

Necessary or Locally Required Attachments

Soil boring logs

Other information (list):

☐ System/As-built drawing

4E1 204-4300 A 800-657-3864

# Compliance Inspection Form

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

Doc Type: Compliance and Enforcement

nspection results based on Minnesota Pollution Control Agency (MPCA) equirements and attached forms – additional local requirements may also apple	For local tracking purposes:
ubmit completed form to Local Unit of Government (LUG) and system vithin 15 days	
ystem Status	
System status on date (mm/dd/yyyy): _4/28/2018	
No	ncompliant - Notice of Noncomplianc e Upgrade Requirements on page 3.)
Reason(s) for noncompliance (check all applicable)    Impact on Public Health (Compliance Component #1) - Immined   Other Compliance Conditions (Compliance Component #3) - Im   Tank Integrity (Compliance Component #2) - Failing to protect to the Compliance Compliance Component #3) - Failing to protect   Soil Separation (Compliance Component #4) - Failing to protect   Operating permit/monitoring plan requirements (Compliance Compliance Component #4)	groundwater ailing to protect groundwater at groundwater
Property Information Parcel ID# or Se	c/Twp/Range:14.032.20.43.0009
Property address: 21050 Ozark Ave Scandia	Reason for inspection: Point of sale
Property owner:	Owner's phone: 651-325-5780
or	Representative phone:
Owner's representative:	651_430-6655
ocal regulatory authority: Washington County	
Brief system description: see comments	
Comments or recommendations:  Bar/ Restruant 1500 gallon septic tank, 1500 gallon split tank with a pump,	, 6000 gallon tank with a nibbler ATU, 1500 gallon
Office building 1500 gallon septic tank, 1500 gallon septic tank, 1000 gallo	on pump tank and trenches
Certification  I hereby certify that all the necessary information has been gathered to deliberation for the control of the co	termine the compliance status of this system. No
I hereby certify that all the necessary information has been gathered to det determination of future system performance has been nor can be made du possible abuse of the system, inadequate maintenance, or future water us	age.
Inspector name: Amy Thompson	Certification number
Business name: AT Septic Inspection & Design Inc.	License number: 3886  Phone number: 320-980-0235
Duoinous name.	220 000 0236

☐ Forms per local ordinance

Prop	erty a	address: 21050 Ozark Ave Scandi	a		Inspector initials/Date: AT   4/28/2018
					(mm/dd/yyyy)
1	lmr	oact on Public Health – C	omnliano	e componen	t #1 of 5
1.			Omphano	c compensi	
	Cor	npliance criteria:	Ţ		Verification method(s):
		tem discharges sewage to the	☐ Yes	⊠ No	⊠ Searched for surface outlet
-	grou	und surface.			Searched for seeping in yard/backup in home
	Syst	tem discharges sewage to drain	☐ Yes	⊠ No	☐ Excessive ponding in soil system/D-boxes
-	tile o	or surface waters.			☐ Homeowner testimony (See Comments/Explanation)
		tem causes sewage backup into	☐ Yes	⊠ No	☐ "Black soil" above soil dispersal system
-	Any "yes" answer above indicates the system is an imminent threat to public				System requires "emergency" pumping
					☐ Performed dye test
				С	☐ Unable to verify (See Comments/Explanation)
	nea	alth and safety.			☐ Other methods not listed (See Comments/Explanation)
	Con	nments/Explanation:			
2.	Tai	nk Integrity – Compliance	compone	ent #2 of 5	
	100	14.00			Verification method(s):
12	Col	mpliance criteria:	T_		803-40 L
		tem consists of a seepage pit,	☐ Yes	⊠ No	☐ Probed tank(s) bottom
		spool, drywell, or leaching pit.			Examined construction records
	See	page pits meeting 7080.2550 may be pliant if allowed in local ordinance.			Examined Tank Integrity Form (Attach)
			☐Yes	⊠ No	Observed liquid level below operating depth
		vage tank(s) leak below their igned operating depth.	1 103		
		es, which sewage tank(s) leaks:			☐ Probed outside tank(s) for "black soil"
	Δn	y "yes" answer above indi	cates th	e	Unable to verify (See Comments/Explanation)
		stem is failing to protect g			☐ Other methods not listed (See Comments/Explanation)
		mments/Explanation:		2	
	COI	mments/Explanation.			
					1.110 - 6.5
3.	Ot	her Compliance Condition			
	a.	Maintenance hole covers are dama	aged, crack	red, unsecured,	or appear to be structurally unsound. ☐ Yes* ☒ No ☐ Unknown
	b.	Other issues (electrical hazards, etc.)	to immedia	ately and advers	ely impact public health or safety. ☐ Yes* ☒ No ☐ Unknown
		*System is an imminent threat to	o public he	ealth and safety	
		Explain:			
		eron <b>1</b> 00 1000			
		i e			
	c.	System is non-protective of ground	d water for o	other conditions	as determined by inspector . ☐ Yes* ☒ No
	o.	*System is failing to protect gro		And the second s	. /
		Explain:			
		EVAIgiii.			

