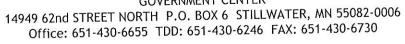
DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

GOVERNMENT CENTER





SSTS MAINTENANCE REPORT

Date of Maintenance 0 2 113 Reason for Maintenance: Rowhie			
0167	Property Owne	r's Name: Mork	Shilling
Municipality: Woodbury State MN Zip Code S5125 GEO Code/Property I.D. #:			
What was done to the system?	m? Tank Measurements (must be completed if tanks NOT pumped)		
☐ Sludge and scum measured.	Liquid Level of Tank	in. Sludge Level	in. Scum Level in.
Do tanks need to be pumped? Yes No (If no provide measurements)	Total (Sludge + Scum)		= % Sludge & Scum
1. Access used to remove septage: Maintenan	ce Hole	* Tan below) is a	k must be pumped if this value reater than 25%.
2. If maintenance hole was used, were all covers securely replaced? No please explain			
Explanation:	T to such Country (CCTC)	to be numbed through	the maintenance hole, have
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:			
l, (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.			
Is the tank designed as a leaky tank? example: seepage pit, cesspool, drywell, leaching pit			
Tank#1 Yes 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		Leaning	over Damage
Septic/Holding Tank #1	「Yes ▼ No 「	165 416	Yes No
Septic/Holding Tank #2	「Yes 「No 「	Yes No	Yes No
Pretreatment Tank	☐ Yes ☐ No ☐	Yes No	Yes No
Pump Tank	T Yes T No	Yes No	Yes No
6. How many gallons of septage were removed	1?		
Tank #1 1700 Tank #2	Pretreatment Tank	Pump Ta	nk
7. Other information: List any troubleshooting	, minor repairs conducted,	tank safety concerns, oi	other concerns.
7. Other miormation. List any			
8. Certification: Thereby 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 or this job.			
Maintainer's Name: SCHLOMKA SERVICES LLC. Maintainer's Address: 8890 202nd St. N Forest Lake, MN 55025			
Maintainer's License #: 2989 Maintainer's Phone #: 651-459-3718			
Maintainer's Signature JM/ Date: 10121115			