## Washington County

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
GOVERNMENT CENTER
14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006
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## Subsurface Sewage Treatment System Maintenance Permit

This section must be <u>prior</u> to perfor  Date of Maintenance:	completed in its entirety ming maintenance activit	to constitute a val ies and remain on- for Maintenance:	site for the duration	ermit. This permit mon of the maintenan	ust be completed ce activity.	
Property Address: 17	- N 1/	. K/	roperty Owner's Na	me: Breat 1	Knauce	
$H_{\bullet}$	1 CM	7.7°	itification Number:		7	
Municipality: Tag	NUMBER DUSTA				<del></del>	
Maintenance Permiť N	0: <u>N60 10 T000 0</u> 1	Maintainer Name an	a License No. <u>Smili</u>	e's Sewer Service/L2	428	
	<u> </u>	<u>.</u> .	· · · · · · · · · · · · · · · · · · ·			
Maintena	nce Performed	Tank Meas	urement (must be	completed if tanks I	NOT pumped)	
Tank(s) Pumped		Liquid Level of Tank in				
<ul> <li>☐ Sludge and scum measured</li> <li>Do tanks need to be pumped?</li> <li>☐ Yes ☐ No (if no provide measurements)</li> </ul>		Sludge + Scum _ = % Sludge & Scu	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			
1 Access used to ren	nove septage: Mainteria	ance Hole Other (e	nter authorization co	ode)		
3. Is there evidence evidence of dama	of tank leakage from a seg aged, cracked, or structur ————————————————————————————————————	ptic, holding, pretr rally unsound main Leaking Out	tenance hole cove	rs?  Yes No  Cover Damage	ating depth or	
	Septic/Holding Tank #1	☐ Yes ☐/No	☐ 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 I No		
Tank #1 1600	of septage were removed gal Tank #2	gal Pretreatmen			gal er concerns.	
6. Location of septag	e disposal: <u>Was L</u>	Smilie's Sewer		pps		

Scandia MN 55073 651-433-3934