge & Scum Tanks must be pumped if 25% or greater | | | |
| 2. Were all covers so | move septage: | □No N/A | | | erating depth or t conf <u>irm precast via</u> |
| | Tank | Leaking Out | Leaking In | Cover Damage | |
| | Septic/Holding Tank #1 Septic/Holding Tank #2 | Some answers un | Yes No known. Pumped thro | Yes No Dugh inspection pipe. | |
| | Pretreatment Tank | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No | |
| | Pump Tank | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No | |
| Tank #1 1500 5. Other information | s of septage were removed gal Tank #2 n: List any troubleshooting | _gal Pretreatmen g, minor repairs co | | | |
| Some answers unk | nown. Pumped through inspe | ction pipe. | | | |
| / Lagation of conto | ne disnosal: Metro MCFS W | WTD | | | |

Schlomka Services, LLC 1904 Vermillion St. Hastings, MN 55033 License# 2989 P: 651-459-3718