

PO Box 10853 White Bear Lake, MN 55110 (651) 492-7550 Brian@Midwestsoiltesting.com

## **INVOICE**

BILL TO Mr. Brian Solos 1576 Headwater Lane Woodbury, MN 55129 

| BALANCE DUE  | \$590.00 |
|--|----------|
| Discount (Multiple Homes)  | -200.00  |
| Washington County Point Of Sale Compliance Inspection Filing Fee - Guest House | 50.00    |
| Septic System Compliance Inspection and Report - Guest House                   | 345.00   |
| Washington County Point Of Sale Compliance Inspection Filing Fee - Main Hous   | e 50.00  |
| Septic System Compliance Inspection and Report - Main House                    | 345.00   |
| ACTIVITY   | AMOUNT   |
|  |          |

MPCA Licensed Advanced Designers, Inspectors, & Service Providers

September 28, 2017

Mr. Brian Solos 1576 Headwater Lane Woodbury, MN 55129

Subject: Septic System at 991 Neal Ave N, West Lakeland, MN

Dear Brian:

Please find the attached septic system results for the subject property.

Per our agreement, please find the attached invoice, which is due for payment upon receipt. If you are not in agreement with this method of payment, please advise me as to the proper procedure to receive payment.

Thank you very much for allowing me to do this work. Please contact me should you have any questions.

Sincerely,

Brian Humpal

Brian Humpal

Cc Mr. Chris LeClair - Washington County

P.O. Box 383 Hugo, MN 55038

Brian Humpal

651-492-7550/Brian@midwestsoiltesting.com

MPCA Licensed Advanced Inspector

#### SUBSURFACE SEWAGE TREATMENT SYSTEM (SSTS) COMPLIANCE REPORT

**Date:** 9/11/17 & 9/25/17 **Time:** 10:30 AM **Owner:** Brian Solos **Inspection Address:** 991 Neal Ave N, West Lakeland Twp, MN 55082 (Main House)

#### **REPORT SUMMARY**

I have performed an "MPCA Compliance Inspection" on this system, have reviewed the history of the system with the owner, Brian Solos, and have reviewed the original design/permit records on file at Washington County. This system consists of a two plastic septic tanks and a chamber trench drainfield.

A leaking septic tank was replaced on 9/25/2017.

It should be noted that there is a separate system that serves the guest house. A separate inspection and report has been performed for that system.

Predicated on my inspection of the system, my review of the history of the system with the owner, and my review of the original design/permit records, it is my opinion that this system presently meets MPCA minimum compliance inspection requirements.

Inspect Minnesota and Midwest Soil Testing have been hired to perform a compliance inspection of this SSTS for compliance with local ordinances pursuant to Minn. Stat. § 115.55 (2013). This compliance inspection covers only the criteria required by Minn. Stat. § 115.55 Subd. 5a (2013) and Minn. R. 7080.1500 (2011). A compliance inspection is an indication of the current compliance status of the system and does not guarantee the performance or longevity of this system beyond the date of inspection, as it is impossible to determine the future performance of any system. Inspect Minnesota and Midwest Soil Testing disclaim any use of this compliance inspection beyond determining SSTS compliance pursuant to Minn. Stat. § 115.55 Subd. 5a (2013) and Minn. R. 7080.1500 (2011).

Please contact me should you have any questions.

Brian Humpal Brian Humpal



St. Paul, MN 55155-4194

# **Compliance Inspection Form**

#### **Existing Subsurface Sewage Treatment Systems** (SSTS)

Doc Type: Compliance and Enforcement

| Instructions: Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.  Submit completed form to Local Unit of Government (LUG) and system owner within 15 days  | For local tracking purposes:  |
|---|---|
|   |   |
| System Status   |   |
| System status on date (mm/dd/yyyy):9/25/2017  |   |
| — · — · —   | mpliant – Notice of Noncompliance grade Requirements on page 3)       |
| Reason(s) for noncompliance (check all applicable)  |   |
| <ul> <li>☐ Impact on Public Health (Compliance Component #1) – Imminent threat the Component #3) – Imminent the Compliance Compliance Component #3) – Imminent the Component #2) – Failing to protect groundward Compliance Compliance Component #3) – Failing to protect groundward Soil Separation (Compliance Component #4) – Failing to protect groundward Component Component Protect Groundward Component C</li></ul> | reat to public health and safety<br>ter<br>otect groundwater<br>vater |
|   |   |
| Property Information Parcel ID# or Sec/Twp/Ran  | ue.   |
| • •   | ge<br>for inspection: Property Sale                                   |
| •   | phone: 651-269-5825   |
| or  |   |
|   | ntative phone:  |
|   | ory authority phone: 651-430-4052                                     |
| Brief system description: Two plastic septic tanks and chamber trench drainfield.  Comments or recommendations:   |   |
| It should be noted that there is a separate system that serves the guest house. A sepperformed for that system. A leaking tank was replaced on 9/25/2017  | arate inspection and report has been                                  |
| Certification   |   |
| I hereby certify that all the necessary information has been gathered to determine the determination of future system performance has been nor can be made due to unknow possible abuse of the system, inadequate maintenance, or future water usage.   |   |
| Inspector name: Brian Humpal Certification  | tion number: L5342  |
|   | nse number: L2896   |
| Inspector signature: Brian Humpal Pho   | one number: 651-492-7550  |
| Necessary or Locally Required Attachments   |   |
|   | local ordinance   |
| ☐ Other information (list): Report Summary, Property Information, Disclaimer, Li  |   |

| 1. | lm   | <b>pact on Public Health</b> – Cor   | npliance compone      | nt #1 of 5   |
|----|------|--|-----------------------|--|
|    | Coi  | mpliance criteria:   |                       | Verification method(s):  |
|    |      | tem discharge sewage to the<br>und surface.  | ☐ Yes ⊠ No            | <ul> <li>Searched for surface outlet</li> <li>Searched for seeping in yard/backup in home</li> </ul>   |
|    |      | tem discharge sewage to drain tile surface waters.                                   | ☐ Yes ⊠ No            | <ul> <li>☑ Excessive ponding in soil system/D-boxes</li> <li>☑ Homeowner testimony (See Comments/Explanation)</li> <li>☐ "Black soil" above soil dispersal system</li> </ul> |
|    |      | tem cause sewage backup into elling or establishment.                                | ☐ Yes ⊠ No            | System requires "emergency" pumping Performed dye test   |
|    |      | y "yes" answer above indicates<br>Imminent Threat to Public Heal                     |                       | ☐ Unable to verify (See Comments/Explanation) ☐ Other methods not listed (See Comments/Explanation)  |
|    |      | nments/Explanation:<br>ne of the above found.  |                       |  |
|    |      |  |                       |  |
|    |      |  |                       |  |
| 2. | Tai  | nk Integrity – Compliance com  | nponent #2 of 5       |  |
|    | Coi  | mpliance criteria:   |                       | Verification method(s):  |
|    |      | tem consists of a seepage pit,   | ☐ Yes  ☐ No           | □ Probed tank(s) bottom  |
|    |      | spool, drywell, or leaching pit.  page pits meeting 7080.2550 may be                 |                       | <ul><li>Examined construction records</li><li>Examined Tank Integrity Form (Attach)</li></ul>  |
|    |      | ppliant if allowed in local ordinance.   |                       | Observed liquid level below operating depth  |
|    |      | vage tank(s) leak below their  | ☐ Yes ☒ No            | Examined empty (pumped) tanks(s)   |
|    |      | igned operating depth. es, which sewage tank(s) leaks:                               |                       | ☐ Probed outside tank(s) for "black soil"  |
|    |      | y "yes" answer above indica  | ates the              | ☐ Unable to verify (See Comments/Explanation)  |
|    |      | stem is Failing to Protect Gr  |                       | Other methods not listed (See Comments/Explanation)  |
|    | Con  | mments/Explanation:  |                       |  |
|    |      | vered underwater camera into tanks -   |                       | ls OK.   |
|    | A le | eaking septic tank was replaced on 9/  | 25/2017,              |  |
|    |      |  |                       |  |
|    |      |  |                       |  |
| 3. | Otl  | her Compliance Conditions  | – Compliance co       | nponent #3 of 5  |
|    | a. I | Maintenance hole covers are damaged  | d, cracked, unsecured | , or appear to structurally unsound. $\ \square$ Yes* $\ \boxtimes$ No $\ \square$ Unknown   |
|    |      | Other issues (electrical hazards, etc.) to it<br>*System is an imminent threat to pu | •                     | rsely impact public health or safety. ☐ Yes* ☒ No ☐ Unknown <i>ty</i>  |
|    | İ    | Explain:   |                       |  |
|    |      |  |                       |  |
|    |      | System is non-protective of ground wa *System is failing to protect ground           |                       | s as determined by inspector ☐ Yes* ☐ No   |
|    | İ    | Explain:   |                       |  |
|    |      |  |                       |  |
|    |      |  |                       |  |

Property address: 991 Neal Ave N, West Lakeland, MN (Main House)

Inspector initials/Date: 09/25/2017

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwists4-31 • 1/24/12 Page 2 of 3

| Date of installation: 2002  | Unknown                | Verification method(s):  |                                   |  |  |
|---|------------------------|--|-----------------------------------|--|--|
| Shoreland/Wellhead protection/Food Beverage Lodging?  | ☐ Yes ⊠ No             | Soil observation does not expire. P observations by two independent p                      |                                   |  |  |
| Compliance criteria:  |                        | unless site conditions have been al  |                                   |  |  |
| For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:  Drainfield has at least a two-foot vertical | ☐ Yes ☐ No             | requirements differ.  ☐ Conducted soil observation(s) ( ☐ Two previous verifications (Atta | ch boring logs)<br>no drainfield) |  |  |
| separation distance from periodically saturated soil or bedrock.  |                        | ☐ Unable to verify (See Comments.☐ ☐ Other (See Comments/Explanation.☐                     |                                   |  |  |
| Non-performance systems built April 1,  | ⊠ Yes □ No             | Comments/Explanation:  |                                   |  |  |
| 1996, or later or for non-performance<br>systems located in Shoreland or Wellhead<br>Protection Areas or serving a food,<br>beverage, or lodging establishment:   |                        | Reviewed design and permit record  | ds.                               |  |  |
| Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*  |                        |  |                                   |  |  |
| "Experimental", "Other", or "Performance"   | ☐ Yes ☐ No             | Indicate depths of elevations  |                                   |  |  |
| systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080. 2350 or 7080.2400 (Advanced Inspector License required)  |                        | A. Bottom of distribution media  | See Attached<br>Boring Log(s)     |  |  |
| Drainfield meets the designed vertical separation distance from periodically  |                        | B. Periodically saturated soil/bedrock     C. System separation                            |                                   |  |  |
| saturated soil or bedrock.  |                        | O. Oyotem ocparation   |                                   |  |  |
| Any "no" answer above indicates t   | ho system is           | D. Required compliance separation*   |                                   |  |  |
| Failing to Protect Groundwater.   | ne system is           | *May be reduced up to 15 percent i<br>Ordinance.   | f allowed by Local                |  |  |
| Operating Permit and Nitrogen B   | M <b>D*</b> — Complian | ce component #5 of 5 🛮 🖂 <b>Not app</b>  | licablo                           |  |  |
| s the system operated under an Operating Per  | •                      | No If "yes", A below is required   | incubic .                         |  |  |
| s the system required to employ a Nitrogen BM   |                        | No If "yes", B below is required   |                                   |  |  |
| BMP=Best Management Practice(s) specifi   |                        | -  |                                   |  |  |
| -   | -                      | _  |                                   |  |  |
| f the answer to both questions is "no",   | this section do        | s not need to be completed.  |                                   |  |  |
| compliance criteria   |                        |  |                                   |  |  |
| a. Operating Permit number:   |                        |  |                                   |  |  |
| Have the Operating Permit requirements to   | peen met?              | ☐ Yes ☐ No   |                                   |  |  |
| b. Is the required nitrogen BMP in place and  | g? Yes No              |  |                                   |  |  |

Property address: 991 Neal Ave N, West Lakeland, MN (Main House)

Upgrade Requirements (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 wq-wwists4-31 • 1/24/12 Page 3 of 3

Inspector initials/Date: 09/11/2017

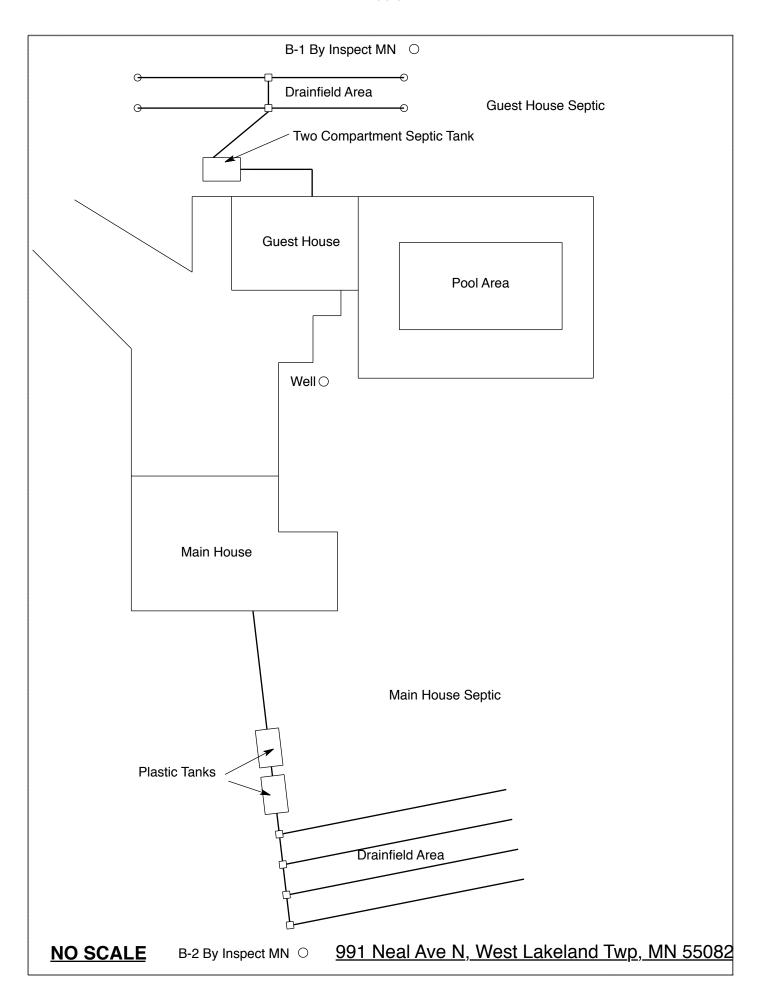
# Inspect Minnesota & Midwest Soil Testing Subsurface Sewage Treatment System Owner/Property Information

This information will be used for the purpose of conducting an MPCA Compliance Inspection.

| Date of Inspection: 9/11/17 & 9/25/17  | Time: 10:30 PM  |
|--|---|
| Property Address: 991 Neal Ave N, West Lakeland, MN (Main  |   |
| House)   | Zip: 55082  |
| Property Owner: Brian Solos  | Phone: 651-269-5825   |
| Tank(s)       Tank(s)Material       Soil Treatment System         Septic 2       Fiberglass       Rock trench         Aerobic       Plastic       Gravelless trench         Lift       Metal       Chamber trench         Holding       Concrete       Seepage bed         Other:       Block       Mound         Other       At-grade | Other  Alternative system  Experimental system  Cesspool system  Other system |
| Are the tank maintenance covers accessible? $\boxtimes$ Yes $\square$ No *If 1   |   |
| performed through the maintenance holes. Maintenance hole cover  |   |
| the ground surface to facilitate access and proper maintenance of t  | he system.  |
| Year house built: 1956 Year septic installed: 2002   | Tank size (gals.): 2-1000   |
| How long has seller owned the property? 2016 Number of res   | sidents in home? Unknown  |
| Number of bedrooms? 3 Are all floors drained by gr   | ravity? Y   |
| Garbage disposal? N Whirlpool bath?  | N   |
| More than one system (laundry, etc.)? N  |   |
| Does this property have any footing drain tiles connected to the se  | ptic system? N  |
| Are any buildings on this property such as garages or out-building   | s connected to this system? N   |
| Are there any additional systems on this property serving other busystem for the guest house.  | ildings? There is a separate  |
| Location of septic system on lot? North Side   |   |
|  | well a deep well? Y   |
| Have you ever experienced any problems with the system such as:  | *   |
| surfacing of sewage onto the ground, septic tank overflowing, etc.   |   |
| to the system? N If yes, explain:  | <i>y</i> 1  |
| J / 1  |   |
|  |   |
| When was the system last pumped? Unknown Name of pum   | per: Unknown  |
|  | on a monitoring plan? N   |
| Have you received notices from any government agency concerning  | ng this system? N   |
| Is your property located in a shoreland management area? N   |   |
| Do you have any additional information that should be given to the   | e new owner? N  |
|  |   |

I hereby certify that the above information is correct to the best of my knowledge. I also understand that if the system is considered "non-compliant/failing" per MPCA rules, that the inspector must by law submit a copy of this report to the local government unit within 15 days of the date of inspection completion. I also agree that unless otherwise noted in this report, that I/we are ultimately responsible for payment of all fees for all work performed relative to this inspection by Inspect Minnesota and Midwest Soil Testing.

