

520 Lafayette Road North St. Paul, MN 55155-4194

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

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): 4/2/2019	
	pliant – Notice of Noncompliance de 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 to Tank Integrity (Compliance Component #2) – Failing to protect groundward Other Compliance Conditions (Compliance Component #3) – Failing to protect groundward Soil Separation (Compliance Component #4) – Failing to protect groundward Operating permit/monitoring plan requirements (Compliance Component	hreat to public health and sarety ater protect groundwater water
Property Information Parcel ID# or Sec/Twp/Ra	ange: 1002921210013
	n for inspection: Property Transfer
	's phone:
or	
DWINE STEDIESE HAUVE.	sentative phone:
Local regulatory authority: Washington County Regula	atory authority phone: 651-430-6655
Brief system description:	
Comments or recommendations:	
2 septic tanks to gravity drainfield. As of 4/2/19 this entire system is compliant.	
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 unknown possible abuse of the system, inadequate maintenance, or future water usage.	lown bonding daming by
Inspector name: Dave Brown Certific	cation number: C9370
Business name: David R Brown Lie	cense number: L3649
Inspector signature: 8-12-15	Phone number: 651-788-3296
Necessary or Locally Required Attachments	
Necessary or Locally Required Attachinents	
Forme r	per local ordinance
 Soil boring logs System/As-built drawing □ Other information (list): 	per local ordinance

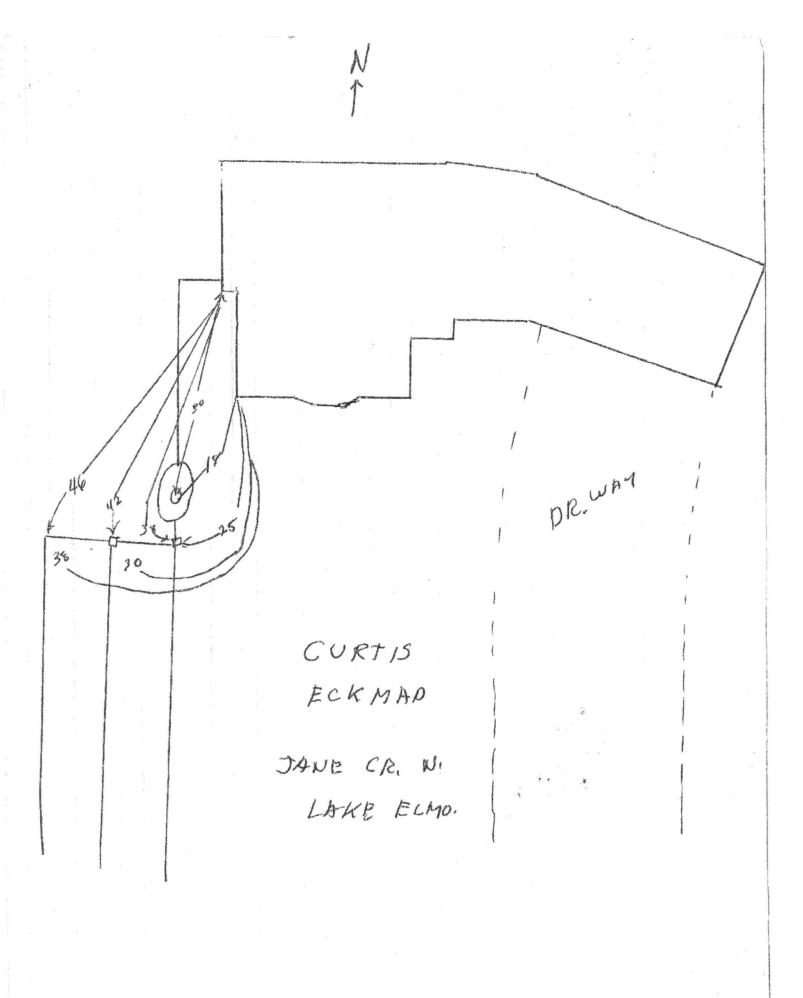
Prop	perty address: 9387 Jane Circle N Lake	e Elmo, MN	Inspector initials/Date: DB 4/2/2019 (mm/dd/yyyy)
1.	Impact on Public Health – C	Compliance compon	nent #1 of 5
44-97-100-	Compliance criteria:		Verification method(s):
	System discharges sewage to the ground surface.	☐ Yes ☒ No	 ☑ Searched for surface outlet ☑ Searched for seeping in yard/backup in home
,	System discharges sewage to drain tile or surface waters.	☐ Yes ⊠ No	 ☐ Excessive ponding in soil system/D-boxes ☐ Homeowner testimony (See Comments/Explanation)
	System causes sewage backup into dwelling or establishment.	☐ Yes ☒ No	"Black soil" above soil dispersal system System requires "emergency" pumping
	Any "yes" answer above ind system is an imminent threat health and safety.		☐ Performed dye test ☐ Unable to verify (See Comments/Explanation) ☐ Other methods not listed (See Comments/Explanation)
	Comments/Explanation: Never been an issue.		
2.	Tank Integrity - Compliance	component #2 of 5	
	Compliance criteria:		Verification method(s):
	System consists of a seepage pit, cesspool, drywell, or leaching pit.	☐ Yes ☒ No	☑ Probed tank(s) bottom☑ Examined construction records
	Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance.		 Examined Tank Integrity Form (Attach) Observed liquid level below operating depth
	Sewage tank(s) leak below their designed 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)
	Any "yes" answer above ind system is failing to protect g	icates the roundwater.	Other methods not listed (See Comments/Explanation)
3.	Other Compliance Conditio		nponent #3 of 5 ed, or appear to be structurally unsound. ☐ Yes* ☑ No ☐ Unknown
	 Other issues (electrical hazards, etc. *System is an imminent threat t 	to immediately and adv to public health and saf	
	Explain:		
	c. System is non-protective of groun *System is failing to protect gro Explain:		ons as determined by inspector . ☐ Yes* ☐ No

