

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT GOVERNMENT CENTER

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SSTS MAINTENANCE REPORT

System Location			
Address 8340 - 1409h	St.N.		Felephone Number
City HUGD	State ~ ZIF	Prope	erty ID No./GEO Code
Owner Ell Rupnou	Pumping Date	9/13/16	
	Contract	A COMPANY REPORT ASSESSMENT OF A STATE OF A	The second secon
Maintainer Boss Pumping	MPCA License No), 1945	Telephone Number (651) 466-0800
What was done to the system? Tank(s) Pumped Sludge and scum measured. Do tanks need to be pumped? Yes No (If no provide measurem)	ents below)	THAT STEEL SHOW THE SECOND	t Liquid Capacity in Gallons Pumped Tank 2: Pumped Pumped Tank 4: Pumped Pumped Tank 4: Pumped
Visual Inspection (note any problems wit		NOTE: This does	not serve as a compliance inspection
*Tank Me Tank Length in. X Tank Width	asurements-Use Only I in. X Tank De		Pumped Tank Volume (cubic inches)
Tank Radius in. X Tank Radius		Tank Volume (cubi	c inches) ank Depth in. = Gallons/Inch
Tank Volume (cu. in.) / 231.01 Sludge Level in. X Gallons Per Incl	A-100		
Scum Level in. X Gallons Per Incl	h = Scum Volu	me Gallor	ns
Sludge Volume + Scum Volume	= Total Slud	ge and Scum Volume	Gallons
Total Sludge and Scum Volume	/ Liquid Capacity	= Percent S	ludge and Scum in Tank
Scum Layer Effluent Sludge Layer	from	Depth measured invert of outlet to bottom of tank	following conditions exist: 1. The top of the sludge layer is less than 12 inches from the bottom of the outlet baffle; or 2. Total sludge and scum volume is great than 25 percent of the tank's liquid capacity.
Signature A	Date	9-12-16	Reset Form