Property address: 21050 Ozark Ave Scandia			Inspector initials/Date: /		
				(mm/dd/yyyy)	
4. Soil Separation - Compliance co	mnonent #4 of 5				
Date of installation: 1999	Unknown	Verifica	ation method(s):		
(mm/dd/yyyy)		Soil obs	ervation does not expire. Pre	evious soil	
Shoreland/Wellhead protection/Food beverage lodging?	⊠ Yes □ No	observa unless s	tions by two independent pa site conditions have been alte	rties are sufficient,	
Compliance criteria:		•	nents differ.	ttoch horing logs)	
For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead	☐ Yes ☐ No	<ul> <li>         ☐ Conducted soil observation(s) (Attach boring logs)     </li> <li>         ☐ Two previous verifications (Attach boring logs)     </li> </ul>			
Protection Area or not serving a food,			applicable (Holding tank(s), no		
beverage or lodging establishment:	81		ble to verify (See Comments/E		
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.			er (See Comments/Explanation)	, prantation y	
Non-performance systems built April 1,	⊠ Yes □ No	Comme	ents/Explanation:		
1996, or later or for non-performance			\$44.00±24.00500.00±0.00€		
systems located in Shoreland or Wellhead Protection Areas or serving a food,					
beverage, or lodging establishment:					
Drainfield has a three-foot vertical					
separation distance from periodically saturated soil or bedrock.*					
"Experimental", "Other", or "Performance"	☐ Yes ☐ No	Indicate depths or elevations			
systems built under pre-2008 Rules; Type IV	103 110	0.011			
or V systems built under 2008 Rules (7080. 2350 or 7080.2400 (Advanced Inspector		A. Bottom of distribution media 30"			
License required)		B. Perio	odically saturated soil/bedrock	66"+	
Drainfield meets the designed vertical		C. Syste	em separation	36"	
separation distance from periodically saturated soil or bedrock.				36"	
	ho evetom is	D. Required compliance separation* 36"  *May be reduced up to 15 percent if allowed by L			
Any "no" answer above indicates t failing to protect groundwater.	ne system is	Ordina			
raning to protoct ground accom-					
5. Operating Permit and Nitroger	BAAD* Complian	re com	nonent #5 of 5	Not applicable	
			If "yes", A below is requi		
Is the system operated under an Operating	• • • • • • • • • • • • • • • • • • •		If "yes", B below is requi		
Is the system required to employ a Nitroge		_	it "yes", B below is requi	reu	
BMP = Best Management Practice(s)					
If the answer to both questions is "	no", this section do	es not n	eed to be completed.		
Compliance criteria					
a. Operating Permit number: OP-20	17-0073				
Have the Operating Permit requirem			⊠ Yes □ No		
b. Is the required nitrogen BMP in place		ng? ⊠ Yes □ No			
Any "no" answer indicates None					
				amded replaced or its us	

**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, 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.

	-
	MH
1 3 3 1	BA IT
	T 4 ST

### SKETCH PLAN

Application Rombs

Tax Parcel Numbe

Plaase be as complete as possible. Include all of the liems listed below where applicable.

