



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 I	oe completed in its entirety forming maintenance activi	to constitute a valies and remain or	alid maintenance p	ermit. This permit	must be completed	
	e: <u>5-4-17</u> Reason			non or the maintena	nce activity.	
Property Address: /(lame: Richard	of Connote	
Municipality:	101				11 Gossew	
			entification Number			
Maintenance Permit	No: d2330e (0244)	Maintainer Name a	nd License No. <u>Pink</u>	y's Environmental Se	wer Service/ L1673	
Maintenance Performed		Tank Mea	Tank Measurement (must be completed if tanks NOT pumped)			
Tank(s) Pumped			Liquid Level of Tank — in			
\square 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				
☐ Yes ☐ No (if no provide measurements)	= % Sludge & Sc	= % Sludge & Scum Tanks must be pumped if 25% or greater			
3. Is there evidence	ecurely replaced? Yes e of tank leakage from a sep naged, cracked, or structur Tank Septic/Holding Tank #1	otic, holding, pret	reatment or pump tenance hole cove	tank below the operers? Yes No Cover Damage Yes No	ating depth or	
	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		
	s of septage were removed gal Tank #2	?		al Pump Tank	gal	
System	n: List any troubleshooting, few old for manh	us				
		s Environmental Se PO Box 35	ewer Service Inc.			

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

Afton MN 55001 P: 651-439-4847 License Number: L1673