Owner/Occupant: Brian Solo's Signature On File Date: 09/11/2017



## **Log Of Soil Borings**

| Loc           | cation of Project:  | 991 Neal Ave N, Wes          | t Lakeland <sup>-</sup> | Twp, MN 55082 (                       | Main House)           |  |
|---------------|---------------------|------------------------------|-------------------------|---------------------------------------|-----------------------|--|
| E             | Borings Made By:    | Inspect Minnesota            |                         | Date:                                 | 9/11/17               |  |
|               | Auger Used:         | Hand/Bucket/Post Hole Digger | Classit                 | fication System:                      | USDA                  |  |
|               | Boring Number:      | 2                            |                         | Boring Number:                        |                       |  |
| Surface       | !                   |                              | Surface                 |                                       |                       |  |
| Elevation     | of 6" below la      | st drainfield trench         | Elevation of            | of                                    |                       |  |
| Boring        |                     |                              | Boring                  |                                       |                       |  |
| Depth In      | Soils E             | ncountered                   | Depth In                | · · · · · · · · · · · · · · · · · · · |                       |  |
| Inches        |                     |                              | Inches                  | -                                     |                       |  |
| 0-10<br>10-38 |                     | 2/2 Loam<br>oam With Gravel  |                         |                                       |                       |  |
| 10 00         |                     | ock & Cobbles                |                         |                                       |                       |  |
| 38-67         | -                   | Coarse Sand With Gravel      |                         |                                       |                       |  |
|               |                     | Rock Fragments<br>sal At 67" |                         |                                       |                       |  |
|               | Keiu                | Sai At 07                    |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
|               |                     |                              |                         |                                       |                       |  |
| 67"           | Depth To End Of B   | oring Or Redox               |                         | Depth To End Of B                     | oring Or Redox        |  |
| +6"           | Elevation Of Boring | g Relative To System         | E                       | Elevation Of Boring                   | Relative To System    |  |
| -29"          | Depth To Bottom (   | Of Distribution Media        |                         | Depth To Bottom C                     | of Distribution Media |  |
| ≥44"          | Of Separation       |                              |                         | Of Separation                         |                       |  |
|               | E 100 D 1 11        | 6711                         |                         | E 10(B : 1:                           |                       |  |
|               | End Of Boring At:   | 67"                          |                         | End Of Boring At:                     |                       |  |
| Cha           | Redox Present At:   | None                         |                         | Redox Present At:                     |                       |  |
| Standing      | Water Present At:   | None                         | Standing                | Water Present At:                     |                       |  |

| Bottom Of Distribution Medium At: 29 Inches |
|---|
|   |

#### **DISCLAIMER**

# Brian L. Humpal, Inc. dba. Inspect Minnesota, Midwest Soil Testing Relative to Subsurface Sewage Treatment System (SSTS) Compliance Inspections

- 1. This inspection/report is being performed for only the seller/owner of the property on which the SSTS is located. In such case that another party is paying for the inspection, the contract is between only said party and Brian L. Humpal, Inc.; there is no contract between Brian L. Humpal, Inc. and any other party unless otherwise noted.
- 3. Brian L. Humpal, Inc. has not been retained to warranty, guarantee, or certify the proper functioning of the SSTS for any period of time beyond the date of inspection or into the future. Because of the numerous factors (usage, maintenance, soil characteristics, previous failures, etc.) which may affect the proper operation of an SSTS, as well as the inability of Brian L. Humpal, Inc. to supervise or monitor the use or maintenance of the SSTS, the report shall not be construed as a warranty by Brian L. Humpal, Inc. that the SSTS will function properly for any particular party for any period of time.
- 4. Brian L. Humpal, Inc. is unable to verify the frequency and/or, quality of prior or future maintenance of the SSTS. Maintenance of the tank(s) must be performed through the tanks maintenance hole. The removal of solids from any location other than the maintenance hole is not a compliant method of maintenance. It is strongly recommended that maintenance covers be made accessible to the ground surface to facilitate proper maintenance.
- 5. Minimum Compliance Inspection requirements relative to this inspection and this report include <u>only</u> verification that the SSTS has tank(s) (septic tanks, lift tanks, dosing tanks, stilling tanks, etc.) which are watertight below the designed operating depth, the required separation between the bottom of the subsurface soil distribution medium and seasonally saturated soils, no back-ups of sewage into the dwelling, no discharge of sewage/effluent to the ground surface or surface waters, and no imminent safety hazards. Brian L. Humpal, Inc. does not inspect plumbing or pumps prior to the first SSTS component as these are plumbing components. The performance of exterior pumps and associated components are not inspected as they are considered to be maintenance items. Additionally, no indications relative to compliance with electrical code requirements have been made. It is recommended that any other applicable plumbing, electrical, housing, etc. inspections be performed by a qualified inspection business. Sewage back-up verification is limited to observing the floor drain area and/or the information supplied by the last occupants of the building prior to inspection. Brian L. Humpal, Inc. cannot guarantee that the information given to them by the last occupants of the building prior to inspection relative to back-ups is accurate.
- 4. Certification of this SSTS does not warranty future use beyond the date of the inspection. Any SSTS, old or new, can become hydraulically overloaded or discharge sewage/effluent to the ground surface as a result of more people moving into the house than were previously occupying the house, improper maintenance, heavy usage, leaking plumbing fixtures, groundwater infiltration, tree roots, freezing conditions, surface drainage problems, poor initial design, poor construction practices, or unsuitable materials used in constructing the system; the system can also simply stop working because of its age. An SSTS that has been properly designed and installed, properly maintained, and used in the manner for which the system was designed can be expected to provide service for twenty to twenty-five years on average. Some parts of the SSTS such as alarms, switches, pumps, filters, etc. will most likely have to be repaired or replaced over the lifetime of the system.
- 5. A Compliance Inspection is not meant to be a test or inspection for longevity of the system; a Compliance Inspection is strictly for the purpose of determining if the SSTS is protective of public health and safety, as well as the groundwater at the date and time the inspection was performed. This inspection is not intended to determine if the SSTS was originally designed or installed to past or present MPCA or other Local Government Unit code requirements. This inspection is not intended to determine if the SSTS was designed and/or installed to support the anticipated flow from the building as the use of the building may have changed since the design and construction of the SSTS due to the addition of bedrooms, occupants, etc. In addition, this inspection is not intended to determine the quality of the original SSTS design, the quality of the construction practices used while installing the SSTS, or the quality of the materials used in constructing the SSTS.
- 6. Brian L. Humpal, Inc. cannot guarantee the performance of SSTS products/components such as: gravelless pipe, chamber trenches, effluent filters, tanks, sewage pre-treatment components, piping, etc. Products such as gravelless pipe are no longer approved for installation in the State of Minnesota and may have a significantly reduced performance and/or life expectancy.
- 7. WINTER WORK: By accepting this report, it is understood that inspections conducted during winter months (approximately November 1<sup>st</sup> through April 1<sup>st</sup>) are more difficult to perform because of possible snow cover and/or ground frost. SSTS components such as tanks, maintenance covers, tank inspection pipes, subsurface distribution medium inspection pipes, and soil treatment areas are more difficult or impossible to locate due to snow cover and/or ground frost. In addition, soil borings are more difficult to perform due to snow cover and/or ground frost. Brian L. Humpal, Inc. will attempt to use the same level of standards when performing work during winter periods as when performing work during non-winter periods. However, the recipient of this report understands that because of the aforementioned considerations, the same level of standards may not be possible.
- 8. By accepting this report, the client understands that Brian L. Humpal, Inc. will not be responsible for any monetary damages exceeding the fee for the services provided.

# Subsurface Sewage Treatment Systems

Non-transferable

# Business License

# Inspect Minnesota, Midwest Soil Testing

License # L2896

License Expires: 12/22/2017

Issued: 11/29/2016

# Specialty Area(s):

Installer Maintainer Service Provider **Advanced Designer Advanced Inspector** 

# Designated Certified Individual(s):

Cert #

Name

**Certification Expires:** 

C5342

**Brian L Humpal** 

10/15/2017

Installer, Maintainer, Serv Prov, Adv Designer, Adv Inspector

C9852

Christopher R Uebe

3/4/2018

Designer, Inspector



St. Paul. Minnesota 55155-4194

Prevention and Solid Waste Management Section

P.O. Box 383 Hugo, MN 55038

Brian Humpal

651-492-7550/Brian@midwestsoiltesting.com

MPCA Licensed Advanced Inspector

#### SUBSURFACE SEWAGE TREATMENT SYSTEM (SSTS) COMPLIANCE REPORT

**Date:** 9/11/17 & 9/25/17 **Time:** 11:00 AM Owner: Brian Solos **Inspection Address:** 991 Neal Ave N, West Lakeland Twp, MN 55082 (Guest House)

#### REPORT SUMMARY

I have performed an "MPCA Compliance Inspection" on this system, have reviewed the history of the system with the owner, Brian Solos, and have reviewed the original design/permit records on file at Washington County. This system consists of a pre-cast two-compartment septic tank and a rock trench drainfield.

Although not a compliance criteria, it should be noted that some of the system may be located on the adjacent property.

It should be noted that there is a separate system that serves the main house. A separate inspection and report has been performed for that system.

Predicated on my inspection of the system, my review of the history of the system with the owner, and my review of the original design/permit records, it is my opinion that this system presently meets MPCA minimum compliance inspection requirements.

Inspect Minnesota and Midwest Soil Testing have been hired to perform a compliance inspection of this SSTS for compliance with local ordinances pursuant to Minn. Stat. § 115.55 (2013). This compliance inspection covers only the criteria required by Minn. Stat. § 115.55 Subd. 5a (2013) and Minn. R. 7080.1500 (2011). A compliance inspection is an indication of the current compliance status of the system and does not guarantee the performance or longevity of this system beyond the date of inspection, as it is impossible to determine the future performance of any system. Inspect Minnesota and Midwest Soil Testing disclaim any use of this compliance inspection beyond determining SSTS compliance pursuant to Minn. Stat. § 115.55 Subd. 5a (2013) and Minn. R. 7080.1500 (2011).

Please contact me should you have any questions.



# **Compliance Inspection Form**

# Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

| <b>Instructions:</b> Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.   | For local tracking purposes:  |
|--|---|
| Submit completed form to Local Unit of Government (LUG) and system owner within 15 days  |   |
| System Status  |   |
| System status on date (mm/dd/yyyy): 9/25/2017  |   |
| •  | mpliant – Notice of Noncompliance grade Requirements on page 3)       |
| Reason(s) for noncompliance (check all applicable)  Impact on Public Health (Compliance Component #1) – Imminent threat to Other Compliance Conditions (Compliance Component #3) – Imminent the Tank Integrity (Compliance Component #2) – Failing to protect groundware Other Compliance Conditions (Compliance Component #3) – Failing to protect groundware Soil Separation (Compliance Component #4) – Failing to protect groundware Operating permit/monitoring plan requirements (Compliance Component | reat to public health and safety<br>ter<br>otect groundwater<br>vater |
|  |   |
| Property Information Parcel ID# or Sec/Twp/Ran   | ge:   |
|  | or inspection: Property Sale  |
| · · ·  | phone: 651-269-5825   |
| or   |   |
| Owner's representative: Represe  | ntative phone:  |
| Local regulatory authority: Washington County Regulator  | ry authority phone: 651-430-4052                                      |
| Brief system description: A pre-cast two-compartment septic tank and a rock trench   | drainfield.   |
| Comments or recommendations:   |   |
| It should be noted that some of the system may be located on the adjacent property. It system that serves the main house. A separate inspection and report has been performance.   |   |
| Certification  |   |
| I hereby certify that all the necessary information has been gathered to determine the determination of future system performance has been nor can be made due to unknow possible abuse of the system, inadequate maintenance, or future water usage.  |   |
| Inspector name: Brian Humpal Certifica   | ion number: <u>L5342</u>  |
| Business name: Inspect Minnesota, Midwest Soil Testing Lice  | nse number: L2896   |
| Inspector signature: Brian Humpal Ph   | one number: 651-492-7550  |
| Necessary or Locally Required Attachments  |   |
|  | local ordinance   |
| ☑ Other information (list): Report Summary, Property Information, Disclaimer, Li   |   |
|  |   |

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwists4-31 • 1/24/12 Page 1 of 3

Property address: 991 Neal Ave N, West Lakeland, MN (Guest House)

Inspector initials/Date: 09/25/2017

| 1. | lm                                  | <b>npact on Public Health</b> – Cor  | npliance   | component #1                                  | of 5  |  |  |
|----|-------------------------------------|--|------------|---|---|--|--|
|    | Co                                  | ompliance criteria:  |            |   | Verification method(s):   |  |  |
|    |                                     | stem discharge sewage to the bund surface.   | ☐ Yes      | ⊠ No  | <ul><li>☑ Searched for surface outlet</li><li>☑ Searched for seeping in yard/backup in home</li></ul>                                 |  |  |
|    |                                     | stem discharge sewage to drain tile surface waters.                                  | ☐ Yes      | ⊠ No  | <ul> <li>☑ Excessive ponding in soil system/D-boxes</li> <li>☑ Homeowner testimony (See Comments/Explanation)</li> </ul>              |  |  |
|    |                                     | stem cause sewage backup into<br>relling or establishment.                           | ☐ Yes      | ⊠ No  | <ul> <li>"Black soil" above soil dispersal system</li> <li>System requires "emergency" pumping</li> <li>Performed dye test</li> </ul> |  |  |
|    |                                     | ny "yes" answer above indicates<br>Imminent Threat to Public Heal                    | •          |   | ☐ Unable to verify (See Comments/Explanation) ☐ Other methods not listed (See Comments/Explanation)                                   |  |  |
|    |                                     | omments/Explanation:<br>one of the above found.                                      |            |   |   |  |  |
| 2. | Ta                                  | ank Integrity – Compliance com   | ponent #   | #2 of 5                                       |   |  |  |
|    | Co                                  | ompliance criteria:  |            |   | Verification method(s):   |  |  |
|    |                                     | stem consists of a seepage pit, sspool, drywell, or leaching pit.                    | ☐ Yes      | ⊠ No  | <ul><li>☑ Probed tank(s) bottom</li><li>☑ Examined construction records</li></ul>   |  |  |
|    |                                     | epage pits meeting 7080.2550 may be mpliant if allowed in local ordinance.           |            |   | <ul><li>Examined Tank Integrity Form (Attach)</li><li>Observed liquid level below operating depth</li></ul>                           |  |  |
|    |                                     | wage tank(s) leak below their signed operating depth.                                | ☐ Yes      | ⊠ No  | ☐ Examined empty (pumped) tanks(s) ☐ Probed outside tank(s) for "black soil"  |  |  |
|    | If yes, which sewage tank(s) leaks: |  |            | ☐ Unable to verify (See Comments/Explanation) |   |  |  |
|    |                                     | ny "yes" answer above indica<br>vstem is Failing to Protect Gro                      |            |   | ☑ Other methods not listed (See Comments/Explanation)   |  |  |
| 3. | Lo                                  | omments/Explanation: wered underwater camera into tanks - ther Compliance Conditions |            |   |   |  |  |
|    | a.                                  | Maintenance hole covers are damaged  | d, cracked | , unsecured, or a                             | ppear to structurally unsound. ☐ Yes* ☒ No ☐ Unknown  |  |  |
|    | b.                                  | Other issues (electrical hazards, etc.) to in *System is an imminent threat to pu    |            |   | impact public health or safety. ☐ Yes* ☒ No ☐ Unknown   |  |  |
|    |                                     | Explain:   |            |   |   |  |  |
|    | C.                                  | System is non-protective of ground wa *System is failing to protect ground Explain:  |            | er conditions as d                            | determined by inspector ☐ Yes* ☒ No   |  |  |

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwists4-31 • 1/24/12 Page 2 of 3

Property address: 991 Neal Ave N, West Lakeland, MN (Guest House)

Inspector initials/Date: 9/11/2017

| Date of installation: 2008  | Unknown           | Verification method(s):  |                               |  |  |  |
|---|-------------------|--|-------------------------------|--|--|--|
| Shoreland/Wellhead protection/Food Beverage Lodging?  | ☐ Yes ⊠ No        | Soil observation does not expire.  |                               |  |  |  |
| Compliance criteria:  |                   | observations by two independent<br>unless site conditions have been  |                               |  |  |  |
| For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:    | ☐ Yes ☐ No        | requirements differ.  Conducted soil observation(s  Two previous verifications (A  Not applicable (Holding tank(s)   | ttach boring logs)            |  |  |  |
| Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.  |                   | <ul> <li>☐ Not applicable (Holding tank(s), no drainfield)</li> <li>☐ Unable to verify (See Comments/Explanation)</li> <li>☐ Other (See Comments/Explanation)</li> </ul> |                               |  |  |  |
| Non-performance systems built April 1,  | ⊠ Yes □ No        | Comments/Explanation:  |                               |  |  |  |
| 1996, or later or for non-performance<br>systems located in Shoreland or Wellhead<br>Protection Areas or serving a food,<br>beverage, or lodging establishment: |                   | Reviewed design and permit reco  | ords.                         |  |  |  |
| Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*  |                   |  |                               |  |  |  |
| "Experimental", "Other", or "Performance"   | ☐ Yes ☐ No        | Indicate depths of elevation   | ıs                            |  |  |  |
| systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080. 2350 or 7080.2400 (Advanced Inspector License required)                  |                   | A. Bottom of distribution media  | See Attached<br>Boring Log(s) |  |  |  |
| Drainfield meets the designed vertical  |                   | B. Periodically saturated soil/bedroc  | k                             |  |  |  |
| separation distance from periodically saturated soil or bedrock.  |                   | C. System separation   |                               |  |  |  |
| Any "no" answer above indicates t   | he system is      | D. Required compliance separation*   | ·                             |  |  |  |
| Failing to Protect Groundwater.   | ne dydieni id     | *May be reduced up to 15 percer<br>Ordinance.  | it if allowed by Local        |  |  |  |
|   |                   |  |                               |  |  |  |
| Operating Permit and Nitrogen B   |                   |  |                               |  |  |  |
| Is the system operated under an Operating Per   | <del></del>       | No If "yes", A below is require  |                               |  |  |  |
| Is the system required to employ a Nitrogen BM  |                   | ⊠ No If "yes", B below is require  | ed                            |  |  |  |
| BMP=Best Management Practice(s) specif  | -                 |  |                               |  |  |  |
| If the answer to both questions is "no",  | this section does | not need to be completed.  |                               |  |  |  |
| Compliance criteria   |                   |  |                               |  |  |  |
|   |                   | ☐ Yes ☐ No   |                               |  |  |  |
| Have the Operating Permit requirements  | been met?         |  |                               |  |  |  |
| b. Is the required nitrogen BMP in place and  |                   |  |                               |  |  |  |

Upgrade Requirements (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwists4-31 • 1/24/12 Page 3 of 3

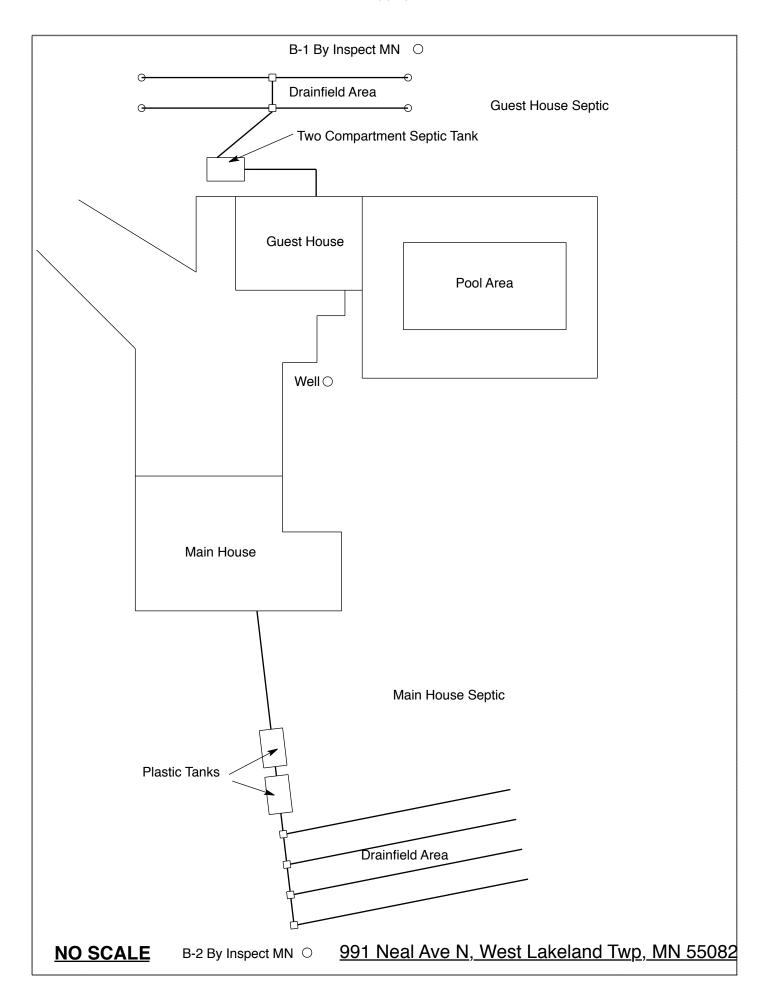
# Inspect Minnesota & Midwest Soil Testing Subsurface Sewage Treatment System Owner/Property Information