Property address: 9387 Jane Circle N Lake E	lmo, MN		Inspector initials/Date:	DB 422/2019
				(mm/dd/yyyy)
4. Soil Separation - Compliance co	omponent #4 of 5			
Date of installation:	Unknown		cation method(s):	
(mm/dd/yyyy)	LI OTIKIOWII			
Shoreland/Wellhead protection/Food beverage lodging?	☐ Yes ☐ No	observ	servation does not expire. Pri ations by two independent pa site conditions have been alt	urties are sufficient,
Compliance criteria:	ng tid kan kata kata pantan katanan ka	require	ments differ.	
For systems built prior to April 1, 1996, and	⊠ Yes □ No	Conducted soil observation(s) (Attach boring logs)		
not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:		∑ Two previous verifications (Attach boring logs) —		
		☐ Not applicable (Holding tank(s), no drainfield)		
Drainfield has at least a two-foot vertical		Unable to verify (See Comments/Explanation)		
separation distance from periodically saturated soil or bedrock.		☐ Oth	er (See Comments/Explanation)	
Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:	⊠ Yes □ No	Comm	ents/Explanation:	
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 or V systems built under 2008 Rules (7080. 2350 or 7080.2400 (Advanced Inspector		A Bott	om of distribution media	24"-36"
License required)		B. Peri	odically saturated soil/bedrock	>72"
Drainfield meets the designed vertical		C. Syst	tem separation	>36"
separation distance from periodically saturated soil or bedrock.		D Ren	uired compliance separation*	36"
Any "no" answer above indicates t	he system is	remove the control of the second of the seco	e reduced up to 15 percent if	
failing to protect groundwater. 5. Operating Permit and Nitroger	BMP* – Compli		ponent #5 of 5	Not applicable
Is the system operated under an Operating	Permit?	es 🗌 No	If "yes", A below is require	red
Is the system required to employ a Nitroge	n BMP?	es 🗌 No	If "yes", B below is require	red
BMP = Best Management Practice(s)	specified in the syste	m design		
If the answer to both questions is "i	no", this section a	loes not n	eed to be completed.	
Compliance criteria			de la completa de come ma della quantificación de completa por por della generalizar a come della gibbi com record	
Operating Permit number:			☐ Yes ☐ No	
Have the Operating Permit requirement			П V П N-	
b. Is the required nitrogen BMP in place		ning'?	Yes No	
Any "no" answer indicates None	compliance.			
Upgrade Requirements (Minn. Stat. § 115.55 discontinued within ten months of receipt of this ground water, the system must be upgraded, re is not falling as defined in law, and has at least its use discontinued, notwithstanding any local Wellhead Protection Areas, or those used in co	notice or within a shorte placed, or its use discor two feet of design soil so ordinance that is more s	er period if re ntinued withir eparation, the strict. This pro	quired by local ordinance. If the s the time required by local ordina en the system need not be upgra ovision does not apply to systems	system is railing to protect ance. If an existing system ded, repaired, replaced, or in shoreland areas,

www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or 800-657-3864 • Available in alternative formats wq-wwists4-31b • 6/4/14

Proposed System Design based on P.C.A. Rules Individual Sewage Treatment System Standards