### GENERAL CHECKLIST

E j-scalo
[ j-north arrow
[ j-lot dimensions
[ j-side tot netten
[ j-side tot netten
[ j-scalo atten
[ j-scalo atten
[ j-scalo atten
[ j-drainfield location
[ j-drainfield location
[ j-drainfield location
[ j-drainfield location
[ j-litt & grading limits
[ j-vegatation alteration limits

#### WATER RESOURCE CHECKLIST

[]-location of floodway
[]-location of flood trings
[]-location of modificity
high water level (OHWL)
[]-location of present
water line
[]-sotheck from OHWL
[]-sotheck from OHWL
[]-sating local drainage
[]-location of welland areas.

Scale of Diagram : Linch

Drawing By A WY Them CE

Date of Drawing: 4/28/18

North Dispersy Line a Dissersing

To 1500 gollon tonk

Office Building

Restrount 18ac Just 18ac J

Ozark Court

### 'SECTION 13: Forms and Reference $\ \blacksquare\ 13\text{-}53$

Parcel number:	System status: Compliant Noncompliant (as determined by this form)
Tank Integrity and Safety Compliance - Compliance  Compliance Issue #2 of 4  Light Reason for observation	e Inspection Form for Existing SSTS
Date of observation:  This form expires on (three years):	
Compliance questions/criteria: (Required)  (Check the appropriate box)  Page the existent consist of a seepage pil*, Yes	Verification Method**: (Optional)  (Check the appropriate box)  ☐ Probed tank bottom
cesspool, drywell, or leaching pli?  Do any sewage tank(s) leak below lheir  Yes	☐ Observed low liquid level ☐ Examined construction records
designed operating depth?  If yes, identify which sewage tank leaks.  Any "yes" answer indicates that the system is falling to protect ground water.  * Seepage pits meeting 7080.2550 may be compliant if allowed	Examined empty (pumped) tank  Probed outside tank for "black soil"  Pressure/vacuum check  Other:
in ordinance by local permitting authority.	No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.
Safety Check  1. Are maintenance hole covers damaged, cracked, or appeared to be si 2. Were maintenance hole covers replaced in a secured manner (e.g., so 3. Was secondary access restraint present (safety pan, second cover, or 4. Are other safety/nealth issue present?  Explain:  *System is an imminent threat to public health and safety.	xews replaced)?
Certification This form is to be completed and attached to the Summary Form of the Inspection Form for Existing Subsurface Sewage Treatment System completed by an inspector, maintainer, or service provider. Completed to days.  Property owner name(s): Scandia Four Froperty address: 31050 Ozow K Ave Property owner's address (if different): P. D. Box 254 County: Property owner's address (if different): Pro	Tim Schneid H EN Schneid H EN Scandia, Mn Berphone:
I hereby certify that I personally made the observations, intercretations, correct.	and conclusions reported on this form and that they are
Name: Keith Valento  Business license name and number: Smille's Secusor  Name of local unit of government: City of S  Signature: I Sylvento	Certification number:
www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • 1TY	651-282-5332 or 800-657-3864 • Available in alternative formats  Page 3 of 8  09/09