This information will be used for the purpose of conducting an MPCA Compliance Inspection.

| Date of Inspection: 9/11/2017 & 9/25/2017                            | Time: 11:00 AM                         |
|--|--|
| Property Address: 991 Neal Ave N, West Lake Twp, M                   |  |
| (Guest House)  | Zip: 55082                             |
| Property Owner: Brian Solos  | Phone: 651-269-5825                    |
| Tank(s) Tank(s)Material Soil Treatment                               |  |
| Septic 2 Comp Fiberglass Rock trench                                 |  |
| Aerobic Plastic Gravelless t   | <u> </u>                               |
| ☐ Lift ☐ Metal ☐ Chamber tree ☐ Holding ☐ Concrete ☐ Seepage becomes | <u> </u>                               |
| Other: Block Mound   |  |
| Other At-grade   |  |
| Are the tank maintenance covers accessible? ⊠ Yes □                  | No *If no, proper maintenance must be  |
| performed through the maintenance holes. Maintenance                 |  |
| the ground surface to facilitate access and proper mainten           |  |
| Year house built: 2008 Year septic installed: 2008                   | Tank size (gals.): 2 Comp - 1500       |
| How long has seller owned the property? 2016 Num                     | ber of residents in home? Unknown      |
| Number of bedrooms? 2 Are all floors drain                           | ned by gravity? Y                      |
| <u> </u>   | ool bath? N                            |
| More than one system (laundry, etc.)? N                              |  |
| Does this property have any footing drain tiles connected            | to the septic system? N                |
| Are any buildings on this property such as garages or out-           | -buildings connected to this system? N |
|  |  |
| Are there any additional systems on this property serving            | other buildings? There is a separate   |
| system for the house.  | omer oundings. There is a separate     |
| Location of septic system on lot? North Side                         |  |
| Location of water well on lot? South Side                            | Is the well a deep well? Y             |
| Have you ever experienced any problems with the system               | 1                                      |
| surfacing of sewage onto the ground, septic tank overflow            |  |
| to the system? N If yes, explain:                                    |  |
|  |  |
|  |  |
| 7 1 1  | e of pumper: Unknown                   |
|  | Is system on a monitoring plan? N      |
| Have you received notices from any government agency                 |  |
| Is your property located in a shoreland management area              |  |
| Do you have any additional information that should be gi             | ven to the new owner? N                |
|  |  |

I hereby certify that the above information is correct to the best of my knowledge. I also understand that if the system is considered "non-compliant/failing" per MPCA rules, that the inspector must by law submit a copy of this report to the local government unit within 15 days of the date of inspection completion. I also agree that unless otherwise noted in this report, that I/we are ultimately responsible for payment of all fees for all work performed relative to this inspection by Inspect Minnesota and Midwest Soil Testing.

Owner/Occupant: Brian Solo's Signature On File Date: 09/11/2017



| VALUATION  VALUATOR:              |  | CHECK ALL THAT APPLY:  COUNTY USE ONLY  NEW  CLASS V.  EXISTING  DWELLING  DWELLING  D FBL ESTABLISHMENT  SHORELAND  IN WELLHEAD PROTE |                   |                                       | STABLISHMENT<br>MENT   |   |                                       |
|-----------------------------------|--|--|-------------------|---------------------------------------|--|---|---------------------------------------|
| ROPERTY ADDRESS:  ATE:  22 OCT 20 | 191 NEAL AVE   | ; 55   |                   | SEOCODE:                              | ANU LI   | IN WELLHEAD I                             | ROTECTION AREA                        |
|                                   | 008 12   |  | REVIEW            | •                                     |  |   |                                       |
| OIL CLASSIFICATION:               |  |  | PARENT MATE       | RIAL                                  | ,  |   |                                       |
|                                   | SOIL BORING 1  | IN TESTEL  |                   |                                       | SOIL BORI  | NG 2                                      |                                       |
| LEVATION OF BORING:               | LOCATION:  | AREA   | ELEVATION O       | F BORING:                             | The state of the s | LOCATION:                                 |                                       |
| SPS COORDINATES; LAT:             | LON:   |  | GPS COORDIN       |                                       | · · · · · · ·  | LON:                                      |                                       |
| DE BORING                         | □ PIT  | ☐ PROBE  REDOXIMORPHIC   | SOIL HORIZON      | BORING                                |  | PIT                                       | ☐ PROBE  REDOXIMORPHIC                |
| DEPTH (IN) TEXTURE                | COLOR STRUCTURE  | FEATURES   | DEPTH (IN)        | TEXTURE                               | COLOR  | STRUCTURE                                 | FEATURES .                            |
| 0"-9" 514                         | 10 1R ABK  | N0   |                   |                                       |  |   | ·                                     |
| 9-20 314                          | 10 1R ABK  | 20   |                   |                                       |  |   |                                       |
| 20-48" SILT                       | 1918 ABK   | NO   |                   |                                       |  |   | \ .                                   |
| 156                               | <i>U</i> 1   | No   |                   |                                       |  |   |                                       |
| f8"-10" 3AND                      |  |  |                   |                                       |  |   | ·                                     |
| LO" 035XX                         | everione   |  |                   |                                       |  |   | •                                     |
| <u> </u>                          |  |  |                   |                                       |  |   |                                       |
|                                   | s was made to be a superior of the superior of | SOIL REVIEV  | V CONCLUSI        | ONS                                   |  |   |                                       |
| ØLSITE SUITABLE                   |  | DEPTH INFO   | RMATION:          |                                       | SOIL   | TEXTURE:                                  | 1. 47 SILT-                           |
| ☐ UNSUITABLE SOIL                 | STANDING WATER:  | ا<br>ت کر<br>SAT   | URATED SOIL:      | ہر                                    | SOIL   | SIZING FACTO                              |                                       |
| ☐ DISTURBED SOIL☐ COMPACTED SOIL☐ | BEDROCK:   | 144  | WAYLUM DERTH OF S |                                       | ,  |   |                                       |
|                                   |  | NO MA  |                   | 3                                     | 6"   |   |                                       |
|                                   |  |  | REVIEW            |                                       | eran en  | er en en en en en en en en en en en en en |                                       |
| CHECK ALI                         | L THAT APPLY   | EAS  | EMENTS ON LOT     | BLUFF                                 | LINE   | SETBACKS                                  | · · · · · · · · · · · · · · · · · · · |
| ☐ WETLAND OR WETLA                |  |  | UTILITY           |                                       |  | ·   |                                       |
| ☐ POND, LAKE, STREAM ☐ FLOODPLAIN | i, RIVER   |  | ☐ DRAINAGE        | RIVER                                 |  |   |                                       |
| ☐ 10 YEAR FLOOD ELEV              | ATION  |  |                   |                                       | POND, LAKE, STREAM, WETLAND  |   |                                       |
| ☐ BLUFFLINE ☐ WELL WELL CAS       | ING DEPTH:   |  | □ OTHER           | WELL                                  |  | · · · · · · · · · · · · · · · · · · ·     |                                       |
| COMMENTS/NOTES:                   |  |  |                   | · · · · · · · · · · · · · · · · · · · |  |   |                                       |
|                                   |  |  |                   |                                       |  | ····                                      |                                       |
| with the second                   |  | ,  |                   |                                       | ×  | · · · · · · · · · · · · · · · · · · ·     | <del></del>                           |
|                                   |  |  |                   |                                       |  |   |                                       |

Borehole diameter 4''32''

BORING LOG

JOB LEW LINDERMAN

491 NEAL AVE

166

2008

1

DATE

#### **DISCLAIMER**

# Brian L. Humpal, Inc. dba. Inspect Minnesota, Midwest Soil Testing Relative to Subsurface Sewage Treatment System (SSTS) Compliance Inspections

- 1. This inspection/report is being performed for only the seller/owner of the property on which the SSTS is located. In such case that another party is paying for the inspection, the contract is between only said party and Brian L. Humpal, Inc.; there is no contract between Brian L. Humpal, Inc. and any other party unless otherwise noted.
- 3. Brian L. Humpal, Inc. has not been retained to warranty, guarantee, or certify the proper functioning of the SSTS for any period of time beyond the date of inspection or into the future. Because of the numerous factors (usage, maintenance, soil characteristics, previous failures, etc.) which may affect the proper operation of an SSTS, as well as the inability of Brian L. Humpal, Inc. to supervise or monitor the use or maintenance of the SSTS, the report shall not be construed as a warranty by Brian L. Humpal, Inc. that the SSTS will function properly for any particular party for any period of time.
- 4. Brian L. Humpal, Inc. is unable to verify the frequency and/or, quality of prior or future maintenance of the SSTS. Maintenance of the tank(s) must be performed through the tanks maintenance hole. The removal of solids from any location other than the maintenance hole is not a compliant method of maintenance. It is strongly recommended that maintenance covers be made accessible to the ground surface to facilitate proper maintenance.
- 5. Minimum Compliance Inspection requirements relative to this inspection and this report include <u>only</u> verification that the SSTS has tank(s) (septic tanks, lift tanks, dosing tanks, stilling tanks, etc.) which are watertight below the designed operating depth, the required separation between the bottom of the subsurface soil distribution medium and seasonally saturated soils, no back-ups of sewage into the dwelling, no discharge of sewage/effluent to the ground surface or surface waters, and no imminent safety hazards. Brian L. Humpal, Inc. does not inspect plumbing or pumps prior to the first SSTS component as these are plumbing components. The performance of exterior pumps and associated components are not inspected as they are considered to be maintenance items. Additionally, no indications relative to compliance with electrical code requirements have been made. It is recommended that any other applicable plumbing, electrical, housing, etc. inspections be performed by a qualified inspection business. Sewage back-up verification is limited to observing the floor drain area and/or the information supplied by the last occupants of the building prior to inspection. Brian L. Humpal, Inc. cannot guarantee that the information given to them by the last occupants of the building prior to inspection relative to back-ups is accurate.
- 4. Certification of this SSTS does not warranty future use beyond the date of the inspection. Any SSTS, old or new, can become hydraulically overloaded or discharge sewage/effluent to the ground surface as a result of more people moving into the house than were previously occupying the house, improper maintenance, heavy usage, leaking plumbing fixtures, groundwater infiltration, tree roots, freezing conditions, surface drainage problems, poor initial design, poor construction practices, or unsuitable materials used in constructing the system; the system can also simply stop working because of its age. An SSTS that has been properly designed and installed, properly maintained, and used in the manner for which the system was designed can be expected to provide service for twenty to twenty-five years on average. Some parts of the SSTS such as alarms, switches, pumps, filters, etc. will most likely have to be repaired or replaced over the lifetime of the system.
- 5. A Compliance Inspection is not meant to be a test or inspection for longevity of the system; a Compliance Inspection is strictly for the purpose of determining if the SSTS is protective of public health and safety, as well as the groundwater at the date and time the inspection was performed. This inspection is not intended to determine if the SSTS was originally designed or installed to past or present MPCA or other Local Government Unit code requirements. This inspection is not intended to determine if the SSTS was designed and/or installed to support the anticipated flow from the building as the use of the building may have changed since the design and construction of the SSTS due to the addition of bedrooms, occupants, etc. In addition, this inspection is not intended to determine the quality of the original SSTS design, the quality of the construction practices used while installing the SSTS, or the quality of the materials used in constructing the SSTS.
- 6. Brian L. Humpal, Inc. cannot guarantee the performance of SSTS products/components such as: gravelless pipe, chamber trenches, effluent filters, tanks, sewage pre-treatment components, piping, etc. Products such as gravelless pipe are no longer approved for installation in the State of Minnesota and may have a significantly reduced performance and/or life expectancy.
- 7. WINTER WORK: By accepting this report, it is understood that inspections conducted during winter months (approximately November 1<sup>st</sup> through April 1<sup>st</sup>) are more difficult to perform because of possible snow cover and/or ground frost. SSTS components such as tanks, maintenance covers, tank inspection pipes, subsurface distribution medium inspection pipes, and soil treatment areas are more difficult or impossible to locate due to snow cover and/or ground frost. In addition, soil borings are more difficult to perform due to snow cover and/or ground frost. Brian L. Humpal, Inc. will attempt to use the same level of standards when performing work during winter periods as when performing work during non-winter periods. However, the recipient of this report understands that because of the aforementioned considerations, the same level of standards may not be possible.
- 8. By accepting this report, the client understands that Brian L. Humpal, Inc. will not be responsible for any monetary damages exceeding the fee for the services provided.

# Subsurface Sewage Treatment Systems

Non-transferable

# Business License

# Inspect Minnesota, Midwest Soil Testing

License # L2896

License Expires: 12/22/2017

Issued: 11/29/2016

# Specialty Area(s):

Installer
Maintainer
Service Provider
Advanced Designer
Advanced Inspector

# Designated Certified Individual(s):

Cert #

Name

**Certification Expires:** 

C5342

**Brian L Humpal** 

10/15/2017

Installer, Maintainer, Serv Prov, Adv Designer, Adv Inspector

igner, Aut maper

C9852

Christopher R Uebe

3/4/2018

Designer, Inspector



St. Paul, Minnesota 55155-4194

Steven Giddings, Manager

Prevention and Solid Waste Management Section

# Inspect Minnesota & Midwest Soil Testing Subsurface Sewage Treatment System Owner/Property Information This information will be used for the purpose of conducting an MPCA Compliance Inspection.

|  | mation will be used for the   | e purpose of conducting   | an MPCA Compliance i                            | inspection.                               |
|--|---|---|---|---|
| Date of Inspection:  | 9/11  | /17   | Time:   | 10:30                                     |
| Property Address:  | House   | System  | Zip:  |   |
| Property Owner:  | -   |   | Phone:  |   |
| Tank(s)  MSeptic 2  Aerobic  Lift  Holding  Other:   | Tank(s)Material  ☐Fiberglass  ☑Plastic ☐Metal ☐Concrete ☐Block ☐Other | Soil Treatment S Gravelless tre Chamber tren Seepage bed Mound At-grade | nch   | her ive system ental system I system stem |
| Are the tank mainten performed through the ground surface to                               | e maintenance hole  | s. Maintenance ho   | ole covers should b                             | be made accessible to                     |
| Year house built:   C<br>How long has seller of<br>Number of bedrooms<br>Garbage disposal? | Year seption of the property?   | ic installed: 200   | Tank size () er of residents in hed by gravity? | gals.): 1-1800 / 1-100                    |
| More than one system<br>Does this property ha  |   | n tiles connected to  | the septic system                               | ·?  |
| Are any buildings on   | this property such a  | as garages or out-b   | uildings connected                              | d to this system?                         |
| Are there any additio  | nal systems on this j   | property serving o  | ther buildings?                                 | Guest System                              |
| Location of septic sys   | stem on lot?  | 7   |   |   |
| Location of water we   |   | 5   | Is the well a dee                               |   |
| Have you ever experi<br>surfacing of sewage of<br>to the system?                           | onto the ground, sep  |   |   |   |
| When was the system  | last pumped? V-V  | Name  | of pumper:                                      | 14no- n                                   |
| How often pumped in  |   |   | system on a moni                                | toring plan?                              |
| Have you received no   |   |   |   |   |
| Is your property locat   | ed in a shoreland m   | anagement area?   |   | P   |
| Do you have any add  | itional information t   | that should be give   | en to the new owne                              | er? ~                                     |
| I hereby certify that the abo<br>considered "non-compliant<br>local government unit with   | /failing" per MPCA rul  | les, that the inspector   | must by law submit a                            | copy of this report to the                |

this report, that I/we are ultimately responsible for payment of all fees for all work performed relative to this inspection by Inspect Minnesota and Midwest Soil Testing.

| Owner/Occupant: | Date: 9-11-1 |   |
|-----------------|--------------|---|
|                 |              | _ |

# Subsurface Sewage Treatment System Owner/Property Information This information will be used for the purpose of conducting an MPCA Compliance Inspection.

