

SSTS MAINTENANCE REPORT

System Location

Address <u>5793 180th St N</u>		Telephone Number <u>651 6471022</u>	
City <u>Hugo</u>	State <u>MN</u> ZIP <u>55308</u>	Property ID No./GEO Code	
Owner <u>Veronica Senkyr</u>		Pumping Date <u>11/14/16</u>	
Contractor			
Maintainer <u>DT Septic Services</u>	MPCA License No. <u>#3663</u>	Telephone Number	<u>(763) 286-1815</u>

What was done to the system?

Tank(s) Pumped
 Sludge and scum measured.
 Do tanks need to be pumped?
 Yes No (If no provide measurements below)

Report Liquid Capacity in Gallons

Tank 1: 1000 Pumped Tank 2: 1000 Pumped
 Tank 3: 1000 Pumped Tank 4: _____ Pumped
 Total Gallons Pumped: 2300

Visual Inspection (note any problems with the system):

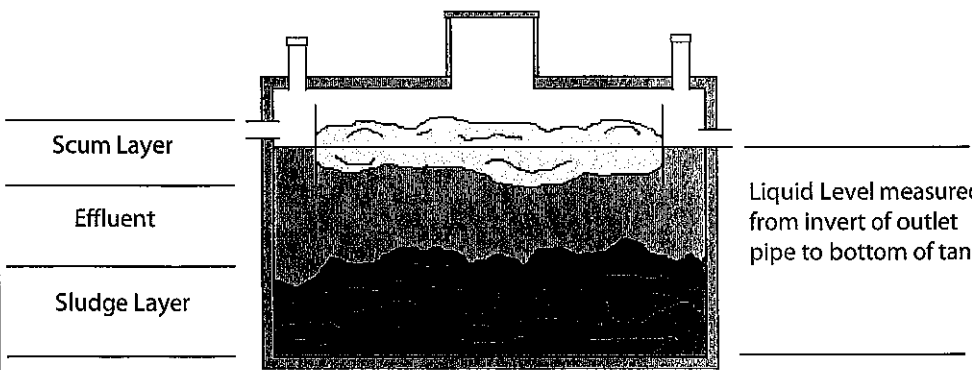
NOTE: This does not serve as a compliance inspection.

*Tank Measurements-Use Only If Tank(s) Were NOT Pumped

Liquid Level of Tank (Distance from invert of outlet pipe to bottom of tank) _____ in.

Sludge Level _____ in. + Scum Level _____ in. = Total Sludge and Scum Level _____

Total Sludge and Scum Level _____ / Liquid Level _____ = Percent Sludge and Scum in Tank _____ %



*Tanks must be pumped if either of the 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 greater than 25 percent of the tank's liquid capacity.

Signature _____

Date _____

Reset Form