### SECTION 13: Forms and Reference 🔳 13-53

Tank Integrity and Safety Compliance - Compliance Inspection Form for Existing SSTS  Compliance Issue #2.of 4  Place of observation:	Parcel nur	mber:		_ System status: ☐ Compliant ☐ Noncompliant (as determined by this form)	
Compliance Issue #2.of   Date of observation:   Compliance   Superior   Compliance	Tauls !	ntogrity and Safaty Ca	mnliance Comolia	nce Inspection Form for Existing SSTS	
Date of observation:  This form expires on (three speed)  Compliance questions/criteria: (Required) (Check the appropriate box)  Does the system consist of a seepage pit.			Inpliance - complia	l -	
Compliance questions/criteria: (Required) (Check the appropriate box) Compliance questions/criteria: (Required) (Check the appropriate box) Combet he span consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box) Combet he system consist of a seepage pit.   Yes   Mo   Check the appropriate box   Check the a		11/24/11/	D for absorbed	Campliance Insp.	
Compliance questions/criteria: (Required)  (Chack the appropriate box)  Does the system consist of a seepage pit!   Yes   Mo   Chack the appropriate box)  Do any sewage tank(s) lask below their   Gespin pit?   Yes   Mo   Chack the appropriate box)  Do any sewage tank(s) lask below their   Gespin pit?   Yes   Mo   Chack the appropriate box   Chack the appropriate b		Solitation.		Son Con Programme	
Check the appropriate box	This form	expires on (three years):	9410		
Do any sawage tank(s) leak below their	(Che	ck the appropriate box)		(Check the appropriate box)	
Do any sawage tank(s) leak below their designed operating depth?    Yes, itanify which sewage tank leaks.   Probed outside tank for "black soil"   Probed outside tank for "black soil"   Pressure/vacuum check   Pressure/vacuum check   Other:  * Seepaga pita meeting 7080.2550 may be compilant if allowed in ordinance by local permitting authority.  * Seepaga pita meeting 7080.2550 may be compilant if allowed in ordinance by local permitting authority.  * Seepaga pita meeting 7080.2550 may be compilant if allowed in ordinance by local permitting authority.  * No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.  * Safety Check  1. Are maintenance hole covers dameged, cracked, or appeared to be structurally unsound?  2. Were meintenance hole covers replaced in a secured manner (e.g., screws replaced)?  2. Were meintenance hole covers replaced in a secured manner (e.g., screws replaced)?  3. Was secondary access restraint present (safety pan, second cover, or safety netting) – highly recommended.   Yes   No    4. Are other safety/health issue present?  Explain:  *System is an imminent threat to public health and safety.  *Certification  This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compilance in paper for Existing Subscurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be nompleted by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.  *Property owner name(s):	Does the	system consist of a seepage pit*,	Yes No		
If yes, identify which			TYes DINO		
If yes, identify which sewage tank leaks.    Probed outside tank for 'black soli'   Pressure/vacuum check   Prosent water.   Pressure/vacuum check   P	designed	operating depth?	1 7 7 7 7		
Any "yes" answer Indicates that the system is falling to protect ground water.  Seepage pile meeting 7080.2650 may be compliant if allowed in ordinance by local permitting authority.  "No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.  Safety Check  1. Are maintenance hole covers damaged, cracked, or appeared to be structurally unsound?  2. Were maintenance hole covers replaced in a secured manner (e.g., screws replaced)?  3. Was secondary access restraint present (safety pan, second cover, or safety netting) – highly recommended. Yes No  4. Are other safety/health issue present?  Explain:  "System is an imminent threat to public health and safety.  Certification  This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector, maintainor, or service provider. Completed form must be submitted to the local unit of government within 15 days.  Property owner name(s):  Property owner name(s):  Property owner name(s):  Property owner saddress: AIISD OZOCK CHANGE Completed on this form and that they are correct.  Name:  Certification number:  Sample Service Service Service  Certification number:  Certification number:  Sample Service  Certification number:	If yes, ide	ntify which		_	
* Seepage pits meeting 7080.2650 may be compliant if allowed in ordinance by local permitting authority.  * Seepage pits meeting 7080.2650 may be compliant if allowed in ordinance by local permitting authority.  * No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.  Safety Check  1. Are maintenance hole covers damaged, cracked, or appeared to be structurally unsound?  2. Were maintenance hole covers replaced in a secured manner (e.g., screws replaced)?  3. Was secondary access restraint present (sefety pan, second cover, or safety neiting) – highly recommended.  4. Are other safety/health issue present?  Explain:  *System is an imminent threat to public health and safety.  *Certification  This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.  Property owner name(s):  **Property owner name(s):  **Property owner name(s):  **Property owner name(s):  **Property owner phone:  **Property owner name(s):  **Property owner phone:  **Property owner name and number:  **Description	sewage to	ank leaks.	es le falling to protect		