Number Of Bedrooms: 4	
Tank Size(s): 1500 how 4 1500 Existing	
Number Of Lines: 4 Length Of Lines: 4	
Spacing Of Lines: 6 to 7 feet	
Depth Of Trenches: 24-36" Width of Trenches: 36"	
Depth Of Rock Below Tile: 12 Depth Of Rock Above Tile: 2	
Depth Of Earth Cover Over Rock: 12" Minimum	
Special Conditions: Add (1) 1500 gallon tounk and 50 of	
trench with 12" prock helm pipe or chambers using d	rop box
Type Of Distribution Box: Drup Box	
	+ 4
inspection Well	
Geotextile for Back Fill Soil 12 "minimum."	
Rock Above Pipe 2	
rock Pipe Rock Below / 2	
Pipe	



LOG OF SOIL BORINGS

Redburg Medium SANS & goong SANDY LOOK 54-413 Dark brown Silfboard Red borner Louin - much spacy hoan Red brownsilt 5/5 2/3 1005001 Red brown Black loam 54 4 /3 50 Dark brown load 541 5/3 medium sand - Some grown Red born 54513 Red bisum Sitherm Topsoil JOB 9387 Jane Cinte No. Lake Flows Date: 02-28-06 Red brown Maris Red brown silt SANDY FORM 5425/3 Dark bonus Sward Surals 54413 Red brown Depth in Faet

LOG OF SOIL BORINGS

BOR	ING NO.	BOR	ING NO Z	BORI	NG NO. 3	BORI	NG NO. 4
DEPTH IN PRET	DESCRIPTION	DEPTH IN PERT	DESCRIPTION	DEPTH IN PERT	SOIL	DEPTH IN PERT	SOIL
0	DARKBOOWN	0	DAKKIBOWN	0	DARE BHOWN	0	DARKBHUN
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and a f	4 1	6"			(-	
7			BLOWN KINE				
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9"	Stiry coam				Brown xine	9"	
	Brown.	10"		-	SILTY LOAM	-	Brown Rive
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	# ROCKS	-	200045120		REDDISH - BHUM FINE		
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9:00		8:00		0-0"		9-0.	

BHO BORING 1

240 BORING Z

CHO BORNES

LUD BORING 4

RECEIVED

JAN U 2 1996

Minnesota Pollution Control Agency (MPCA) Recommended Inspection Form for Existing Septic Systems

Suggested (7/97)

CITY OF LAKE ELMO		
DATE OF INSPECTION: 12/18/9	7 TIME: A.M WEATHER CONDITIONS: P. Clard y 45 ISTS PERMIT NUMBER:	
REASON FOR INSPECTION	IDENTIFICATION	
() Bedroom addition	Property Owner(s) Cost Eckman Telephone (12) 735-1356	Ð
	Site Address 9387 Jane Circle No. City Lake Elma	
() Variance		
() Complaint	Zip Code 55082 Unit of Government Lake ElAo	
Property Transfer (huyer or seller)	Fire No Township Name	
() Other Area with local ordinance (N)	Is system opened up? Y 🕟 Full Partial Contractor/Installer name:	
Area with local ordinance (128)		
Water neing enpliances: [16:10]hes Wash	Year System Built: 1989 John What reason: Stroutinely basement backup sluggish plumbing other	
(Clark and a state assess system com	conent and indicate location on the sketch on back of form)	8- 14
	onent and indicate location on site sketch on back of form). Material: Soil Treatment System: Other:	
Tank(s): Tank(s) ★Septic tank Fiberglas		
Aerobic tank Plastic	zrock trench alternative system (identify type) experimental system (identify type)	
	chamber trench other (identify type)	
Holding tank	seepage oed at-grade	
		/
Tank(s) Size: 1500 gals Soi	treatment area size(s): 500 csq. ft. Depth of system bottom from grade: UNKADWA Well Setback: 70)
	Upgrade Upgrade Is there or has there ever been any evidence of: Upgrade Indicate Upgrade Upgrade Indicate Upgrade Indicate Upgrade Upgrade Indicate Upgrade Upgrade Indicate Upgrade Indicate Upgrade Upgrade Indicate Upgrade Upgrade Indicate Upgrade Upgrade Upgrade Indicate Upgrade Upgr	Ipgrad 10 mos 10 mos 10 mos 10 mos 10 mos LUG*
THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IN COLUMN	the above question based on type of system, the system is failing.	A Self of Street
STATUS OF THE SYSTEM		1 1 1 5
Based on the compliance inspection	conducted above the system status is in Compliance, the	refore,
this document is Cort C	conducted above the system status is	
(Choose: Certi	icate of Compliance OR Notice of Noncompliance	1 7664
Name of the Control o		
CERTIFICATION	War and Town the Constitute of	etated
I hereby certify as a state of Minnesot	a licensed Inspector, or Qualified Employee that my observations recorded are accurate as this date for the site s	naicu
above. I hereby certify that all inspec	tion work was completed according to applicable requirements. No determination of future hydraulic performance who have a fitter and a protection of the gratery and/or indequate	act cal
be made due to unknown conditions d	uring system construction, future water usage over the life of the system, abuse of the system, and/or inadequate	¢ .
maintenance all of which will adverse	iy affect the life of the system.	
Viscontaile and Calaba F	Phone No (1) 405 8308	
inspector's name(print)	1718 Address 2300 Loverson And C #274 Mendoto Heli had	ť
License and/or Registration Number	1718 Address 2300 Lexington Aves. #324 Mendoon Height.	34
Signature	Date /K/GU/	-



