

## 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 entir	ety to constitute a val	id maintenance p	ermit. This permit m	ust be completed	
prior to performing maintenance ac	tivities and remain on-	site for the durat	ion of the maintenan	ce activity.	
Date of Maintenance: 10/12/16 Rea	ason for Maintenance: _	ROUTIN	IE	2 +	
Property Address: 1363 Old Hoe	ll Bridge Rd P	roperty Owner's N	lame: Jeff /	erkins)	
	5504/2 Property Iden	tification Number			
				-	
Maintenance Permit No: 19304t4689	— Maintainer Name an	d License No. Mey	er Sewer Service/ L91	5	
Maintenance Performed	Tank Meas	urement (must be	e completed if tanks h	IOT pumped)	
Tank(s) Pumped	nk(s) Pumped Liquid Level of Tank in				
Sludge and scum measured	Sludge Level in <sup>-</sup>	Sludge Level in Tank in Scum Level in Tank in			
Do tanks need to be pumped?	Sludge + Scum _	Sludge + Scum / Liquid Level X 100			
☐ Yes ☐ No (if no provide measureme	ents) = % Sludge & Sci	= % Sludge & Scum Tanks must be pumped if 25% or greater			
<ul><li>2. Were all covers securely replaced?</li><li>3. Is there evidence of tank leakage from a evidence of damaged, cracked, or structure.</li></ul>	a septic, holding, pretr	eatment or pump tenance hole cove	tank below the oper ers?	ating depth or	
Tank	Leaking Out	Leaking In	Cover Damage		
Septic/Holding Tank #1	☐ Yes XNo	☐ Yes No	☐ Yes No		
Septic/Holding Tank #2	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No		
Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No		
Pump Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No		
4. How many gallons of septage were rem	oved?				
Tank #1 1250 gal Tank #2	gal Pretreatmen	t tank	gal Pump Tank	gal	
5. Other information: List any troublesho	oting, minor repairs co	nducted, tank saf	fety concerns, or othe	er concerns.	
6. Location of septage disposal:	170 51	21			