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in ordinance by local permitting authority.  "No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.  Safety Check  1. Are maintenance hole covers damaged, cracked, or appeared to be structurally unsound?  2. Were maintenance hole covers replaced in a secured manner (e.g., screws replaced)?  3. Was secondary access restraint present (safety pan, second cover, or safety netting) – highly recommended.  4. Are other safety/health issue present?  Explain:  "System is an imminent threat to public health and safety.  Certification  This form is to be completed and attached to the Summary Form of the Minnesola Pollution Control Agency's (MPCA) Compiliance Impection Form for Existing Subsurface Sewage Treatment Systems. Observations, Interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.  Property owner name(s):  County:  Property owner name(s):  Property owner's address; (If fullerent):  Property owner's address; (If fullerent):  Property owner phone:  I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.  Name:  Certification number:  Certification number:  Certification number:  Certification number:  Certification number:  Signature:  Date:  Signature:  Date:  Signature:  Date:  Signature:  Certification or does it molecularity. In example the observations are provided on this form and that they are			compliant if allowed	Other:	
Safety Check  1. Are maintenance hole covers damaged, cracked, or appeared to be structurally unsound?  2. Were maintenance hole covers replaced in a secured manner (e.g., screws replaced)?  3. Was secondary access restraint present (safety pan, second cover, or safety netting) – highly recommended.	in ordin	ge pile meeting rood,2000 may be nance by local permitting authority	·	The state of the s	
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2. Were maintenance hole covers replaced in a secured manner (e.g., screws replaced)?  3. Was secondary access restraint present (safety pan, second cover, or safety netting) – highly recommended.			cracked or appeared to be	e structurally unsound?	
3. Was secondary access restraint present (safety pan, second cover, or safety netting) — highly recommended.	7. Are i	maintenative fiole covers renlace	d in a secured manner (e.g.	. screws replaced)? ☐ No*	
4. Are other safety/health Issue present?  Explain:  *System Is an Imminent threat to public health and safety.  Certification  This form is to be completed and attached to the Summary Form of the Minnesola Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.  Property owner name(s):  Property owner name(s):  Property owner's address; (if hillcrent):  Property owner's address; (if hillcrent):  Property owner phone:  I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form-and that they are correct.  Name:  Certification number:  Certification number:  Date:  Signature:  Date:  Date:	2. 4401	e manuenance nois covers replace	it (safety nan, second cover,	or safety netting) - highly recommended. Yes No	
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Certification  This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, Interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.  Property owner name(s):  Property owner address: SILSO OZOCK CHN SCOLLOUGH. Property owner's address (if fillerent): POBOX SUSCIONAGE. Property owner phone:  I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.  Name: Signature: Certification number: Signature: Date: Signature: Date: Signature		PO-100			
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This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.  Property owner name(s):  Property owner name(s):  Property owner's address: \$\frac{\text{MISO OZOCK C+N SCOCHOULA, WW}}{\text{Property owner phone:}}  Property owner phone:  I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.  Name:    Maine of local unit of government:   CIH SCOCHOULA, SCOCHOU	Certifi	ication			
County: Property owner phone:  I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.  Name: Keith Valento Certification number: 10457  Business license name and number: 2438 - Smittles Sever Service (Dosser Permit Name of local unit of government: City of Scandie  Signature: Date: Stills	This form Inspecti complete 15 days. Property	n is to be completed and attached on Form for Existing Subsurfaced by an inspector, maintainer, or owner name(s):	to the Summary Form of the Sewage Treatment Sysservice provider. Complete	ne Minnesola Pollution Control Agency's (MPCA) Compliance tems. Observations, Interpretations, and conclusions must be ad form must be submitted to the local unit of government within	
Name: Keith Valento Certification number: 10457  Business license name and number: 2428 - Smittes Sever Service (1855) Pempil  Name of local unit of government: City of Scandia  Signature: Date: Still 8		owner's address (If fillerent): PL	Property o	Steer recommendation of the state of the sta	
Name: Keith Valento Certification number: 10431  Business license name and number: 2438 - Smilles Sever Service (1955) Pempil  Name of local unit of government: City OF Scandia  Signature: Date: 51118	I hereby	certify that I personally made the	observations, interpretation	ns, and conclusions reported on this form and that they are	
Name of local unit of government: CITY OF Scandia  Signature: Date: 51118	Name:	Keith Val	ento		أمها
Signature: Date: 5/1/8			Adl - 2W	HIRS GETTEL SEIVICE L'SSEE	- 1
Available in alternative formats	2000 - 1000 CO 1000	10 1	City or	Date: 5/1/18	-
				Available in alternative formate	•

