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

Date of Maintenance 5/22/15 Reason for Maintenance: Row-inc					
Property Address: 11430 14th 51-) Property	Owner's Name:	Morre	Wilhbrow	Hesse
Municipality: Lake EMO State MN Zip Code 55047 GEO Code/Property I.D. #:					
What was done to the system?	Tank Measurements (must be completed if tanks NOT pumped)				
 ☐ Tank(s) Pumped ☐ Sludge and scum measured. Do tanks need to be pumped? ☐ Yes ☐ No (If no provide measurements) 	Total (Sludge + Scum) / Liquid Level = % Sludge & Scum				* cum *
1. Access used to remove septage: Maintenance Hole Other (Go to #3 below) * Tank must be pumped if this value is greater than 25%.					
2. If maintenance hole was used, were all covers securely replaced? Yes No please explain					
Explanation:					
3. If 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, (owner's name), refuse to allow the removal of solids and liquids through the maintenance					
hole. I understand that removal of solids and liquids through other access points is not considered maintenance.					
4. Is the tank designed as a leaky tank? example: seepage pit, cesspool, drywell, leaching pit					
Tank#1 Yes K No Verificatio Method Used:					
Tank#2 Yes No Verificatio Method Used:					
5. Is there evidence of tank leakage from a septic, holding, pretreatment or pump tank below the operating depth or evidence of damaged, cracked, or structurally unsound maintenance hole covers?					
Tank	Leaking Out	Leaking In	Cove	r Damage	
	Yes No	☐ Yes Æ No	Г Үе	es K No	=
Septic/Holding Tank #2	Yes No	☐ Yes ← No	Г	es K No	_
Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	ΓYe	es 🗆 No	_
Pump Tank	☐ Yes ☐ No	☐ Yes ☐ No	Г Үе	es 🗌 No	_
6. How many gallons of septage were removed?					
Tank #1 \\ \ZSO Tank #2 \\ \ZSG Pretreatment Tank Pump Tank \\ \qq					
7. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.					
8. Certification: 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.					
Maintainer's Name: SCHLOMKA SERVICES LLC. Maintainer's Address: 13450 122nd St S, Hastings MN 55033					
Maintainer's License #: 2989 Maintainer's Phone #: 651-459-3718					
Maintainer's Signature AMM Date: 5/22/15					