



*East Bethel City Hall*

2241 221<sup>st</sup> Ave NE | East Bethel, MN 55011

Phone: (763) 367-7844 | Fax: (763) 434-9578

**SEPTIC PUMPING PERMIT/REPORT**

**FEE \$5**

All of the following information is required.

PROPERTY OWNER INFORMATION

Property Owner Name: \_\_\_\_\_

Address of the property pumped: \_\_\_\_\_

Date pumped: \_\_\_\_/\_\_\_\_/\_\_\_\_

SEPTIC PUMPING COMPANY

State Licensed Septic Maintainer: \_\_\_\_\_ MPCA License #: \_\_\_\_\_

REQUIRED INFORMATION

<p>TYPE OF SYSTEM: <input type="checkbox"/> Mound    <input type="checkbox"/> Trench    <input type="checkbox"/> Specify other: _____</p> <p># of septic tanks: _____</p> <p>Gallons pumped: _____</p>
<p><b>REQUIRED by MN Rules 7080-0175 Sub 3, Sec b unless declined by the property owner.</b></p> <p>Was maintenance cover removed for cleaning:    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If the homeowner declines than homeowner must sign here: _____</p>
<p>After pumping and cleaning the tank, did you detect any problems with the condition of the tank and/or the inlet and outlet baffles?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, please explain: _____</p> <p>_____</p>
<p>Was there sewage on top of the ground (imminent health threat)?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>

SEPTIC DISPOSAL

MWCC Dumpsite Location: \_\_\_\_\_

Landsread Location: \_\_\_\_\_

**Submit to East Bethel City Hall with a \$5 fee. Pumping Reports will not be entered until the fee has been paid.**