UNIVERSITY OSTOP OF MINNESOTA

# OSTP Soil Observation Log

Project ID:

v 04.06.2017

Consistence 4/28/2018 Friable Friable Friable (Date) |------ Structure-------04/28/18 Organic Matter 14.032.20.43.0009 Elevation: Moderate Moderate Grade Weak Bedrock Date Slope shape Observation Type: (License #) 7668/3886 Blocky Shape Platy Platy Alluvium hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws. Legal Description/ GPS: Slope %: Toe Slope Indicator(s) Redox Kind(s) Foot Slope □ Loess Shoulder Back/Side Slope Sunny Soil survey map units: Mottle Color(s) Jim Schneider Matrix Color(s) 7.5YR 4/4 7.5YR 4/6 7.5YR 3/3 Soil parent material(s): (Check all that apply) Summit Frag. % Comments No mottling in boring. Rock <35% <35% <35% Weather Conditions/Time of Day: \_andscape Position: (check one) (Designer/Inspector) Amy Thompson Client/ Address: Fine Sandy Loam Observation #/Location: Fine Sandy **Texture** Loam Vegetation: Depth (in) .02-09 4-60" 0-4"

## AT Septic Inspections & Design Inc. Disclaimer Sheet Relative to Subsurface Sewage Treatment System Compliance Inspection

- 1. This inspection/report is being performed for only the seller/owner of the property on which the septic system located; there is no contract between AT Septic Inspections & Design Inc. and any other party except seller/owner unless otherwise noted. In such case that the buyer of the property is paying for the inspection, the contract is between only the buyer of the property and AT Septic Inspections & Design Inc.; there is no contract with any other party unless otherwise noted.
- 2. AT Septic Inspections & Design Inc. has not been retained to warranty, guarantee, or certify the proper functioning of the system 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 a septic system, as well as the inability of AT Septic Inspections & Design Inc. to supervise or monitor the use or maintenance of the system, the report shall not be construed as a warranty by AT Septic Inspections & Design Inc. that the system will function properly for any particular party for any period of time.
- 3. Minimum Compliance Inspection requirements relative to this inspection and this report include <u>only</u> verification that the septic system 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. AT Septic Inspections & Design Inc. does not inspect basement ejector pumps or exterior lift tank pumps and associated components as these are considered to be maintenance items. 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. AT Septic Inspections & Design Inc. cannot guarantee that the information given to them by the last occupants of the building prior to inspection relative to back-up is accurate. Some persons may attempt to hide or conceal signs of previous back-ups.
- 4. Certification of this system does not warranty future use beyond the date of the inspection. Any system, 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 conditions practices, or unsuitable materials used in constructing the system; The system can also simply stop working because of its age. The average life expectancy of a system that has been properly designed, 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. Some parts of the system such as alarms, switches, pumps, and filters will most likely have to be 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 system is protective of public health and safety and is protective to groundwater at the date and time the inspection was performed. This inspection is not intended to determine if the system was originally designed or installed to past or present MPCA or other Local Government Unit code requirements. This inspection is not intended t determine if the system 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 system due to the addition of bedrooms, occupants, etc. In addition, this inspection is not intended to determine the quality of the original systems design, the quality of the construction practices used while installing the system, or the quality of the materials used in constructing the system.
- 6. Winter Work: Client (persons paying for inspection) understands that inspections conduced during winter weather (approximately November 1st through April 1st) are more difficult to perform because of possible snow cover and/or ground frost. System components such as tanks, maintenance covers, tank inspection pipes, subsurface distribution medium inspection pipes, and soil treatment area 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. AT Septic Inspections & Design 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, client understands that because of the aforementioned considerations, the same level of standards may not be possible.
- By accepting this report, the client understands that AT Septic Inspections & Design Inc. will not be responsible for any monetary damages exceeding the fee of the service provided.