|  | Time: 11:00  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
| Property Address: Guest house  | Zip:   |  |  |  |  |  |  |  |  |
| Property Owner:  | Phone:   |  |  |  |  |  |  |  |  |
| Tank(s) Septic Fiberglass Aerobic Plastic Gravelless trench Lift Metal Holding Concrete Block Other: Block Other At-grade  Are the tank maintenance covers accessible?  Are the tank maintenance holes. Maintenance hole cover the ground surface to facilitate access and proper maintenance of temporary description.  | Other  Alternative system Experimental system Cesspool system Other system no, proper maintenance must be ers should be made accessible to the system. |  |  |  |  |  |  |  |  |
| Year house built: 200% Year septic installed: 200%   |  |  |  |  |  |  |  |  |  |
| How long has seller owned the property? 2616 Number of re-   |  |  |  |  |  |  |  |  |  |
| Number of bedrooms? 2 Are all floors drained by gr   |  |  |  |  |  |  |  |  |  |
| Garbage disposal?  Whirlpool bath?   | Ν  |  |  |  |  |  |  |  |  |
| More than one system (laundry, etc.)?  |  |  |  |  |  |  |  |  |  |
| Does this property have any footing drain tiles connected to the se  | ptic system? N   |  |  |  |  |  |  |  |  |
| Are any buildings on this property such as garages or out-building   | s connected to this system?  |  |  |  |  |  |  |  |  |
| Are there any additional systems on this property serving other buildings?   |  |  |  |  |  |  |  |  |  |
| Are there any additional systems on this property serving other bu   | ildings? House syste   |  |  |  |  |  |  |  |  |
| Are there any additional systems on this property serving other bu  Location of septic system on lot?  | ildings? House system  |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  | well a deep well? 105  |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  | well a deep well? 165 tree roots, sewage back-ups,   |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  Location of water well on lot?  Have you ever experienced any problems with the system such as: surfacing of sewage onto the ground, septic tank overflowing, etc.  | well a deep well? Tes  tree roots, sewage back-ups, or have any repairs been made  |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  Location of water well on lot?  Have you ever experienced any problems with the system such as: surfacing of sewage onto the ground, septic tank overflowing, etc. to the system?  If yes, explain:  When was the system last pumped?   | well a deep well? Tes  tree roots, sewage back-ups, or have any repairs been made  |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  Location of water well on lot?  Have you ever experienced any problems with the system such as: surfacing of sewage onto the ground, septic tank overflowing, etc. to the system?  If yes, explain:  When was the system last pumped?  When was the system last pumped?  When was the system last pumped?  Is system Have you received notices from any government agency concerning.                             | well a deep well? To 5  tree roots, sewage back-ups, or have any repairs been made  per: on a monitoring plan?   |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  Location of water well on lot?  Have you ever experienced any problems with the system such as: surfacing of sewage onto the ground, septic tank overflowing, etc. to the system?  If yes, explain:  When was the system last pumped?  Is system last your property located in a shoreland management area? | well a deep well? Yes tree roots, sewage back-ups, or have any repairs been made  per: on a monitoring plan?  ng this system?                          |  |  |  |  |  |  |  |  |
| Location of septic system on lot?  Location of water well on lot?  Have you ever experienced any problems with the system such as: surfacing of sewage onto the ground, septic tank overflowing, etc. to the system?  If yes, explain:  When was the system last pumped?  When was the system last pumped?  When was the system last pumped?  Is system Have you received notices from any government agency concerning.                             | well a deep well?  tree roots, sewage back-ups, or have any repairs been made  per: on a monitoring plan?  ng this system?                             |  |  |  |  |  |  |  |  |

I hereby certify that the above information is correct to the best of my knowledge. I also understand that if the system is considered "non-compliant/failing" per MPCA rules, that the inspector must by law submit a copy of this report to the

| local government unit within 15 days of the date of inspection completion. I als this report, that I/we are ultimately responsible for payment of all fees for all wor by Inspect Minnesota and Midwest Soil Testing. | o agree that unless otherwise noted in |
|---|--|
| Owner/Occupant:   | Date: 9-11-17                          |



#### WASHINGTON COUNTY, MINNESOTA

Department of Public Health and Environment 651/430-6688

URST LANGLAND TOWNSHIP 001702029 SEWAGE PROHIT

Ormer :

PERMIT NÚMBER

CARRON

**BAJA CLOVER BEIGHTS** 

HALTBU

CA

20268

Applicant : NILS

CARSON

310-457-2644

scanned 8/22/08 m

DRAINFURED REPLACEMENT PERHIT

SEPTIC APPLICATION/SOIL REVIEW

Total Fees :

Total Poid : Yotal Due :

270.00 .00

85.00

185.00

270.00

#### PERIODS AS HERRBY GRAPTED

To execute the work specified in this permit on the following described property upon express condition that said persons and their agents, employees and worksen shall conform in all respects to the provisions of the Building Code, and/or Ordinances.

This permit may be revoked at any time upon the violation of any of the provisions of said code and ordinances.

Project Address :

991 HRAL AVENUE

STILLMATER

65082

tegal Demortption:PART 881/4-881/4

Soil Conditions: Depth to Restriction

292920 & PART HWI/4 892T29R20

000 : 32-029-20-22-0001

Plow Capacity . 300

Gal/Day Tank Volume

66 Inches

Perc Rate

20 Hin/Inch

Soil Treatment Type:

Rottom Area

666 Rook Depth

Authorized Work. / Special Conditions

- Install individual sewage treatment system as per approved design in area tested and shown on site plan.

\*\* Peralt Explosion Date :

Sewage Treatment : 2003-10-03

A CERTIFICATE OF OCCUPANCY MUST BE DEQUESTED AND ISSUED PRIOR TO USE OF OCCUPANCY OF WORE PERMITTEN

\*\* This parait shall expire and be null and void if the work authorized by the Hullding Permit is not commenced within 60 days of the date of tesuance or if work is abandoned or suspended for a period of 120 days. Term of the Building Permit is 12 months from data of issue. Term of sewage treatment permit is 12 months from date of inque.

Penalty for violation of any of the provisions of building code: Fine not to exceed five bundred dollars (\$500.00) or imprisionment for not more than ninety (90) days, or both.

Permit Insue Date 2002-10-03 Code Enforcement Officer - 6447cl

#### INSPECTION RECORD

| BUILDING                      | DATE     | INSP. | COMMENTS                                 |
|-------------------------------|----------|-------|--|
| Foundation                    |          |       |  |
| Foundation Wall               |          |       |  |
| Plumbing (Groundwork)         |          | ,     |  |
| Heating (Groundwork)          |          |       |  |
| Rough Plumbing                |          |       |  |
| -Rough-Gas-Piping             |          |       |  |
| Rough Heating and Ventilation |          |       |  |
| Framing                       |          |       |  |
| Insulation                    |          |       |  |
| Fireplace                     |          |       |  |
| Chimney                       |          |       |  |
| Wallboard or Lath and Plaster |          |       |  |
| Final Electrical              |          |       |  |
| Final Plumbing                |          |       |  |
| Final Gas Piping              |          |       | :  |
| Final Heating and Ventilation |          |       |  |
| Final Building                |          |       | ·  |
| SEWAGE TREATMENT SYSTEM       | DATE     | INSP, | COMMENTS                                 |
| Installation                  | 10-16-02 | P. Cu | wank Size: 2-1000 Treatment Area: 550 fb |
| As Built                      | 104(1    |       | Installer:                               |
| DRIVEWAY                      | DATE     | INSP. | COMMENTS                                 |
| Access                        |          |       |  |
| Installation                  |          |       |  |
| NOTES:                        |          |       | Nuverco Plastic                          |
| · . · · · · · · ·             |          |       | Nuvesco Plastic<br>10.17 Chalsus         |

# EKLIN SOIL TESTING AND INSPECTIONS, INC.

1986 Ridgewood Avenue White Bear Lake, MN 55110 1-651-429-1090

| Owner's Name     | ROBERT   | Torly    |        |        | - Chillian | -   | <del>,,</del> | <u>olema al maiorit</u> o |
|------------------|----------|----------|--------|--------|------------|-----|---------------|---------------------------|
| Job Site Address | 991 NEAL | AUS.     |        |        |            |     |               |                           |
| City or Township | WEST Ly  | OKE LAND | TOUN   | 314112 |            |     |               |                           |
| Use of Building  | 170115   | _ /- Be  | DROBAN |        | 5/700      | FOR | 2 - B         | 50 00043                  |

| Design Flow Rue 200 60                         |               | 200001           |        | Land Slope                           | 2/                      | Percent      |  |  |  |
|--|---------------|------------------|--------|--------------------------------------|-------------------------|--------------|--|--|--|
| Two Required Tenk Sizes                        | Doo Gallons   | 1000             | Allons | Lift Station Ta                      | nk Slze                 | Gallon       |  |  |  |
| Type of System (standard, at g                 | rade or bod)  | STANONA          | ₽ P    |                                      |                         |              |  |  |  |
| System Size: 550                               | Square Feel   | 180              | -Ein   | cal Feet                             | 36                      | Tronch Width |  |  |  |
| Dopth of rock below pipe                       | /2"           |                  |        | Depth of Rock                        | Above Pipe 2            | ) 4          |  |  |  |
| MINimum Depth of Trench<br>From Existing Grade | 24            | [nches           |        | MAXimum De<br>From Existing          | spih of Trensh<br>Grade | 30 Inches    |  |  |  |
| Recommended Number of Tre                      | nches , 3     |                  |        | Recommended Length of Trenches 60 ET |                         |              |  |  |  |
| Trench Spacing Measured Cen                    | ler to Center |                  |        |                                      | <del></del>             | Foel         |  |  |  |
| Any Other Special Conditions                   | •             | P + FI<br>1 SAND |        | TH 5 2-                              | EXI3TING                | TANIC 5      |  |  |  |

STEEP SLOPE - COURT SHOULD BE ESTADUSHED OUER THE DISTURBED AREAS WHEN THE WORK TO CONNPLCTED + MULCH + SEED - YOU MAY WANT TO USE WOOD FIBER BLANKET

| This system has been designed by a Pollution Control Agency (PCA) Certified Profession | onat.                   |
|--|-------------------------|
| Designer Name DALE FKLIN<br>1986 RIDGEWOOD AUE.  | PCA Cortification # 695 |
| Address WHITE BEAR LAKE MINK 55/10   | Phone 1 1651- 429 1090  |
| Signature Ded QC   | Dale 8. 20. 2002        |

\$190 - New Home Drainfield

lake checks payable to WASHINGTON COUNTY

#### SITE REVIEW and/or SEPTIC PERMIT APPLICATION

Washington County Public Health & Environment

1 County Public Health & Environment 14949 62nd Street N, PO Box 3803

Stillwater, MN 55082-3803 651/430-6688 FAX 651/430-673

\$185 - Individual Lot

SEP 17 2002

RECEIVED

Paid \$ 270

Receipt #

| \$ 85 - Replace Existing System with a Drainfield Sys   | tem \$130 - Subdivision S.  | oil/Site Review - Base fee   |   |  |
|---|---|--|---|--|
| \$315 - New Home Mound<br>\$210 - Replace Existing System with a Mound System<br>\$315 - Alternative/Experimental System  | Plus \$55/lot   | view Fee (1 hour minimum)  | 0017-0  | 2029   |
| Legal Description and Parcel Identification Number  | ····  |  | NOD STIDDIVISION  | 310 901 5566   |
| NILS CARSON 991   | NEAL AVE  |  |   | IN 5508Z   |
| Applicant   | Address   | City   | State   |  |
| Applicant   | Address   | City   | Şiate   | Zip Phone  |
| Owner (if different from applicant)   | Address   | City   | State   | Zip Phone  |
| New Home Existing Home New Business   | Existing Business   | Nun  | nber Of Bedrooms:   | Gallons Per Day:   |
| Check the following fixture(s) which are or will be insta   | alled: Garbage Disposal   | Recreational Bathi   | ng Facility: (jacuzzi, hot tu   | ib, etc.)  |
| New Home   → Drainfield System   Mound System   | <u> </u>  | nental System Exist  | ing Permit Renewal  |  |
| Existing Home Replacement System 🗢 Drainfield   | System 🛭 Mound Sy   | stem 🗀 💢 Tank Replace  | ement Only  |  |
| Site Approval Only If this site has been previousl  | y approved, attach copy of a  | pproval letter Add   | litional Soil Test Data for P   | reviously Approved Site 🗖  |
| The following exhibits are required as part of this application of buildings, lot lines, percolation test holes, so Final Building Plan. The house and the drainfield areas   | il boring holes, proposed loca  | tion of system and well; one   | (1) copy of the System De   | sign; and one (1) copy of the  |
| AGREEMENT: The undersigned hereby makes Appli be done in strict accordance with ordinances and regula herewith, and which are reviewed by Washington Count shall become a part of the permit. Applicant further agriculted and that no part of the system shall be covered LOCATION; ANY DEVIATION FROM THE APPENDITY the Office of the Washington County Dept. of Pu | tions of the County of Washin<br>ty, together with any requirem<br>ees to provide access, at reaso<br>until it has been inspected and<br>OVED LOCATION WILL | gton, Minnesota. Applicant<br>tent and/or restriction made<br>mable times, to Washington<br>d accepted. APPLICATION<br>VOID THE PERMIT. It s | agrees that the Site Plan, S<br>necessary by conditions per<br>County for the purpose of p<br>N IS FOR AN INSTALLA<br>hall be the responsibility of | Sketches and Design submitted<br>culiar to a particular location,<br>performing inspections<br>ATION AT A SPECIFIC |
| I hereby certify the above to be true and correct. In<br>of Public Health and Environment permission to enti<br>location, design, and construction, which may includ  | er upon my property during  | normal business hours for  | ermit, I hereby give Wash<br>the purpose of determini   | ington County Department<br>ng the suitability of the  |
| Ml Com  |   |  | 9.17.02   |  |
| Signature of Applicant (Owner   | or Contractor)  |  | D:  | ate  |
| THE A   | REA BELOW IS FO   | OR COUNTY USE  | ONLY  |  |
| SITE EVALUATION: BY INSPECTOR   | Colored   | DATE 10 ~ 2  | -oh   |  |
| SETBACKS:   | 1. Canol  | REQUIRED (CIRCLE   | APPROPRIATE ITEM(S  | )) ACT <u>UAL</u>  |
| Well (including adjacent property)  |   | 50' 75' 100'   | 150'  |  |
| Wetland, Pond, Lake, Stream, River, or Bluffline  |   | 20' 40' 75'  | 100' 150'   | · · · · · · · · · · · · · · · · · · ·  |
| CONCLUSIONS: Site Suitable: Site Unsuita  | able: 🗖 Additional T  | ests Required:   | Verlfy  | Use:Bedrooms   |
| NOTES: Lot Size   | Year Built  | 26661  | Mailot  | King +   |
|   | 32029202  | 10000 '  |   | 1  |

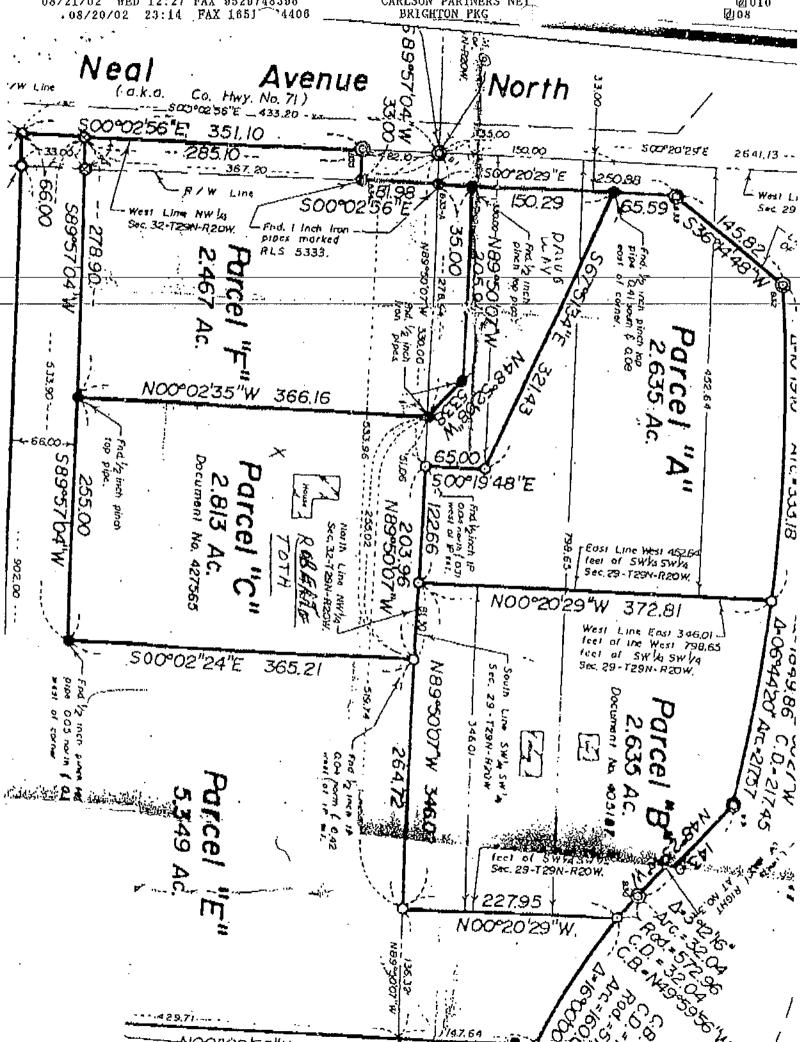
| r              | 08/21<br>, 0                 | /02 Y<br>8/20/0               | YED :         | 12:2<br>23:1 | 7 F/<br>4 F                             | X 952<br>AX 16  | 297483<br>51~~3                       | 396<br>4406     |                |                 | CARL<br>B | SON I      | PARTN<br>ON PI | ERS N<br>(G        | EŢ          |   |   |                      |   |                | Q                | Ø 00<br>}06                  | 8                 |
|----------------|------------------------------|-------------------------------|---------------|--------------|---|-----------------|---------------------------------------|-----------------|----------------|-----------------|-----------|------------|----------------|--------------------|-------------|---|---|----------------------|---|----------------|------------------|------------------------------|-------------------|
| سائيد يتمسيلان |                              | DIAMETERH"3E", 24" HAND BUGGE | ŀ             | CLASS        | BROWN LOAM                              | Ä               | 29.74 SAND                            | . 93<br>28.     |                |                 | ·         |            | ++-            |                    | -1-         | - <del>-</del> -                                  | 1+                                      | ·<br>·<br>† ·<br>† · |   | 1-1            |                  |                              | <del></del> -     |
|                |                              |                               | 2             | 37           |   |                 |                                       |                 |                |                 |           |            |                |                    |             | ,   |   |                      |   |                |                  |                              | ,                 |
|                |                              | BOREBOR E                     | HOT.F. &4     |              | 100 00 10 10 10 10 10 10 10 10 10 10 10 | YELDWISH BROWN  | - <del>-</del>                        | 1.              | <del>  -</del> | YELLEWISH BROWN |           | CONT BROWN | ٠,             | PRISTRUCTION       |             | O KAY 5'6"  | +                                       | <del></del>          | <del>                                     </del>  | <del>   </del> | <del>-</del> {-} | +-                           | -+-               |
|                | BORING LOG                   | •                             | BOEE #3       | '   '        | - Bares -                               | CORRSE SAND     | , , , , , , , , , , , , , , , , , , , | } '  <br>?<br>! |                |                 |           | ·          | . 1            | <del>-}-</del> }   | BY CAUING   | <del>                                      </del> | 6 K 9 ' 6'                              | <del> -</del>  -     | <u> </u>  | <b> -</b>      | +                | <del>-}-</del> }             | ╌╂╾┠              |
| ;<br>;         | Tuss                         | 1                             | BOLE #2       | 2007         |   | MEDIUM SAND     | Rocks                                 |                 | ·              |                 |           | . 1        | . 1            | <del>       </del> | OBSTRUCTION | . Gord  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                      | <del>-   -  </del>                                | <del>-  </del> | <del>   </del>   | · <del> </del> <del> -</del> |                   |
| 1              | KODERT TOTH<br>19: NEAL BUE. | DATE 8-19-02                  | DEPTH HOLE #1 | 1965 401     | Δ                                       | SAN ON SA BROWN | 2 - Racks                             | MEDIUM SAND     | <del>   </del> | - Rock;         | 1         | 1-         | S LIGHT BARWN  | Star               | <del></del> |   | 1                                       | ++                   | <del>                                      </del> | ╂╌┼            | +                | ·                            | + <del> </del> or |

|                 | BORTHOLE #           | BONEGOLE DEPTH      | BORDHOLE DIAMETER    |  |
|-----------------|----------------------|---------------------|----------------------|--|
| JOB ROBERT TOTH | WEST LAKELAND TOUSP. | DATE 8-19-02 SIGNED |                      |  |
| н алонан        | }                    | BONEHOLE DEPTH 30"  | BOREHOLE DIAMETER (" |  |

