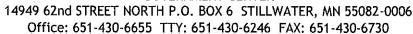


## DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

GOVERNMENT CENTER





## Subsurface Sewage Treatment System Maintenance Permit

This section must be	completed in its entirety	to constitute a va	lid maintenance po	ermit. This permit m	ust be completed	
<u>prior</u> to perfo	rming maintenance activit	ies and remain on	-site for the durat	ion of the maintenan	ce activity.	
Date of Maintenance:	4-19-17 Reason	for Maintenance:	Routine			
Property Address:	3275 contuny AV	<u>c.5.</u>	roperty Owner's N	ame: Bruce B	erggren	
Municipality: ၂၂၇၇	160my ZIP: 551-	ZS Property ide	ntification Number:	:		
	10: U9782IS637					
Maintenance Performed		Tank Measurement (must be completed if tanks NOT pumped)				
Tank(s) Pumped		Liquid Level of Tank in				
Sludge and scum measured		Sludge Level in Tank in Scum Level in Tank in				
Do tanks need to be pumped?		Sludge + Scum / Liquid Level X 100				
$\square$ Yes $\square$ No (if no provide measurements)		= % Sludge & Sci	= % Sludge & Scum Tanks must be pumped if 25% or greater			
	of tank leakage from a sepaged, cracked, or structur  Tank			-	ating depth or	
	Septic/Holding Tank #1	☐ Yes ⊠No	☐ Yes ☑No	☐ Yes ⊠No	<i>&gt;</i>	
	·		•			
	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	s of septage were removed	!?				
Tank #1 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	gal Tank #2	_gal Pretreatmen	t tankg	al Pump Tank	gal	
5. Other information	n: List any troubleshooting	, minor repairs co	nducted, tank safe	ety concerns, or othe	r concerns.	
					<del></del>	
6. Location of septag	ge disposat:				<u></u>	

Schlomka Services LLC 13450 122nd St S- Hastings MN 55033 651-459-3718

Maintenance activities must be reported to the Department within 90 days.