# AT Septic Inspections & Design Inc. Amy Thompson 49861 Government Rd Rush City MN 55069 320-980-0235 Lic.# 7638/3886

Date: 4/28/2018

Address: 21050 Ozark Ave Scandia

PID#: 14.032.20.43.0009



Bar/ Restaurant



Tanks behind the bar



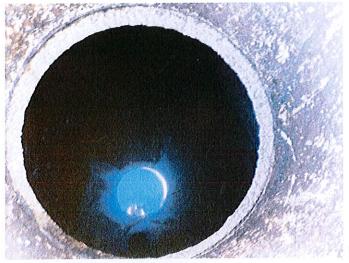
Tanks



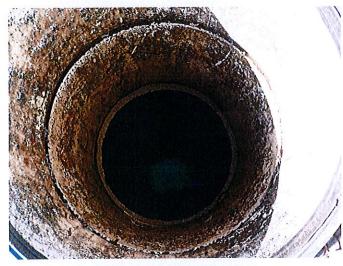
1st tank & 2nd tank



Inside the 1st 1500 gallon septic tank



Inside the 1st tank



Inside of the 2<sup>nd</sup> 1500 gallon tank



inside of the 2nd tank



Mosing chamber for the nibbler



Inside of the dosing chamber

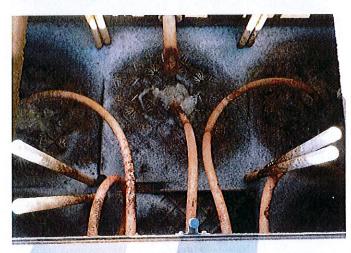


nibbler

Inside of the doing chamber for the



Nibbler system 6,000 gallon tank



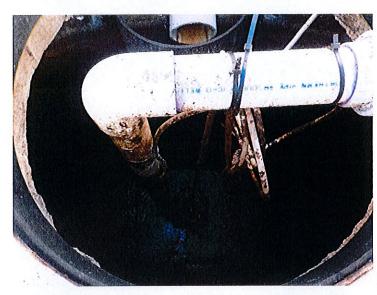
Inside of the nibbler unit



Inside of the nibbler tank



Clarifier tank



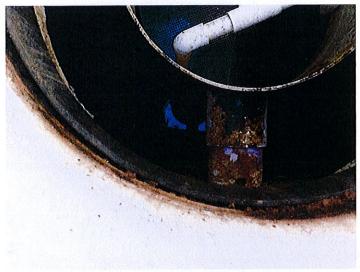
Inside of the clarifier tank



Filter chamber



Inside of the filter chamber



Inside of the filter chamber



1500 gallon pump tank



Inside of the pump tank



Inside of the pump tank



System area



System area and soil boring

### Office Building Tanks



1<sup>st</sup> 1500 gallon septic tank at office

building



Inside the 1st septic tank



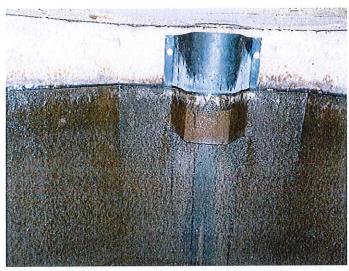
Inlet baffle



Outlet baffle



2<sup>nd</sup> 1500 gallon tank



Inlet baffle of 2<sup>nd</sup> 1500 gallon tank



Outlet baffle of 2<sup>nd</sup> 1500 gallon tank



floor of the 2<sup>nd</sup> 1500 gallon tank



1000 gallon pump tank



Inlet of the 1000 gallon pump tank



Outlet side of the 1000 gallon pump

tank



Pump inside of the 1000 gallon pump

tank



# WASHINGTON COUNTY

### PLANNING DEPARTMENT

GOVERNMENT CENTER

14900 61ST STREET NORTH, P.O. BOX 6 • STILLWATER, MINNESOTA 55082-0006 612/779-5443

Robert J. Lockyear Planning Coord

Allan R. Goodman : Building Officia

November 3, 1988

Michael Peterson 18911 Newgate Avenue N Marine on St. Croix, MN 55047

Dear Mr. Peterson:

A review of the soil testing on Lots 1 - 9, Block 1 and Lots 1 - 3, Block 2 for the proposed Hawkinson's commercial park addition in Section 14 of New Scandia Township, was done on October 27, 1988. The soil testing done by Earth Science Company indicates that suitable soils exist on all the parcels, for long term sewage treatment, with the exception of Lot 4, Block 1. There is a proposal to do some cutting and filling on that parcel, which would appear to be a suitable solution to the problem. At this time that parcel would not be suitable, and until the fill is properly placed, allowing for natural settlement, and final testing, final suitability will not be known.

