

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

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

System Location					
Address 10207	209th St	M		Telephone Number 651	303-180
city Forest L	ake s	tate M N ZIF	55056 Pro	perty ID No./GEO Code	
Owner Gary Sto	orm P	umping Date	10-24	-16	
Contractor					
Maintainer R&M Septic MPCA License No. 7708 L 3070 Telephone Number (651) 674-8520					
What was done to the system? Report Liquid Capacity in Gallons					
Tank(s) Pumped			Tank 1: 1500	Pumped Tank 2:	Pumped
Sludge and scum measured		Tank 3:	Pumped Tank 4:	Pumped	
Do tanks need to be pumped? Yes No (If no provide measurements below) Total Gailons Pumped: / 500					
Visual Inspection (note any problems with the system): NOTE: This does not serve as a compliance inspection.					
					7:
2					
*Tank Measurements-Use Only If Tank(s) Were NOT Pumped					
Tank Length in. X	Tank Width in.	. X Tank Dep	th in. =	Tank Volume (cubic inches)	
Tank Radius in. X	Tank Radius in.	X 3.14 =	Tank Volume (cub	pic inches)	
Tank Volume (cu. in.) / 231.01 = Liquid Capacity Gallons / Tank Depth in. = Gallons/Inch					
Sludge Level in. X (Gallons Per Inch	= Sludge Volu	me Gallo	ns	
	Gallons Per Inch	•			
·		= Scum Volun			1
Sludge Volume	Scum Volume	= Total Sludge	and Scum Volume	Gallons	
Total Sludge and Scum Volum	ne/ Liquid	Capacity	= Percent S	Sludge and Scum in Tank	%
	,			*Tanks must be pumped if 6	either of the
100	AMERIKANIN WATER			following conditions exist:	
Scum Layer				 The top of the sludge layer inches from the bottom 	
Effluent			epth measured	baffle; or	
		Charles and	overt of outlet bottom of tank	Total sludge and scum vo than 25 percent of the tank	
Sludge Layer		pipe to	bottom of tank	capacity.	
		(0.2 ji)			
Signature Richard	· / (//a .	Ma Date	10 55-1	6 Reset Fo	nrm 1
Signature /	y (leiner	Date	10-24-1	D neset FC	/1111