PERCOLATION DATA

|   | SOM DESCRIPTION  |         |        |                            |   |    |   |   |       |         |
|---|------------------|---------|--------|----------------------------|---|----|---|---|-------|---------|
|   | DEPTH            |         |        |                            |   |    |   |   |       |         |
| ſ |                  |         | 7      | ·                          |   | 7. |   | T | <br>٦ |         |
|   | SOLL DESCRIPTION | 708 807 |        | 10:30 KELLOWISH BROWN LOAM | • |    | - |   |       | 2,342   |
| ; | DEPTE            | 0 - 10  | 1<br>1 | 06.01                      |   |    |   |   |       | DEPTHAN |

|         | COMMERSIS              |      |          |      |         |      |        |       |          |  |
|---------|------------------------|------|----------|------|---------|------|--------|-------|----------|--|
| _       |                        |      |          |      |         |      |        | -<br> |          |  |
|         | DROP                   |      |          |      |         |      |        |       |          |  |
|         | READING<br>MEASUREMENT |      |          |      |         |      |        |       |          |  |
|         | TIME                   |      |          |      | '       |      |        |       |          |  |
|         | COMMENTS               | 7.   | 18.5 MP. | 7,7  | 20 1281 | μ    | 20 MPI | FILE  | 21.8 MP! |  |
|         | OROD                   |      | 18       |      | 17,5.   |      | 1.7%   |       | 13/8/    |  |
| READING | MEASONEMENT            | 24"  | 25%"     | 24"  | 25/2"   | 7.   | 25%"   | 74.   | 25%"     |  |
|         | TIME                   | 1,50 | 2:20     | 2:20 | 2:50    | 2:50 | 3:20   | 3:20  | 3:50     |  |





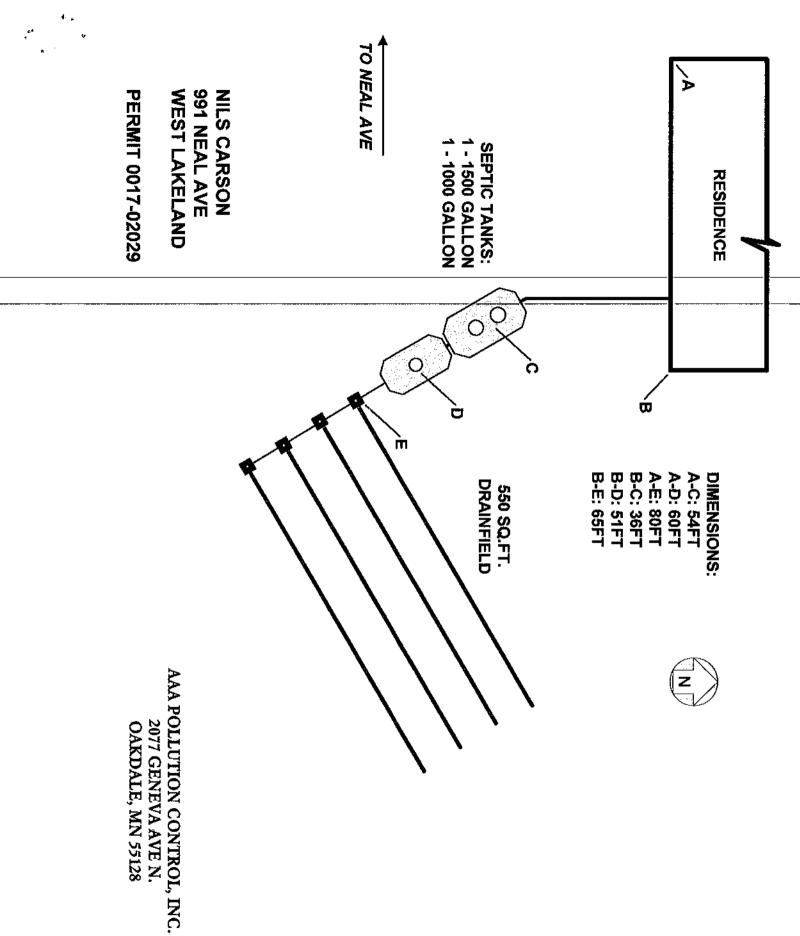
## **AS-BUILT REPORT**

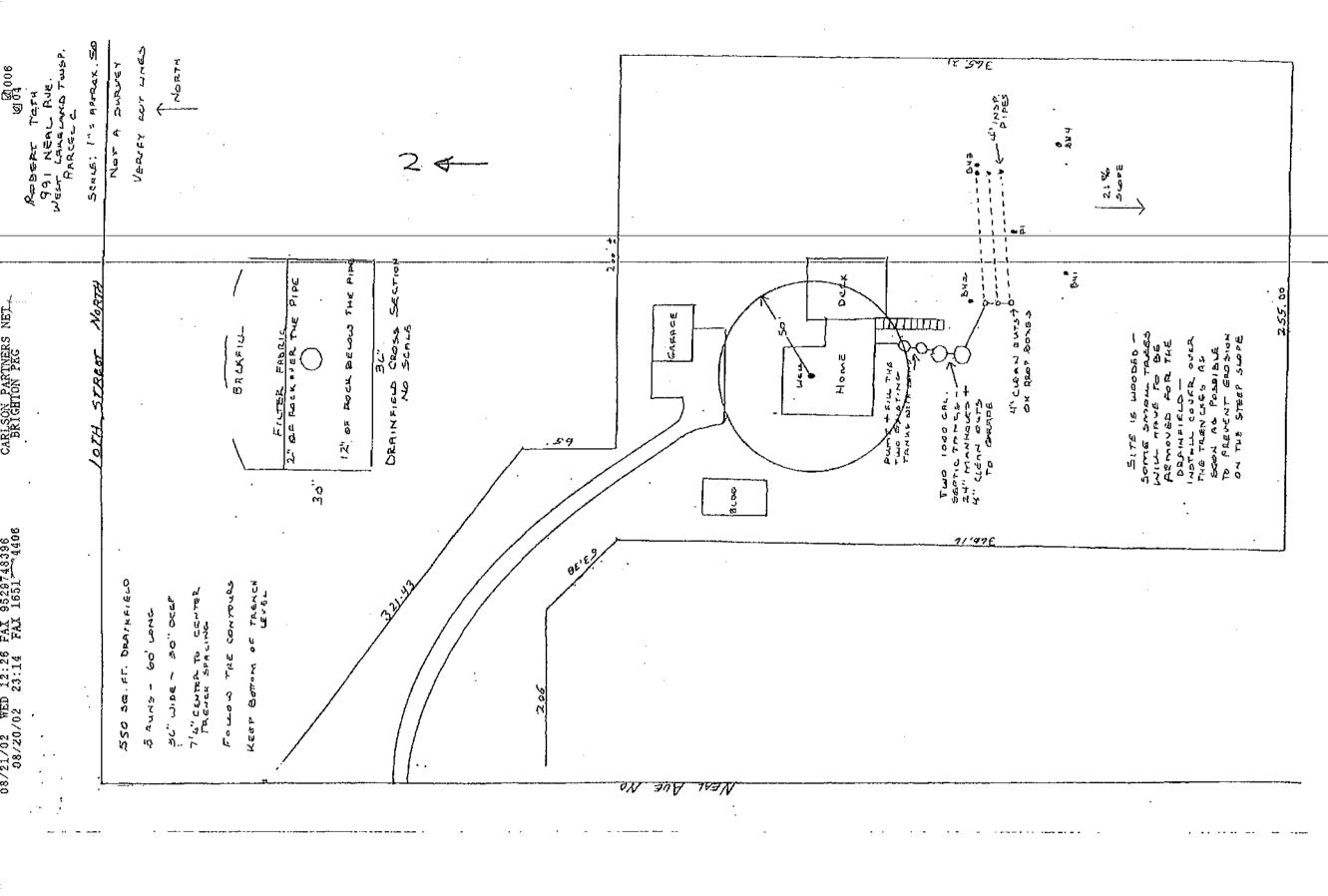
## INDIVIDUAL SEWAGE TREATMENT SYSTEM

Washington County Health, Environment & Earth Management 14900 61st. ST. N., P.O. BOX 3803, STILLWATER, MN., 55082-3803

|  | 012/430-07      | 708 or 612/430-6656 | FAX 012/430      | -0730                        |  |  |  |
|--|-----------------|---------------------|------------------|------------------------------|--|--|--|
| Legal Description or Complete                          | Street Address  |                     | City or Township |                              |  |  |  |
| 991 NEAL AVE   |                 |                     | WEST LAKELAND    |                              |  |  |  |
| Owner Name   | Mail Ado        | tress               | City             | State Zip                    |  |  |  |
| NILS CARSON SAME                                       |                 |                     |                  |                              |  |  |  |
| Installer  | Mail Ad         | dress               | City             | State Zip                    |  |  |  |
| AAA POLLUTION  | CONTROL, INC.   | 2077 GENEVA AVE N   | OAKDALE          | MN 55128                     |  |  |  |
| Septic Tank Information  Tank Manufacturer:  NORWESTCO |                 |                     | Liquid Capacity: | y:<br>1- 1500 1- 1000 GALLON |  |  |  |
|  |                 |                     |                  |                              |  |  |  |
| PUMP CHAMBER (if installed)                            |                 |                     |                  |                              |  |  |  |
| Tank Manufacturer:                                     | Liquid Capacity | /: Horsepx          | ower of Pump:    | Type of Warning Device:      |  |  |  |
| SAME   |                 |                     |                  | PER OWNER                    |  |  |  |

|  | PUMP CHAM              | BER (if installed)                        |         |  |                         |  |  |
|--|------------------------|---|---------|--|-------------------------|--|--|
| Tank Manufacturer:                       | Liquid Capacity:       | Horsepower of Pump:                       |         |  | Type of Warning Device: |  |  |
| SAME                                     |                        | PER O                                     |         |  | WNER                    |  |  |
| Pump Discharge in Gallons Per Minute:    | at Feet of Head.       | Number of Gallons Pumped Per Cycle:       |         |  |                         |  |  |
|  |                        |   |         |  |                         |  |  |
| DRAINFIEL                                | D TRENCH               | BED OR MOUND                              |         |  |                         |  |  |
| Width:                                   | Length of Each Trench: | Rock Bed Length:                          | Width:  |  | Area:                   |  |  |
| 3 FEET                                   | VARIES                 |   |         |  |                         |  |  |
| Depth of Trench Bottom From Finish Grade | ;                      | Bed Depth from Grede:                     |         |  |                         |  |  |
|  | 30 INCHES              |   |         |  |                         |  |  |
| Method of Distribution:                  | ravelless              | MOUND:                                    |         |  |                         |  |  |
| Pressure Distributi                      | on Box X Drop Box      | Upslope Sand Depth: Downslope Sand Depth: |         |  |                         |  |  |
| Depth of Rock Under Distribution Pipe;   |                        | Depth of Rock Under Pipe:                 |         |  |                         |  |  |
| n  | NFILTRATOR             |   |         |  |                         |  |  |
| Square Footage of Test Area Used:        |                        |   |         |  |                         |  |  |
|  |                        | PRESSURE DISTRIBUTION SYSTEM:             |         |  |                         |  |  |
| Trench Bottom Area Sq. FT. Required:     | Area As Built:         | Lateral Inside Diameter:                  | Length: |  | Peroration Size:        |  |  |
| :  | 550                    |   |         |  |                         |  |  |
|  |                        | Spacing:                                  | Number: |  | Perforation Spacing:    |  |  |
| PERMIT NUMBER: #                         | 0017-02029             |   |         |  |                         |  |  |





# **INVOICE**

JACK E. GILL
PROFESSIONAL BUILDING
INSPECTIONS
P.O. Box 21296
Minneapolis, MN 55421
(612) 789-3354

12/1/00

Mr. Bob Toth 991 Neal Avenue North West Lakeland, MN

| HOURS  | SERVICE PROVIDED                                       |       | AN | 10UNT |
|--------|--|-------|----|-------|
| 1 Each | Well Water Test - Bacteria and Nitrates                |       | \$ | 40.00 |
|        |  |       |    |       |
|        |  |       |    |       |
|        | Date Due 12-15-00<br>Agent: Julie Braun - Edina Realty | TOTAL | \$ | 40.00 |

Note: All invoices not paid by scheduled date of payment will receive one reminder notice. If reminder notice does not result in payment, invoice will then be submitted to "National Account Services" Collection Agency for collection.

BRIGHTON PACKAGING, INC.
TAX EXEMPT NO. 4758355
991 NEAL AVE., N. PH. 651-436-6198
STILLWATER, MN 55082

16411

FEB 26, 2001

<del>17-1</del>932

PAY TO THE ORDER OF\_

FOR.

JACK GILL

**\$** 40.00

FORTY AND NO/100-----

DOLLARS DEST

Norwest Bank Minnesota, N.A. IDS Center Office Y7 South Seventh Street Minnespolls, MN 55402 612-667-9378

#O16411# #O91000019#0996925176#



### Instrumental Research, Inc.

7800 Main St. Fridley, MN 55432 763-571-3698

November 13, 2000

Professional Building Inspections Post Office Box 21296 Minneapolis, MN 55421

#### LABORATORY RESULTS - WELL WATER SAMPLE

This is to certify that a well water sample from the <u>Bob Toth residence</u>, <u>991 Neal Avenue North</u>, <u>Lakeland</u>, <u>MN</u> was submitted to Instrumental Research laboratory and under my supervision. The sample was collected by PBI personnel.

| Parameters   | Results    | EPA & MN<br>Drinking Water<br>Limits | Reporting<br>Limit | Date of<br>Analysis |
|--|------------|--------------------------------------|--------------------|---------------------|
| (Total) Coliform colonies<br>9221 D. (P-A) Method  | Absent     | Absent                               | Absent             | 11-08-00            |
| Nitrate Nitrogen<br>4500-NO <sub>3</sub> E. Method | 0.607 mg/L | 10.00 mg/L                           | 0.030 mg/I         | 11-10-00            |

These results meet Minnesota Department of Health standards for a safe drinking water source.

All analyses were performed using <u>Standard Methods for the Examination of Water and Wastewater</u>, 19<sup>th</sup> edition approved methodologies.

SUZANNE MELCHIOR, LABORATORY SUPERVISOR

SM/ch

Minnesota Department of Health Certified Laboratory No. 027-003-130

| DATE OF INSPECTION  | N:          | TIM         | E:    |
|---------------------|-------------|-------------|-------|
| SEPTIC & WATER:     | SEPTIC ONLY | : WATER     | ONLY: |
| OWNERS NAME:        |             |             |       |
| ADDRESS OF INSPECT  |             |             |       |
|                     |             |             | _ZIP  |
| OWNERS PHONE NUM    | /IBER:      |             |       |
| DIRECTIONS:         |             |             |       |
| TYPE OF SYSTEM: _   |             |             |       |
| SYSTEM PASS:        | SYSTEM F    | AIL:        |       |
| REASON FOR FAILUR   | E:          |             |       |
| REALTOR:            |             |             |       |
| BILLING METHOD: P   | AY AT CLOS  | SING: DA    | TE:   |
| INVOICE OWNER:      | INVOI       | CE REALTOR: |       |
| DAYS TO PAY: standa | rd SPEC     | AL PAY:     |       |
| COMMENTS, COPIES    | OR NOTES:   | appiel      | MM    |
| 10 May 11           | M Cer       | 14 W        | ۱۸. ۴ |

.