Complete testing has been done on each of the parcels, and no further testing will be required to install drainfield systems in the specific tested locations. Due to soil limitations, there must not be any excavation, or trafficing of any sort, across the tested areas.

If you have any questions regarding the above matter, please contact me.

Sincerely,

Allan R. Goodman

Building Official

alla Dovelan

ARG/mlp



### EARTH SCIENCE 20620 JUNO AVE. NO.

20620 JUNO AVE. NO. FOREST LAKE, MN 55025 433-2890

### PERCOLATION TEST DATA

	HAWKIL	15045 COMME	ERICAL PARK ADDITION
TEST HOLE LOCAT	ION: cora	- BLK	NO.#NO.#
TEST HOLE PREPA	RED:	OCT 1988	BOTTOM DEPTH 42 "
TEST HOLE DIAME	TER:6"_	i.	
TEST HOLE SOIL	PROFILE:		TEXTURE:
0-5"	gentlevingrandssämsentenninnede		DICK-BRY. FIHE SALLOY LOAM
5", 42"	11/	,	REDBRH. SHURY LOAM + ROC
		*	
			,
PERCOLATION TES	TS BY: H.WEA	WER - MPCA.#	
START:	1A OCT 1988		AM PM
		. 4.	
TIME: 2:00	6"IN. H20	DROP LEV	EL REMARKS:
		1	
7			
<i>⊋:00</i>			
J: 30		3 " 4	
	_	3 "	ner.111
2: 30	-	3,"	NEF.II
2: 30 2: 34-		_	nex111
2: 30 2: 34 3: 04 3: 0 7		3,4	
2: 30 2: 34 3: 04		_	
2: 30 2: 34 3: 04 3: 0 7		3,4	

AVERAGE RATE: 40 MPI.



# EARTH SCIENCE 20620 JUNO AVE. NO.

20620 JUNO AVE. NO. FOREST LAKE, MN 55025 433-2890

### 

	HAWKIL	ISOUS COMMERC	CICAL PARK ABOITION
TEST HOLE LOCAT	ION: COT Z	- BLK 1	NO. # 22
TEST HOLE PREPA	RED:	OCT 1988	BOTTOM DEPTH 42""
TEST HOLE DIAME	TER:6"	h	w * y
TEST HOLE SOIL	PROFILE:	. ТІ	EXTURE:
0-6"	***************************************		DRIC. BRH. FILLE SAHOY born
6"- 12"			REDBRH SAHOY LOAM & RECEIS
12" 24"		:.	RED BRH. SAUDY CINY LOKE
24"- 42"		***	LT-KED BRLI. LAMY JANO
PERCOLATION TES	TS BY: H.WEA	WER - MPCA.#.	
START:	18 OCT 1988		PM
TIME: 2:05	6"IN. H20	DROP LEVE	L REMARKS:
2:05			
J: 35		13."	
2:38	_		respire
3:08		116	
3; /0			KEFII(
. 3:40		1 16	
	,		

AVERAGE RATE: 22 MPI.

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	Ev.				# .: di.			13.3 14.2. <u>-</u> .	E E F		3.4
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		Time daily	4"	1	Sandy		TIME	Sardy		fine.	
					וישטום						
		Red brown Fine sandy		1 loan	(Clay)		Red	Sindy	<u> </u>	hight	red.
		Troam.		Thim	1).		Imm	and		hod w	fine.
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	10	Light red									
		brown fine loamy sord.				200					
			<b>1</b>	ê					-		
	37"										
		Red brown								į	
1000	·	fine Sandy Ibam, Sand mixed.									
	Marston silver	miked.				) 					
		:							13 - 10, 24		
						esseries Sir	:			i	- 1
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		;					•			Red b	roun
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						60	; :			rock.	Series Series
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		siltu clau		וזוכנוט	ic not					1	
	30"	loam Iron stains and muttles END							B'0"	END	