STANDARD SYSTEM DESIGN INDIVIDUAL SEWAGE TREATMENT SYSTEM

PUBLIC HEALTH & ENVIRONMENT 14949 62nd Street North, PO Box 6, Stillwater MN 55082-0006 651/430-6688 OR 651-430-6655 FAX 651/430-6730

9 4 Ad. A 4 4	Monigas 100	2921210013
Job Site Address 938-7 June Circl		A
City or Township Lake Elmo		
Use of Building Single tomily home	c · ·	•
Number of Bedrooms		
Design Flow Rate 600 Perc Rate 1, 2	7. Landslope 0-/	Percent
	Gellons Lift Station Tank Size	Gallons
Type of System (standard, at grade, or rockless pipe add 20	16) Standard or chain	
System Size 762 -Square Peet 254	-Lineal Feet 36"	-Trench Width
Depth of rock below pipe /2"	Depth of rock above pipe 2	".
Minimum Depth of Trench	MAXimum Depth of Treach From Existing Grade	36 Inches
From Existing Grade Recommended Number of Trenches	Recommended Length of Trenche	Friting + 50 fro
Trench Spacing Measured Center to Center 6 +2	Zango no senso property compression de la compression della compre	Feet
Any Other Special Conditions Existing 608 5 90		nave fector
50 limed fret		\$
IF PRESSURE DISTRIBUTION IS USED, COMPLETE This Design must be accompanied by a site plan that clearly she	* .	
 Use an appropriate scale and indicate direction by trie of a: Show ALL property boundaries, rights-of-way, essentents, Also be remained. 	north acrow. wetlands. If necessary, an enlarged de	
 Use an appropriate scale and indicate direction by use of a season of a seaso	north acrow. wetlands. If necessary, an enlarged de	
 Use an appropriate scale and indicate direction by trie of a: Show ALL property boundaries, rights-of-way, essentents, Also be required. Show location of house, garage, driveway and all other imp 	north acrow. wettends. If necessary, an enlarged de revenuests existing or proposed.	
 Use an appropriate scale and indicate direction by use of a scale and indicate direction and indicate and indicate direction by use of a scale and indicate and indicate	north acrow. wettends. If necessary, an enlarged de revenuests existing or proposed.	
 Use an appropriate scale and indicate direction by trie of a season of the season of th	north acrow. wethends. If mecessary, an enlarged de revenuents existing or proposed. ply lime).	
 Use an appropriate scale and indicate direction by trie of a season of the season of th	north acrow. wethends. If necessary, an enlarged denovements existing or proposed. ply lime). cy (PCA) Certified Professional.	
 Use an appropriate scale and indicate direction by trie of a season of the season of th	north acrow. wetlands. If necessary, an enlarged decrevements existing or proposed. ply lime). cy (PCA) Certified Professional. PCA Certification #	tail of the house site may
 Use an appropriate scale and indicate direction by trie of a season of the season of th	north acrow. wethends. If necessary, an enlarged decrevements existing or proposed. ply lime). cy (PCA) Certified Professional. PCA Certification #	tail of the house site may
 Use an appropriate scale and indicate direction by trie of a sea. Show ALL property boundaries, rights-of-way, essentents, Also be required. Show location of house, garage, driveway and all other imp. Show location and leyout of sewage treatment system. Show location of water supply (well and/or community supply location all sethecks and separation distances. This system has been designed by a Pollution Control Agend Designer Name	north acrow. wetlands. If necessary, an enlarged decrevements existing or proposed. ply lime). cy (PCA) Certified Professional. PCA Certification #	tail of the house site may