•

SAU

Sieven, Ed 439-6767

# Professional Building Inspections and Enivronmental Services Minnesota Pollution Control Agency, (MPCA) Septic System Compliance Inspection

| Date of Inspection Time 3:30   |
|--|
| dal har by   |
| Property Address VI Pen WE Zip 55082   |
| Property Owner WH- TOTH Phone 651/436-6156   |
| (Check appropriate sewer system component and indicate on site sketch on back of form).    Tank(s)   Tank(s)Material   Soil Treatment System   Other   |
| Year house built Year septic installed Tank size gals.  How long has seller lived in home? Number of residents in home?  Separate system for laundry or kitchen water? Number of bedrooms?  Garbage disposal? Are all floors drained by gravity?   |
| Location of septic system on lot?  Location of water well on lot?  Have you ever experienced any problems with the system such as back-ups, surfacing onto the ground, septic tank overflowing, or have any repairs been made to the system?  It so, explain  When was the system last pumped?  Name of pumper  How often pumped in previous years?  Location of septic system on lot?  Is the well a deep well?  My  When was the system last pumped?  Name of pumper  Name of pumper |
| Have you received notices from any government agency concerning this system?   |
| Do you have any additional information that should be given to the new owner?  |
| I hereby certify that the above information is correct to the best of my knowledge. I also understand that if the system is considered "failing" per MPCA rules that the inspector must by law submit a copy of this report to the local unit of government.  Owner Date   |



## Compliance Inspection Form for Existing Individual Sewage Treatment Systems

This form reflects the requirements of the 1996 version of MN Rules Chapter 7080

#### Minnesota Pollution Control Agency

| Property Owner(s)_   |  |                            |                              |   | ephone ( )_   |  |                  |  |
|--|--|----------------------------|------------------------------|---|---|--|------------------|--|
|  |  |                            |                              | Te  | lephone (    )_   |  | <u> </u>         |  |
| Reason for inspection  | on:  |                            | <del></del>                  |   | <del></del>   |  |                  |  |
| Site Address   |  | <del></del>                |                              | City g this property Township Name Section  |   |  |                  |  |
| Zip Code   | Unit of Govern   | ment R                     | Kegulatin                    | g this property   | <del></del>   |  |                  |  |
| Fire No.   | Parcel No  |                            |                              | Section Name  | Ouerter   |  |                  |  |
| Township   | Kange  |                            |                              | Section   | _ Quarter   |  |                  |  |
| Check appropriate sewer  | system component and indicate  | location                   | n on site sk                 | etch).  |   |  |                  |  |
| Tank (s):  | Soil Treatment System:   |                            |                              | describe):  | Flow M  | <u>leter</u>                             |                  |  |
| Septic tank<br>Aerobic tank  | Rock trench<br>Gravelless pipe trench  |                            |                              | stem  |   | No                                       |                  |  |
| Pump tank  |  | — Exp                      | perimental s<br>prentied sys | systemstem  |   |  |                  |  |
| Holding tank   | Seepage bed  | — Ex                       | p. Date:                     |   | 17 503, _   |  |                  |  |
| Other  | Mound  | Otl                        | her                          |   | _ <del>_</del>  |  |                  |  |
| _  | At-grade   |                            |                              |   |   |  |                  |  |
|  | At-Brade   |                            |                              |   |   |  |                  |  |
| stem Classification  | 1  |                            |                              |   |   |  |                  |  |
|  | -  | ot Loc                     | ated in                      | Any System located in   | Shoreland o   | r We                                     | ellhea           | ad                                     |
| System Built Prior   | 1  |                            |                              | Any System located in<br>Protection Area or Serv  |   |  |                  |  |
| System Built Prior<br>Shoreland or We  | to April 1, 1996 and no<br>Ilhead Protection Area o  | r Serv                     | ing a                        | Protection Area or Serv   | ing a Food,   | Beve                                     | rage             | or                                     |
| System Built Prior<br>Shoreland or We  | to April 1, 1996 and n   | r Serv                     | ing a                        | Protection Area or Serv<br>Lodging Establishment, p   | ving a Food,<br>olus all system   | Beve                                     | rage             | or                                     |
| System Built <b>Prior</b> Shoreland <b>or</b> We Food, Bever   | to April 1, 1996 and no<br>llhead Protection Area of<br>rage or Lodging Establis   | r Serv<br>hment            | ing a                        | Protection Area or Serv<br>Lodging Establishment, p<br>April  | ving a Food,<br>blus all system<br>1, 1996  | Beve                                     | rage<br>uilt a   | or<br>after                            |
| System Built Prior Shoreland or We Food, Bever   | to April 1, 1996 and no<br>llhead Protection Area o<br>age or Lodging Establis   | r Serv<br>hment            | ing a Upgrade                | Protection Area or Serv<br>Lodging Establishment, p<br>April  | ring a Food,<br>blus all system<br>1, 1996  | Beve<br>ms B                             | rage<br>uilt a   | or<br>after                            |
| System Built Prior Shoreland or We Food, Bever  the system an immir  | to April 1, 1996 and not like and Protection Area of age or Lodging Establishent public health threat (I) the ground surface?  | r Serv<br>hment            | ing a Upgrade                | Protection Area or Serv<br>Lodging Establishment, p<br>April  Is the system an IPHT?  1. Discharge of sewage to the ground  | ving a Food, olus all system 1, 1996  ad surface?   | Beve<br>ms B                             | rage<br>uilt a   | or<br>after                            |
| System Built Prior Shoreland or We Food, Bever  s the system an immir Discharge of sewage to Discharge of sewage to  | to April 1, 1996 and not like and Protection Area of age or Lodging Establis  ment public health threat (I) the ground surface?  YES draintile   | r Serv<br>hment            | ing a Upgrade                | Protection Area or Serv<br>Lodging Establishment, p<br>April  | ving a Food,  olus all system  1, 1996  od surface?   | Beve<br>ms B<br>YES                      | erage<br>built a | or<br>after<br>Jpgra<br>10 mo          |
| System Built Prior Shoreland or We Food, Bever  s the system an immir Discharge of sewage to Or surface waters? Sewage backup into dw  | to April 1, 1996 and not like and Protection Area of age or Lodging Establis sent public health threat (II) the ground surface? YES draintile YES elling?  | r Serv<br>hment<br>PHT)? I | upgrade                      | Protection Area or Serv<br>Lodging Establishment, p<br>April  Is the system an IPHT?  1. Discharge of sewage to the groun 2. Discharge of sewage to draintile surface waters? 3. Sewage backup into dwelling?   | ving a Food, plus all system 1, 1996  ad surface? or  | Beve<br>ms B<br>YES                      | erage<br>built a | or<br>after                            |
| System Built Prior Shoreland or We Food, Bever  s the system an immir Discharge of sewage to Or surface waters? Sewage backup into dw. Situation with the poten  | to April 1, 1996 and not like and Protection Area of age or Lodging Establis  nent public health threat (II) the ground surface?  draintile  YES draintile  YES tial to immediately and  | r Serv<br>hment<br>PHT)? I | Upgrade 10 mo                | Protection Area or Serv<br>Lodging Establishment, p<br>April  Is the system an IPHT?  1. Discharge of sewage to the groun 2. Discharge of sewage to draintile surface waters? 3. Sewage backup into dwelling? 4. Situation with the potential immediate   | ving a Food,  olus all system  1, 1996  od surface?  or  ediately and   | Beve<br>ms B<br>YES                      | erage<br>built a | or<br>after<br>Jpgra<br>10 mo          |
| System Built Prior Shoreland or Wei Food, Bever  sthe system an immir Discharge of sewage to Or surface waters? Sewage backup into dw Situation with the poten adversely impact or three                               | to April 1, 1996 and not like and Protection Area of age or Lodging Establis ment public health threat (II) the ground surface?  YES draintile  YES tial to immediately and laten public health or   | r Serv<br>hment<br>PHT)? I | Upgrade 10 mo 10 mo          | Protection Area or Serv<br>Lodging Establishment, p<br>April  Is the system an IPHT?  1. Discharge of sewage to the grour 2. Discharge of sewage to draintile surface waters? 3. Sewage backup into dwelling? 4. Situation with the potential immedadversely impact or threaten pub.                          | ving a Food,  olus all system  1, 1996  od surface?  or  ediately and   | Beve<br>ms B<br>YES<br>YES<br>YES        | NO NO NO         | Or<br>after<br>Jpgra<br>10 mo<br>10 mo |
| System Built Prior Shoreland or We Food, Bever  sthe system an immir Discharge of sewage to Or surface waters? Sewage backup into dw. Situation with the poten adversely impact or thre safety?                        | to April 1, 1996 and not like and Protection Area of age or Lodging Establis ment public health threat (II) the ground surface?  YES draintile  YES tial to immediately and laten public health or   | r Serv<br>hment<br>PHT)? I | Upgrade 10 mo                | Protection Area or Serv<br>Lodging Establishment, p<br>April  Is the system an IPHT?  1. Discharge of sewage to the grour 2. Discharge of sewage to draintile surface waters? 3. Sewage backup into dwelling? 4. Situation with the potential immedadversely impact or threaten publishery?                   | ving a Food,  olus all system  1, 1996  od surface?  or  ediately and   | Beve<br>ms B<br>YES<br>YES<br>YES        | NO NO NO         | Or<br>after<br>Jpgra<br>10 mo<br>10 mo |
| System Built Prior Shoreland or We Food, Bever  s the system an immir Discharge of sewage to or surface waters? Sewage backup into dw. Situation with the poten adversely impact or thre safety? s the system failing? | to April 1, 1996 and not like and Protection Area of the age or Lodging Established the ground surface?  The groun | r Serv<br>hment<br>PHT)? I | Upgrade 10 mo 10 mo          | Protection Area or Serv<br>Lodging Establishment, p<br>April  Is the system an IPHT?  1. Discharge of sewage to the grour 2. Discharge of sewage to draintile surface waters? 3. Sewage backup into dwelling? 4. Situation with the potential immedadversely impact or threaten pub.                          | ving a Food,  plus all system  1, 1996  ad surface?  or  ediately and lic health or                               | Beve<br>ms B<br>YES<br>YES<br>YES<br>YES | NO NO NO         | or<br>after<br>Jpgra<br>10 mo          |
| System Built Prior Shoreland or We Food, Bever  s the system an immir Discharge of sewage to or surface waters? Sewage backup into dw. Situation with the poten adversely impact or thre safety? s the system failing? | to April 1, 1996 and not like and Protection Area of the age or Lodging Established the ground surface?  The groun | r Serv<br>hment<br>PHT)? I | Upgrade 10 mo 10 mo          | Protection Area or Serv Lodging Establishment, papril  Is the system an IPHT?  1. Discharge of sewage to the groun 2. Discharge of sewage to draintile surface waters?  3. Sewage backup into dwelling?  4. Situation with the potential immediatersely impact or threaten published?  Is the system failing? | ring a Food, plus all system 1, 1996  Ind surface?  Indicately and Itic health or  It separation between bedrock? | YES YES YES YES YES                      | NO NO NO         | Or<br>after<br>Jpgra<br>10 mo<br>10 mo |

| STATUS OF THE SYSTEM  |
|---|
| Based on the compliance criteria above the system status is (check one) $\square$ in compliance (functioning) $\square$ failing $\square$ an imminent threat therefore, this document is a (check one) $\square$ Certificate of Compliance $\square$ Notice of Noncompliance. |
|   |

|                        | t methods were used to make the determinations for the compliance inspection?   |
|------------------------|---|
|                        |   |
|                        |   |
| _                      |   |
|                        |   |
| Ple                    | se attach the following:  |
| 2)                     | Site sketch. Suggested items for drawing include: Well, well setback to system, dwelling or other establishment, tank(s), soil treatment syste reserved soil treatment area, curtain drain, property lines, waterways, and buried lines (those NOT installed by the utility). Include sizes and length and approximate distances from fixed reference points such as streets and buildings.  Soil boring logs, showing each horizon. Indicate the texture, structure, color, depth of each different soil type, evidence of mottling, bedrock and standing water and whether the material is fill. Locate each boring on attached site sketch.  A list of any and all requirements of the local ordinance that are different than the sate requirements referred to on this form. |
| 3)                     | A list of any and all requirements of the local ordinance that are different than the sale requirements referred to on this form.   |
|                        |   |
| CE                     | <u>TIFICATION</u>   |
|                        | TIFICATION  I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.   |
|                        |   |
| A.                     | I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.   |
| А.<br>В.               | I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.  Property Owner   |
| A.<br>B.               | I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.  Property Owner   |
| A.<br>B.<br>Insp       | I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.  Property Owner   |
| A.<br>B.<br>Lice<br>Em | I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.  Property Owner   |

#### <u>Upgrade Criteria</u>

#### Minnesota Statutes § 115.55 ("law") Upgrade Requirements

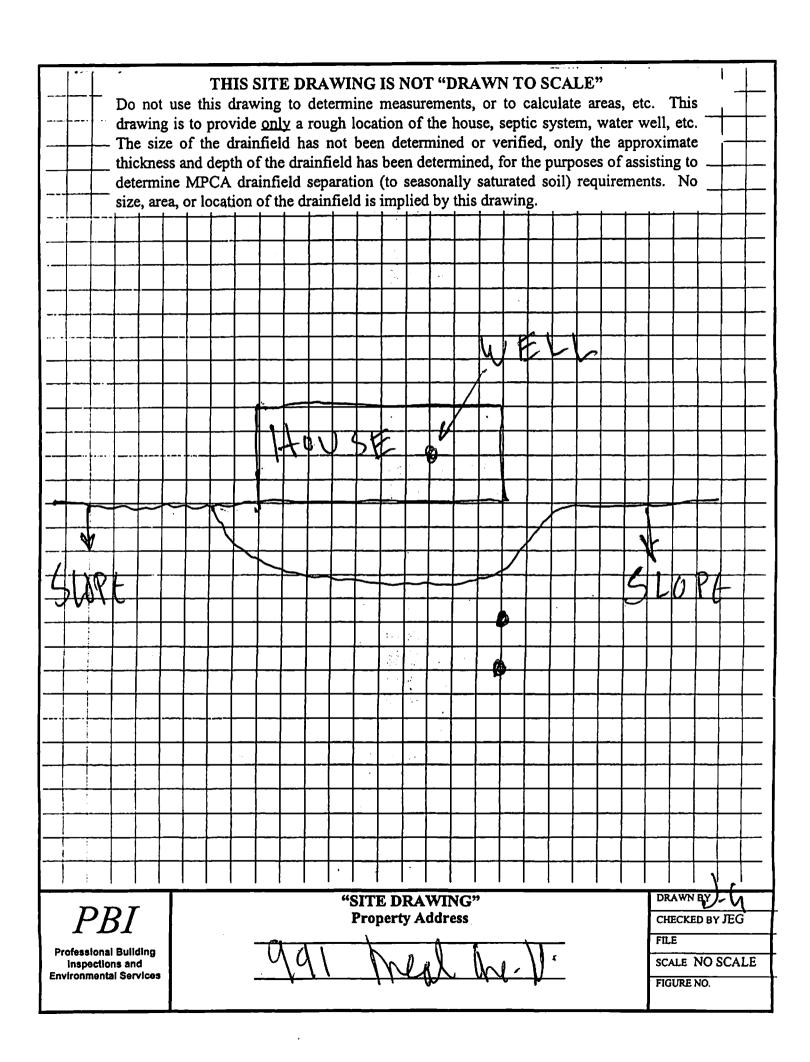
Any situation with the potential to immediately and adversely affect or threaten public health or safety, must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period of time if required by local ordinance.

If the local unit of government with jurisdiction over the system has adopted an ordinance containing alternative local standards, the existing system must comply with the ordinance. If the system does not comply with the ordinance, it must be upgraded, replaced, or its use discontinued according to the ordinance.

If a seepage pit, drywell, cesspool, or leaching pit exists and the local unit of government with jurisdiction over the system has not adopted local standards to the contrary, the system is failing and must be upgraded, replaced, or its use discontinued within the time required by local ordinance.

If the system fails to provide sufficient groundwater protection, then the local unit of government or its agent shall order that the system be upgraded, replaced, or its use discontinued within the time required by rule or the local ordinance.

If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This does not apply to systems in shoreland areas, wellhead protection areas, or those used in connection with food, beverage, and lodging establishments as defined in law.



## Washington County Department of Health Environment & Land Management

|  |              |             | _          | <i>~</i> <b></b> | <b>=</b> 0.0 |            |
|--|--------------|-------------|------------|------------------|--------------|------------|
| Phor   | ne: 651-4    | 30-6688     | Fax:       | 651-430-6        | 730          |            |
|  | ATTE         | NTION:      | Judy Jo    | hnson            |              |            |
| Date and Time Re                                       | equested:    | 11-9        |            | <u>:1</u> 5      |              |            |
| This is a RUSH:  | YES 🔏        | _ NO        |            |                  |              |            |
| Please fax us copi                                     | es of all se | eptic syste | em desi    | gn recor         | is, perm     | <u>its</u> |
| issued and cop   |              |             |            | _                | _            |            |
| CurrentOwner:  | Ed           | Sie         | ver        | a                |              |            |
| Address:   |              | Nea         | 20         | we I             | <i>V</i> .   |            |
| City:  | Jest         | La          | Rel        | land             | )            |            |
| Year Constructed                                       | ole          | ler         |            |                  |              |            |
|  | Thank yo     | u in advan  | ice for yo | our help!!       | . 1          |            |
| Jack E. Gill<br>Professional Build<br>and Environmenta | -            |             | ·          |                  | e s          | W L        |
| FAX: 612-  | 781-2471     |             |            |                  | Nm           | • I V      |

PHONE:

612-789-3354

Vo M

#### MINNESOTA POLLUTION CONTROL AGENCY INDIVIDUAL SEWAGE TREATMENT SYSTEMS UNIT February 5, 1996

#### What is a Compliance Inspection?

In the past, township, city and county (LUG) ordinances provided compliance inspection requirements appropriate for their individual programs. Areas without ordinances had no criteria to follow. Now, Minn. Rules ch. 7080 provides a minimum definition and criteria for the state (rule excerpts follow). LUG's can still make the requirements for a compliance inspection more restrictive than Chapter 7080 in their ordinances if they are submitted to the Minnesota Pollution Control Agency (MPCA). Check with your LUGs for more restrictive requirements.

#### Statewide Minimum Standard for Compliance Inspection

"Compliance inspection" is defined under Minn. Rules ch. 7080 as follows: 7080.0020 DEFINITIONS

Subp. 11d. Compliance inspection. "Compliance inspection" means any evaluation, investigation, inspection, or other such process to make conclusions, recommendations, or statements regarding an individual sewage treatment system to reasonably assure an individual sewage treatment system is in compliance as specified under part 7080.0060. Compliance inspections must be conducted by a qualified employee or under a license independent of the owner and the installer.

#### 7080.0060 COMPLIANCE CRITERIA.

Subp. 3. Compliance. Individual sewage treatment systems shall be considered in compliance if:

A. an existing individual sewage treatment system is not a failing system as defined in part 7080,0020, subpart 16a; or

B. new construction or replacement meets the technical standards and criteria defined in part 7080.0020, subpart 46a.

#### 7080,0020 **DEFINITIONS**



Subp. 16a. Failing system. "Failing system" means any system that discharges sewage to a seepage pit, cesspool, drywell, or leaching pit and any system with less than three feet of soil or sand between the bottom of the distribution medium and the saturated soil level or bedrock. In addition, any system posing an imminent threat to public health or safety as defined in subpart 19a shall be considered failing. Upgrade requirements for these systems are found under parts 7080.0060, subparts 3 and 4, and 7080.0315 or 7080.0350.

Subp. 19a. Imminent threat to public health or safety. "Imminent threat to public health or safety" means situations with the potential to immediately and adversely impact or threaten public health or safety. At a minimum, ground surface or surface water discharges and any system causing sewage backup into a dwelling or other establishment shall constitute an imminent threat.

Subp. 46a. Technical standards and criteria. "Technical standards and criteria" means parts 7080.0020, 7080.0060 to 7080.0176, and 7080.0910.

After December 31, 1995, a compliance inspection must be conducted for all new construction of an individual sewage treatment system (ISTS), before a variance is granted for the replacement of an ISTS, and before a building permit or variance is issued for the addition of a bedroom or bathroom. Some LUG ordinances require a compliance inspection at property transfer. This is not a state requirement; however, a complete compliance inspection must be conducted for the ISTS disclosure if anyone other than the property owner evaluates the system for this purpose. Failing systems must be upgraded, replaced, repaired or discontinued use according to the time periods within local ordinances, or, in areas without an ordinance, within the time period established by the MPCA. Systems posing an imminent threat to public health or safety must be addressed within the time period established by the LUG, with a statewide maximum time period of 10 months.

After a compliance inspection is completed, a Certificate of Compliance or Notice of Noncompliance must be submitted to the system owner within 30 days after the date of inspection. Notices of Noncompliance must also be submitted to the MPCA commissioner in areas that are not governed by an ISTS ordinance or a bedroom/bathroom ordinance and sent to the LUG in areas governed by at least one of these ordinances. The MPCA has developed an inspection form that includes the Certificate of Compliance and Notice of Noncompliance. Call (612) 296-7309 for a master copy. The requirements for these documents are under rule parts 7080.0315, subpart 3, and 7080.0305, subpart 2, item A (2).

