

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 entirety to constitute a valid maintenance permit. This permit must be completed prior to performing maintenance activities and remain on-site for the duration of the maintenance activity.

Date of Maintenance:	6/29/17 Reason	for Maintenance:	ROUTING						
Property Address:	مفسم والأسسا	\	Property Owner's I	Name: JM	LOMBAROO				
Municipality: Meil	E ZIP: 550	_	entification Number						
Maintenance Permit N	A 10 1 > >		nd License No. Smi		 ice/L2428				
	9 1				ICCY EZ IZO				
Maintenance Performed		Tank Measurement (must be completed if tanks NOT pumped)							
Tank(s) Pumped Sludge and scum measured Do tanks need to be pumped?		Liquid Level of Tank in Sludge Level in Tank in Scum Level in Tank in Sludge + Scum / Liquid Level X 100 = % Sludge & Scum Tanks must be pumped if 25% or greater							
						☐ Yes ☐ No (if no provide measurements)			
						1. Access used to remove septage: Maintenance Hole Other (enter authorization code)			
 Were all covers securely replaced? Yes \(\sumsymbol{\text{No}} \) No 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? \(\sumsymbol{\text{Yes}} \) \(\text{No} \) 									
	Tank	Leaking Out	Leaking In	Cover Damage	e				
	Septic/Holding Tank #1	☐ Yes X No	☐ Yes 🌠 No	☐ Yes 🌠 No	0				
	Septic/Holding Tank #2	☐ Yes 🗷 No	☐ Yes 🌠 No	☐ Yes 🛱 No	о				
	Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	o				
	Pump Tank	☐ Yes Æ\\\o	☐ Yes 🌠 No	☐ Yes 🗷 No	э .				
Tank #1_\250	of septage were removed? gal Tank #2 1250 List any troubleshooting,	gal Pretreatmen	t tank g	al Pump Tank _ ty concerns, or	300 gal other concerns.				
6. Location of septage	disposal:								

Smilie's Sewer Service 23893 Pomroy Ave N Scandia, MN 55073 License# 2428 P: 651-433-3934