Compliance inspections conducted before April 1, 1996, must be completed by individuals appropriately licensed by a county, city or township.

After April 1, 1996, inspections must be completed by employees of a business with a state Designer I or Inspector license or county, city, or township employees with state Designer I or Inspector registration. The inspector must be independent of the ISTS owner and the installer for new construction and replacement.

Businesses with state Designer II, Installer or Pumper licenses cannot conduct compliance inspections. However, maintenance and repair problems can be reported to system owners under an Installer license and problems related to sewage tanks, dosing chambers, baffles, maintenance hole (previously manhole) covers and extensions and pumps and evaluations of water tightness can be reported under a Pumper license.

3/14/96



#### Department of Public Health and Environment

14949 62nd Street North PO Box 6 Stillwater MN 55082-0006

Office: 651-430-6655 TTY: 651-430-6246 Fax: 651-430-6730

Review Fee: \$260.00 Permit Fee: \$270.00 **Total Fee:** \$530.00 **Previous Payment** \$0,00 **Balance Due** \$530.00

Community:

West Lakeland Township

Permit Number:

0017-08-9

Owner:

Levi Lindeman

991 Neal AVE

Stillwater MN 55082-

Applicant:

Levi Lindeman

#### PERMISSION IS HEREBY GRANTED

To execute the work specified in this permit on the following identified property upon express condition that said persons and their agents, and employees shall conform in all respects to the provisions of Ordinance #128, Washington County Development Code, Chapter Four, Individual Sewage Treatment System Regulations. This permit may be revoked at any time upon violation of any of the provisions of said ordinance.

Project Address:

991 Neal AVE N

Geo Code:

32-029-20-22-0015

Designer:

Eklin Soil Testing & Inspections, Inc.

| Tune of System: Standard Drainfield |        |                       |          | Pressure Distribution N / A |            |   |  |
|-------------------------------------|--------|-----------------------|----------|-----------------------------|------------|---|--|
| Type of System: Standard Drainfield |        |                       |          |                             |            |   |  |
| Design Criteria                     |        | Drainfield Sizi       | ng       |                             |            |   |  |
| Percolation Rate:                   | 10     | Square Feet:          | 600      |                             | . <u> </u> |   |  |
| Depth To Restriction:               | 72     | Lineal:               | 200      | Feet                        |            |   | C  |
| Land Slope:                         | 8.00%  | Depth Of Rock Below:  | 12       | Inches                      |            |   |  |
| Flow Rate:                          | 300    | Maximum Trench Depth: | 36       | Inches                      |            | M hands hand the hands of the 2 pm and the first the 10 hands ( ) and ( | MINISTER CHARGE WITH THE PROPERTY OF THE TOTAL PROPERTY. |
| Number of Bedrooms:                 | 0      | Number Of Trenches:   | . 4      |                             | !          |   |  |
| Gravelless                          |        | Length Of Trenches:   | 50       | Feet                        | ļ<br>,,, , |   |  |
| Chambered                           |        | Spacing Of Trenches:  | 7        | Feet                        |            |   |  |
|                                     |        | Tank Sizes            |          |                             |            |   |  |
| Tank 1: 1000 Tank                   | 2. 500 | Tank 3: 0 Lift S      | Station: | 0                           |            |   |  |

#### **Authorized Work/Special Conditions**

- Building sewer can be no closer than 20 feet from well and must be pressure tested Schedule 40 within 50 feet.
- Domestic strength waste only. Industrial waste and hazardous wastes cannot enter the septic system.
- Establish a vegetative cover over the soil treatment area within 30 days of the installation. Protect the soil treatment area from erosion until the vegetative cover is established.
- Maximum trench depth 36 inches into natural soil.
- Rock only. No chambers. No gravelless. 5.
- This system must be installed by a certified/licensed sewage treatment system installer holding a current license with the Minnesota Pollution Control Agency. (A list of installers is available at your request.)

Permit Issue Date:

10/29/2008

Permit Expiration Date:

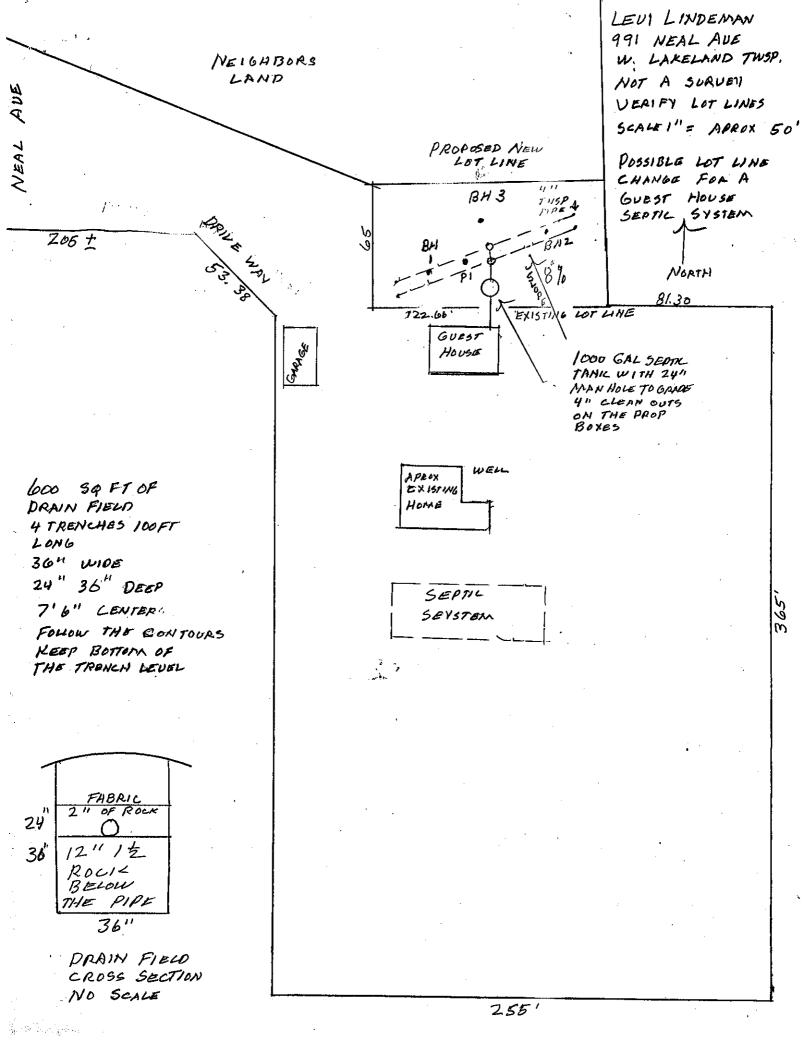
10/29/2009

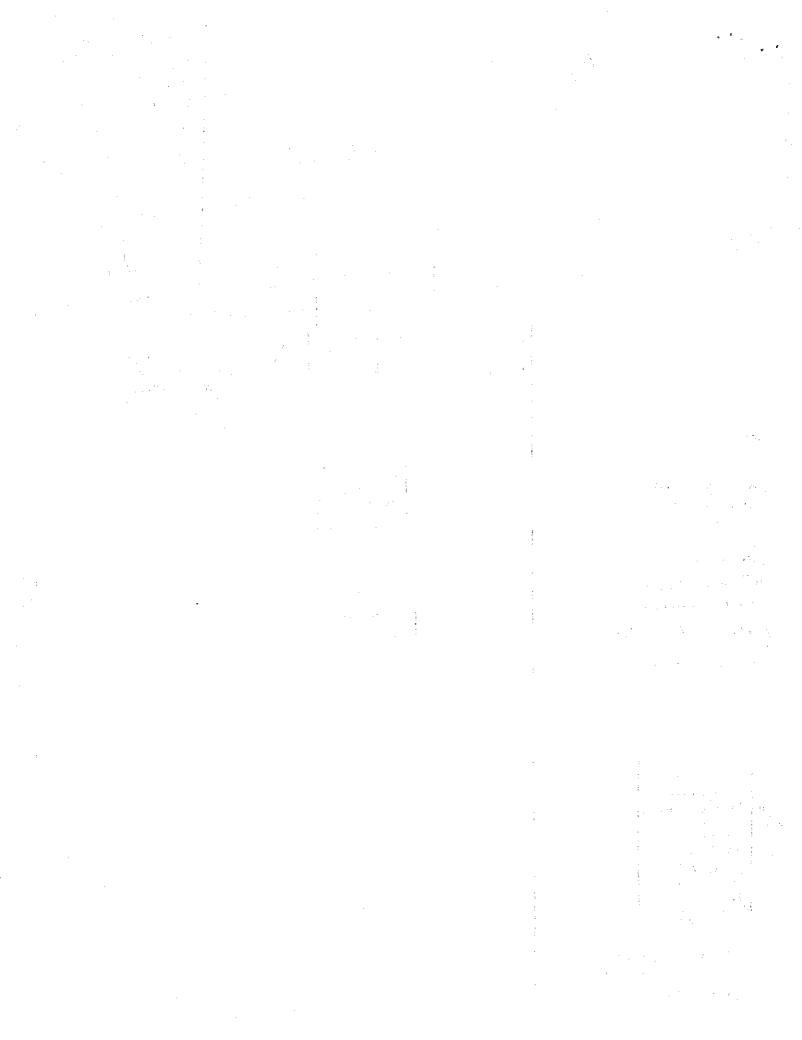
Christopher W. LeClair, REHS Senior Environmental Specialist



Individual Sewage Treatment System Inspection Form

| Project Address: 991 Neal AVE N  Community: West Lakeland Township  Owner: Levi Lindeman  Applicant: Levi Lindeman                 | Application ID: 0017-08-9  Geo Code: 32-029-20-22-0015  Type of System: Standard Drainfield  Designer: Eklin Soil Testing & Inspections, Inc. |
|--|---|
| Repair Inspection: Tanl Replacement Rou Other Trea   | gh-Up Other  Inspection Pates:  |
| Number of Bedrooms:  |   |
| Installer:   |   |
| Site Review  | Mounds / At-Grade   |
| Conclusions:  Soil Boring Site Suitable Site Unsuitable Depth of Pit/Boring Comments  Comments                                     | Downslope Width Perf Size/Spacing  Sideslope Width Pipe Size/Spacing  |
| (二)<br>Sewage / Holding Tanks  | Pressure Bed Dimensions: Length Width Pump Information  |
| Tank 1 New Baffle Type Plastic Existing Baffle Type Plastic Fiberglass New San-T Existing Concrete                                 | Gallons Per Cycle Line:  Type/Location or Alarm   |
| Trenches, Bed or Gravelless Dra  |   |
| ☐ Drop Box       ☐ Distribution Box       ☐ Gravity       ☐ Pump         ☐ Serial       ☐ Parallel       ☐ Chambers       ☐ Gravel | lless   |
| Trench         T1  | Property Lines  Wells 50' 100'  her 18"  pacing 24"  Property Lines  Wells 50' 100'  Pressure Test  Time Time                                 |
| Pressure Bed Dimensions: Length Width  | Absorption Area PSI PSI   |
| Comments   |   |





## Percolation Tests - Soil Borings Septic System Designs - Sub-Division Planning

## Eklin Soil Testing & Inspections MPCA License # 410

(651) 337-1300

| ĺ |                          | (651) 337-1300    |            |
|---|--------------------------|-------------------|------------|
| ١ | Owner's Name LEVI        |                   |            |
| l | Tab Class Care           | LINDEMAN          |            |
| ı |                          | NEAL AVE .        |            |
| 1 | on or township W. L.     | AKE LAND TOWNSNIP |            |
| I | Use of Building Pool -   | CHECK TOWNS MIP   |            |
|   |                          | GUEST HOUSE       | 2 BEDROOMS |
| 1 |                          | •                 |            |
|   | Design Flore Bale 300 +- |                   |            |

| Design Flow Rate G. P.D. Pere Rate 10MP1               | Land Slope O' Paris          |
|--|------------------------------|
| Two Required Tank Sizes / 000 Gallons Gallons Gallons  | C) telectil                  |
| Type of System (standard at mode as her)               | Lin Station Tank Size Oation |
| System Size: 600 Square Feet Zoo Et                    | nest Feet 36' Trench Width   |
| Depth of rock below pipe 12"                           | Depth of Book About De       |
| MDNimum Depth of Trench From Existing Oracle 24 Inches | MAXImum Depth of Trench      |
| Recommended Number of Trenches . 44                    | Page                         |
| Trench Spacing Measured Center to Center               |                              |
| Any Other Special Conditions FENCE OFF BETOR GRADI     | THE TEST SIDE                |

|   | 1                         |
|---|---------------------------|
| This system has been designed by a Pollution Control Agency (PCA) | ) Certified Professional, |
| Designer Name EDWIN, EKLIN  | PCA Certification # 3268  |
| Address 229 CIMARRON LAKE E                                       |                           |
| Signatures Edun ESO   | 55042                     |
|   | . Dite 9.23-2008          |

|                     | BORTHOLE #    | BORCHOLE DEPTH     | BORDBOLE DINHETER    |  |
|---------------------|---------------|--------------------|----------------------|--|
| JOB / FUI LINDEMAKI | WEST LAKELAND | DATE 9/16 STONED   |                      |  |
|                     | BOREBOLE &    | BORCHOIE DEPTH 36" | BOREHOLE DIMETER / " |  |

SOIL DESCRIPTION

DEPTH

2017

| SOLL DESCRIPTION |  |  | • |
|------------------|--|--|---|
| EL-Z3G           |  |  |   |

| l  | - 1                    |      | ~~       |      |       |      |      |
|----|------------------------|------|----------|------|-------|------|------|
| ٠. |                        |      |          |      | •     |      |      |
|    |                        | FILL | MPI      | FILL | MPI   | FILL | INDI |
|    | COMPENTS               |      | 6.8      |      | .6.9. | ,    | 0/ . |
|    | DROP                   |      | Na       |      | No    |      | \    |
|    | READING<br>MEASUREMENT | 9    | ta<br>to | 9    | 100   | 2    | N    |
|    | TDE                    | 950  | 1000     | 1000 | 1010  | 010  | 020  |

|                        |     |      |       | • |    |   |  |
|------------------------|-----|------|-------|---|----|---|--|
|                        | MPI | FILL | MPI   | • |    | - |  |
| SIKEWAXO               | 0/  | •    | 0/    |   | 10 |   |  |
| DROP                   | 1   |      | /     |   |    |   |  |
| RENDING<br>MENSTREMENT | 10  | 1    | 6     |   |    |   |  |
| ماناجد                 | 1 ~ | 1040 | 10.50 |   |    |   |  |

IND 1

N

. The second secon ; . . . \*\*\* ; American state of the second o The second of th 3 4 ! 

Borehole diameter 4''32''

BORING LOG

JOB LEW LINDERMAN

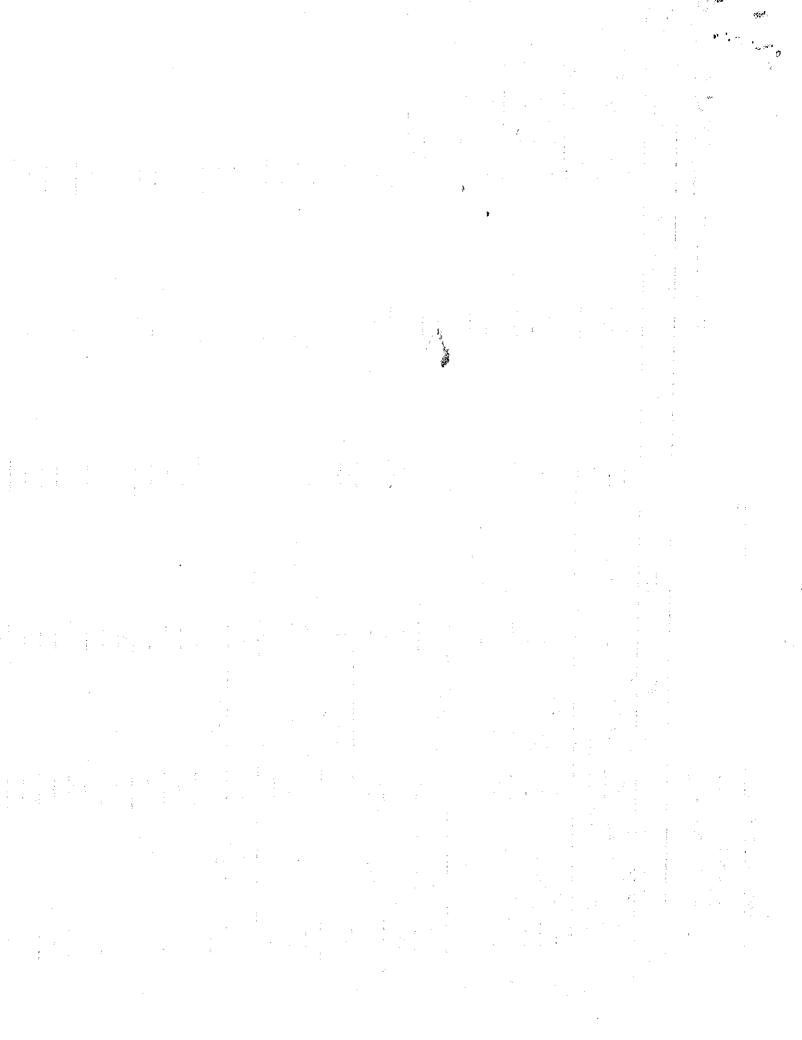
491 NEAL AVE

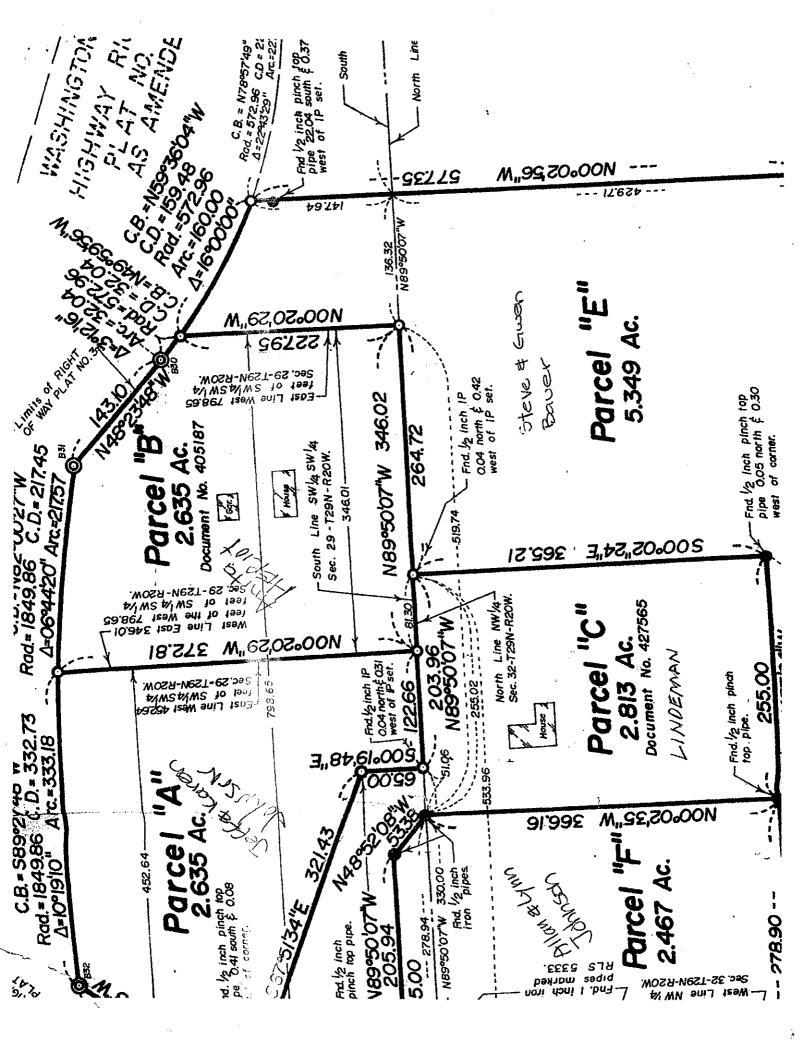
166

2008

1

DATE







### EKLIN SOIL TESTING AND INSPECTIONS, INC.

299 Cimarron Lake Elmo, MN 55042 (651) 337-1300

Levi Lindeman 991 Neal Avenue Stillwater, MN 55082

September 23, 2008

Dear Levi,

On September 16, 2008, soil borings and percolation tests were performed at 991 Neal Avenue, West Lakeland. The soil work was done for your planned pool and guest home.

Soil borings indicate there is a three foot separation from the bottom of the drainfield trench to water table. The percolation rate was 10 MPI.

For your two bedroom guest home, a 1000 gallon septic tank will be needed. 600 square feet of drianfield is recommended. The drainfield will consist of four runs, three feet wide, 30" to 36" deep and 50 feet long. There should be 12" of rock below the pipe and 2" of rock over the pipe. It will take approximately 40 yards of inch and a half washed rock for this job. Before backfilling, an approved Geotech fabric should be put down over the rock to keep the backfill from sifting into the drainfield. It is important to establish cover over the drainfield as soon as possible. Rain water getting into the system could cause the system to fail.

See the attached papers for suggested design and boring and percolation logs.

DURING CONSTRUCTION IT IS IMPORTANT TO KEEP ALL TRAFFIC OFF OF THE DRAINFIELD AREA SO THE GROUND WILL NOT BECOME COMPACTED. YOU SHOULD FENCE OR FLAG OFF THE TESTED AREA BEFORE ANY EXCAVATION IS DONE ON THE SITE.

Low flush toilets and restricted shower heads would cut your water usage down. If a water softener is installed, it can drain directly to the wetlands or a low spot on the lot as this contains no harmful chemicals and it is legal. These recommendations are a very good practice to follow on all septic systems, whether they be mounds or the conventional

| continued. | ٠ |  |  | • | ٠ |  |  |  |
|------------|---|--|--|---|---|--|--|--|

A detailed the second of the second

. •

en particular de la companya de la companya de la companya de la companya de la companya de la companya de la La companya de la companya de la companya de la companya de la companya de la companya de la companya de la co

is a property of the contract

en de la composition 
ego en esperimento de la compansión de la compansión de la compansión de la compansión de la compansión de la La compansión de la compansión de la compansión de la compansión de la compansión de la compansión de la compa La compansión de la compansión de la compansión de la compansión de la compansión de la compansión de la compa

A second of the second of t

A support of the property of the

trench systems. If hot tubs or over sized bath tubs are used, it would be advisable to enlarge the drainfield.

It is important to maintain your septic system by pumping the septic tank periodically. The number of people using the system will determine how often this has to be done. Some communities may require pumping periodically. You should check with your local authorities about this. If the septic tank is not pumped when needed, sludge can build up and work over into the drainfield and cause the field to stop up. Never hook basement footing drains to your septic system. Always try to conserve on water use.

During winter months it is also very important to keep all traffic off of the drainfield area; snowmobiles, skiing, sliding, etc. If snow becomes compacted it could cause your drainfield to freeze up.

This report does not mean that you have a permit to install the job. Your local inspector will have to first approve the suggested design and logs. In some cases other agencies may require a permit. If near a lake, wetland or drainage ditch, or if you are filling any part of a low area or wetland, a permit may be needed from your local Watershed District or the Department of Natural Resources. In some cases, the Minnesota Pollution Control Agency or the Corps of Engineers may also require a permit. Your local authorities should be able to inform you of this.

If you have any questions, please call Dale or Ed.

Yours truly,

81 0/0

Ed Eklin

Certification No. 3268

en de la companya de la companya de la companya de la companya de la companya de la companya de la companya de La companya de la companya de la companya de la companya de la companya de la companya de la companya de la co

 $(x_1, x_2, \dots, x_n) = (x_1, \dots, x_n) + (x_1, \dots$ 



#### **Department of Public Health and Environment**

14949 62nd Street North PO Box 6 Stillwater MN 55082-0006

Office: 651-430-6655 TTY: 651-430-6246 Facsimile Machine: 651-430-6730

### Receipt

Number:

1330

Date:

10/15/2008

Check Number:

3113

Received For:

Application #1900086

Application Type:

Standard Drainfield

Property Address:

991 Neal AVE

Community: .

Lakeland

Received From:

Stephanie Lindemann

991 Neal AVE N

West Lakeland MN 55082

 Review Fee:
 \$260.00

 Permit Fee:
 \$270.00

 Total Fee:
 \$530.00

 Amount Received:
 \$530.00

 Previous Payments:
 \$0.00

 Balance Due:
 \$0.00

Issued By:

SJH



### SEPTIC PERMIT APPLICATION

Washington County Department of Public Health & Environment 14949-62nd St N, P.O. Box 6, Stillwater MN 55082-0006 651.430.6688 FAX: 651.430.6730



|   | N.  | OPED TV  | terry deletering a service                       | y was garaji ya waka kata ya kata ina waji sani | interestation of the section   | The second second                       |                   |                        |
|---|---|--|--|---|--------------------------------|---|-------------------|------------------------|
|   |   | OPERTY   | & APPLICAN                                       | LINFORMA  | ITION                          |   |                   |                        |
| PROPERTY ADDRESS:  991 NEAL   | 4115 11   | LAKE   | LAND TU  | GEOCODE:  | 330294                         | 10220                                   | 3015              |                        |
| USE OF BUILDING: E SINGLE   | FAMILY-HOME                                     | □ NON-   | SINGLE FAMILY                                    | APPLICATIO                                      |                                | X NEW                                   |                   | REPLACEMENT            |
| L3 D 23   | ST HOUSES                                       |  | APPLICANT  |   |                                |   |                   | TEL EXCEMENT           |
| NAME(S) LEUT LINDE,   | MAN ADD   | RESS 991.  | MEAL A   | UE  | PHO                            | NE NUMBER                               | /\$\              |                        |
|   |   | STILLU   | ATER IN  | ZIP 5500  | 82 41                          | 2-791                                   | 1-880             | 29 00                  |
| NAME(S)   | · .   | RESS   | OWNER  | office  | # 651-                         | - <i>2</i> 03                           | 1201              |                        |
| none(3)   | CITY  |  | ender var en en en en en en en en en en en en en | ZIP   | PHO                            | NE NUMBER<br>203-12                     | (S)               | <b>~</b>               |
|   | KSYSTASSI.                                      | and the state of t | SYSTEM TY  | Projectors                                      |                                | Carelly Assist                          | 1884 1975 and     |                        |
| X STANDARD SYSTEM   | □ ALTERNATIVE                                   | CVCTFA   | EXPERIMENTAL SYST                                | <u> Pirang dan dan dan kabupatan biring</u>     | DIVISION REVIEW                |   |                   |                        |
| DRAINFIELD  | ☐ PRESSURE BE                                   | <del></del>  | MOUND  |   | SDIVISION REVIEW               |   | LOT SPLI          |                        |
| CONSTRUCTED WETLAND   | COLLECTOR S                                     |  | DRIP IRRIGATION                                  | ····  | GRADE                          | <del></del>                             | ☐ TANK REF        |                        |
| FLOODPLAIN SYSTEM   | GREYWATER                                       | _  | PRIVY  |   | LDING TANKS<br>ROBIC TREATMENT | TIMIT CVCTEN                            | SAND FIL          | TER                    |
|   |   |  |  |   | TODIC TREATMENT                | UNIT STSTEM                             | 1                 |                        |
|   |   | FEL  | SCHEDULE   | - 2008  |                                |   |                   |                        |
| APPLICATION FEE/SOIL REVIE  | w   |  | \$2  | 50  | APPLICATIO                     | N FFF                                   | *                 | $2(\alpha \cap -$      |
| PERMIT FEE - DRAINFIELD OR  | PRESSURE BED                                    |  | \$2  |   | 7117 21071110                  | *************************************** |                   | 240                    |
| PERMIT FEE - MOUND OR AT-C  |   |  | \$4  | /~- <u></u>                                     | PERMIT FEE                     |   | Ć                 | <del>110-</del>        |
| ☐ PERMIT FEE - ALTERNATIVE SY<br>☐ PERMIT FEE - EXPERIMENTAL:                                   |   |  | \$4.<br>\$4.                                     | / I. )  | CURDINGGION                    | J BEWEW D.                              | AF FCF.           |                        |
| PERMIT FEE . TANK REPLACEM  |   |  | \$10   | / ///\  | 20001412101                    | N REVIEW BA                             | '2F LFF:          |                        |
| SUBDIVISION REVIEW  | *   |  | \$180 + \$80 PER LO                              |   | LOTS:                          | _ X \$80 PER                            | LOT               |                        |
| PERMIT FEE - REISSUANCE OF  |   |  | \$1  |   |                                |   | _                 |                        |
| D PENALTY FOR FAILURE TO OB   | TAIN PERMIT PRIC                                | OR TO INSTALLA   | TION \$2   | <del>45</del>                                   | PENALTY                        |   | ***               | <u> </u>               |
| Make Checks Payable to WAS  | HINGTON COUNT                                   | Υ  |  |   | TOTAL PERA                     | WIT FEE                                 |                   | 530-1                  |
|   |   |  |  |   |                                |   | _                 |                        |
| The following exhibits are required as part of  | the application and s                           | hall be attached he  | reto: Percolation Test R                         | eports; Soil Boring Log                         | es: Site Plan drawn            | to scale showin                         | e location of bu  | illdings, lot lines    |
| percolation test holes, soil boring holes, prop<br>must be staked. Inaccurate or incomplete inf | osed location of syste                          | m and location of v  | vell(s); one (1) copy of t                       | he System Design; and                           | one (1) copy of the            | e Final Building                        | Plan. The hous    | e and drainfield areas |
|   |   |  |  |   |                                |   |                   |                        |
| AGREEMENT: The undersigned hereby makes<br>ordinances and regulations of the County of W        | Yashington, Minnesota                           | <ul> <li>Applicant agrees</li> </ul>   | that the Site Plan. Sket                         | thes, and Design subm                           | nitted herewith, and           | i which are revi                        | iewed hy Wachin   | neton County           |
| ogether with any requirements and/or restrict<br>easonable times, to Washington County for t    | ctions made necessary                           | y by conditions pec  | uliar to a particular loca                       | tion, shall become oar                          | rt of the permit Ar            | policant further                        | r agrees to provi | ide access at          |
| OR AN INSTALLATION AT A SPECIFIC LOCAT  | TION; ANY DEVIATION                             | I FROM THE APPRO   | OVED LOCATION WILL V                             | DID THE PERMIT. It s                            | thall be the responsi          | ibility of the ap                       | plicant for the   | permit to notify the   |
| Office of the Washington County Department  | of Public Health & En                           | vironment that the   | installation is ready for                        | inspection.                                     |                                |   |                   | •••                    |
| PERMITS WILL NOT BE ISSUED ONCE FROZEN  | I GROUND CONDITION                              | IS EXIST due to the  | inability to conduct soi                         | reviews unless arrang                           | gements are made E             | BY THE APPLICA                          | ANT to provide    | a backhoe, geo-        |
| probe, or any other device that can penetrate<br>to SIXTY (60) DAYS to review and approve or c  | the frozen soil to all<br>deny the permit appli | ow washington Cou<br>cation.   | inty to conduct a soil rev                       | riew. In accordance w                           | vith Minnesota Statu           | ite 15,99, Subdi                        | ivision 2, Washi  | ngton County has up    |
|   |   |  |  |   |                                |   |                   |                        |
| hereby certify the above to be true and co  | orrect. Thereby give                            | the Washington C   | nunty Denartment of Pi                           | iblic Health & Enviro                           | nmont posmission               | ** ***                                  |                   |                        |
| pusiness hours for the purpose of determini   | ng the sultability of                           | the location, desig  | n, and construction, w                           | nich may include mir                            | nor excavations or             | soil borings by                         | the Departmen     | nt.                    |
|   | 1   |  | )  |   |                                |   |                   |                        |
| 7   | <u> </u>  |  |  | 10  | -14-0                          | පු 🐬                                    | PE                | DEIVED                 |
| Signature   | of Applicant (Owr                               | ner or Contracto   | or)  | <del>- ' '</del>                                |                                | Date                                    |                   | ····                   |
| ***<br>   | •   |  | •  |   |                                | }                                       | UCT               | 1 4 2008               |

| SITE EVALUATION                         |  | COUNT                                 | Y USE ONLY                                     | ☐ NEW<br>☐ EXIST | •   | CLASS V                               | LY:<br>ESTABLISHMENT                    |  |  |
|---|--|---------------------------------------|--|------------------|---|---------------------------------------|---|--|--|
| VALUATOR: CAPIS LE                      | Luale  |                                       | ×.   | DWEL             | LING  | ☐ FBL ESTABLIS                        |   |  |  |
| CHPIS LE CROPERTY ADDRESS: 991 M        | EAL AVE  | ٠ ہــا،                               | įi.  | GEOCODE:         |   |                                       |   |  |  |
| ATE: 22 OLT 2008                        | TIME:  | سختی،                                 |  |                  |   |                                       |   |  |  |
|   |  | S                                     | OIL REVIEW                                     |                  |   |                                       |   |  |  |
| OIL CLASSIFICATION:                     |  | ,                                     | PARENT MAT                                     | ERIAL:           |   | W                                     | ······································  |  |  |
| SOIL BOR                                | NG 1   |                                       |  |                  | SOIL  | BORING 2                              |   |  |  |
| LEVATION OF BORING:                     | LOCATION:  | IN TE                                 | •  | OF BORING:       |   | LOCATION:                             |   |  |  |
| GPS COORDINATES; LAT:                   | LON:   |                                       |  | NATES: LAT:      |   | LON                                   |   |  |  |
| EQUILIBRIES                             | PIT  | ☐ PROB                                |  | BORING           | <del>,                                     </del> | ☐ PIT                                 | ☐ PROBE  REDOXIMORPHIC                  |  |  |
| SOIL HORIZON DEPTH (IN) TEXTURE COLOR   | STRUCTURE  | FEATURI                               |  | TEXTURE          | col   | LOR STRUCTURE                         |   |  |  |
| 0"-9" 514 1018                          | ABK  | N0                                    |  |                  |   |                                       |   |  |  |
| 9"-26" SILT 104R                        | ABK  | 20                                    |  |                  |   |                                       |   |  |  |
| 20-48 SILT 1912                         | ABK  | No                                    | >  |                  |   |                                       |   |  |  |
| 18"-40" SAND 1998                       | 6R   | ٥٥                                    |  |                  |   |                                       |   |  |  |
|   |  |                                       |  |                  |   |                                       |   |  |  |
| 40" 035xxv 47                           |  |                                       |  | <u> </u>         |   |                                       |   |  |  |
|   | . mgagataran ing masa at a sa  COULDE                                | VIEW CONCLU                                    | HONG             |   | · · · · · · · · · · · · · · · · · · · |   |  |  |
|   | **************************************                           |                                       | VIEW CONCLUS                                   | SICIAZ           |   | SOIL TEXTURE:                         | 1.67 5147                               |  |  |
| STAN                                    | IDING WATER:   | DEFI                                  | SATURATED SOIL:                                | <del></del>      | · · · · · · · · · · · · · · · · · · ·             | SOIL SIZING FACT                      | OB.                                     |  |  |
| ☐ DISTURBED SOIL                        |  | <b>フ</b> ロ                            | MAXIMUM DEPTH                                  | (ب               | SYSTEM: LINEAR LOADING RATE:                      |                                       |   |  |  |
| ☐ COMPACTED SOIL BEDI                   | ROCK:  | NO                                    | MAXIMUM DEFTIT                                 | JI 3131EM.       | 36"   | LINEAR LOADING RATE:                  |   |  |  |
|   | 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4                          |                                       | SITE REVIEW                                    |                  |   |                                       |   |  |  |
| CHECK ALL THAT AP                       | PLY  |                                       | EASEMENTS ON LO                                |                  | FFLINE  | SETBACK                               | <u>S</u>                                |  |  |
| □ WETLAND OR WETLAND VEGET              | ATION  |                                       | UTILITY  |                  |   |                                       | , |  |  |
| ☐ POND, LAKE, STREAM, RIVER☐ FLOODPLAIN |  |                                       | ☐ DRAINAGE                                     | RIVI             | 1 1 1 <u>-</u>                                    |                                       |   |  |  |
| ☐ 10 YEAR FLOOD ELEVATION☐ BLUFFLINE    |  | -                                     | DOTHER DOTHER                                  |                  |   | OND, LAKE, STREAM, WETLAND            |   |  |  |
| WELL WELL CASING DEPTI                  | l:   | .                                     | <b>— • • • • • • • • • • • • • • • • • • •</b> | WEI              | LL  | · · · · · · · · · · · · · · · · · · · |   |  |  |
|   |  | <u></u>                               | <del></del>                                    | <u> </u>         | ,   |                                       |   |  |  |
| COMMENTS/NOTES:                         |  |                                       |  |                  |   |                                       |   |  |  |
|   | · · · · · · · · · · · · · · · · · · ·                            |                                       |  |                  |   |                                       |   |  |  |
|   |  | , , , , , , , , , , , , , , , , , , , |  |                  | •   |                                       |   |  |  |
|   |  |                                       |  | <del></del>      |   | · · · · · · · · · · · · · · · · · · · |   |  |  |
| ······································  |  |                                       |  |                  |   | <u> </u>                              |   |  |  |