



Minnesota Pollution Control Agency

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.

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): 4/30/2019

[X] Compliant - Certificate of Compliance
(Valid for 3 years from report date, unless shorter time frame outlined in Local Ordinance.)

[ ] Noncompliant - Notice of Noncompliance
(See Upgrade Requirements on page 3.)

Reason(s) for noncompliance (check all applicable)

- [ ] Impact on Public Health (Compliance Component #1) - Imminent threat to public health and safety
[ ] Other Compliance Conditions (Compliance Component #3) - Imminent threat to public health and safety
[ ] Tank Integrity (Compliance Component #2) - Failing to protect groundwater
[ ] Other Compliance Conditions (Compliance Component #3) - Failing to protect groundwater
[X] Soil Separation (Compliance Component #4) - Failing to protect groundwater
[ ] Operating permit/monitoring plan requirements (Compliance Component #5) - Noncompliant

Property Information

Parcel ID# or Sec/Twp/Range: 1102820410040

Property address: 1720 Riviera Ave S Lake St. Croix Beach, Mn Reason for inspection: Property Transfer

Property owner: Sherrie Carlson Owner's phone:

Owner's representative: Representative phone:

Local regulatory authority: Washington County Regulatory authority phone: 651-430-6655

Brief system description: 2 Septic tanks and 1 lift tank to pressure bed

Comments or recommendations:

System was installed with a permit from Washington County.

Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

Inspector name: Dave Brown Certification number: 9370

Business name: David R Brown License number: 3649

Inspector signature: [Signature] Phone number: 651-788-3296

Necessary or Locally Required Attachments

- [X] Soil boring logs [X] System/As-built drawing [ ] Forms per local ordinance

[ ] Other information (list):

**1. Impact on Public Health – Compliance component #1 of 5**

**Compliance criteria:**

System discharges sewage to the ground surface.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Any "yes" answer above indicates the system is an imminent threat to public health and safety.**

Comments/Explanation:

**Verification method(s):**

- Searched for surface outlet
- Searched for seeping in yard/backup in home
- Excessive ponding in soil system/D-boxes
- Homeowner testimony (See Comments/Explanation)
- "Black soil" above soil dispersal system
- System requires "emergency" pumping
- Performed dye test
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

**2. Tank Integrity – Compliance component #2 of 5**

**Compliance criteria:**

System consists of a seepage pit, cesspool, drywell, or leaching pit. <i>Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth. If yes, which sewage tank(s) leaks:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Any "yes" answer above indicates the system is failing to protect groundwater.**

Comments/Explanation:

**Verification method(s):**

- Probed tank(s) bottom
- Examined construction records
- Examined Tank Integrity Form (Attach)
- Observed liquid level below operating depth
- Examined empty (pumped) tanks(s)
- Probed outside tank(s) for "black soil"
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

**3. Other Compliance Conditions – Compliance component #3 of 5**

- a. Maintenance hole covers are damaged, cracked, unsecured, or appear to be structurally unsound.  Yes\*  No  Unknown
- b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety.  Yes\*  No  Unknown  
**\*System is an imminent threat to public health and safety.**

Explain:

- c. System is non-protective of ground water for other conditions as determined by inspector.  Yes\*  No  
**\*System is failing to protect groundwater.**

Explain:

**4. Soil Separation – Compliance component #4 of 5**

**Date of installation:** \_\_\_\_\_  Unknown  
(mm/dd/yyyy)

**Shoreland/Wellhead protection/Food beverage lodging?**  Yes  No

**Compliance criteria:**

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 separation distance from periodically saturated soil or bedrock.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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:  Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
“Experimental”, “Other”, or “Performance” systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080.2350 or 7080.2400 (Advanced Inspector License required)  Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Verification method(s):**

Soil observation does not expire. Previous soil observations by two independent parties are sufficient, unless site conditions have been altered or local requirements differ.

- Conducted soil observation(s) (Attach boring logs)
- Two previous verifications (Attach boring logs)
- Not applicable (Holding tank(s), no drainfield)
- Unable to verify (See Comments/Explanation)
- Other (See Comments/Explanation)

**Comments/Explanation:**

**Indicate depths or elevations**

A. Bottom of distribution media	12"
B. Periodically saturated soil/bedrock	70"
C. System separation	58"
D. Required compliance separation*	36"

\*May be reduced up to 15 percent if allowed by Local Ordinance.

**Any “no” answer above indicates the system is failing to protect groundwater.**

**5. Operating Permit and Nitrogen BMP\* – Compliance component #5 of 5**  **Not applicable**

Is the system operated under an Operating Permit?  Yes  No **If “yes”, A below is required**

Is the system required to employ a Nitrogen BMP?  Yes  No **If “yes”, B below is required**

BMP = Best Management Practice(s) specified in the system design

**If the answer to both questions is “no”, this section does not need to be completed.**

**Compliance criteria**

a. Operating Permit number: _____ Have the Operating Permit requirements been met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the required nitrogen BMP in place and properly functioning?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Any “no” answer indicates Noncompliance.**

**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.



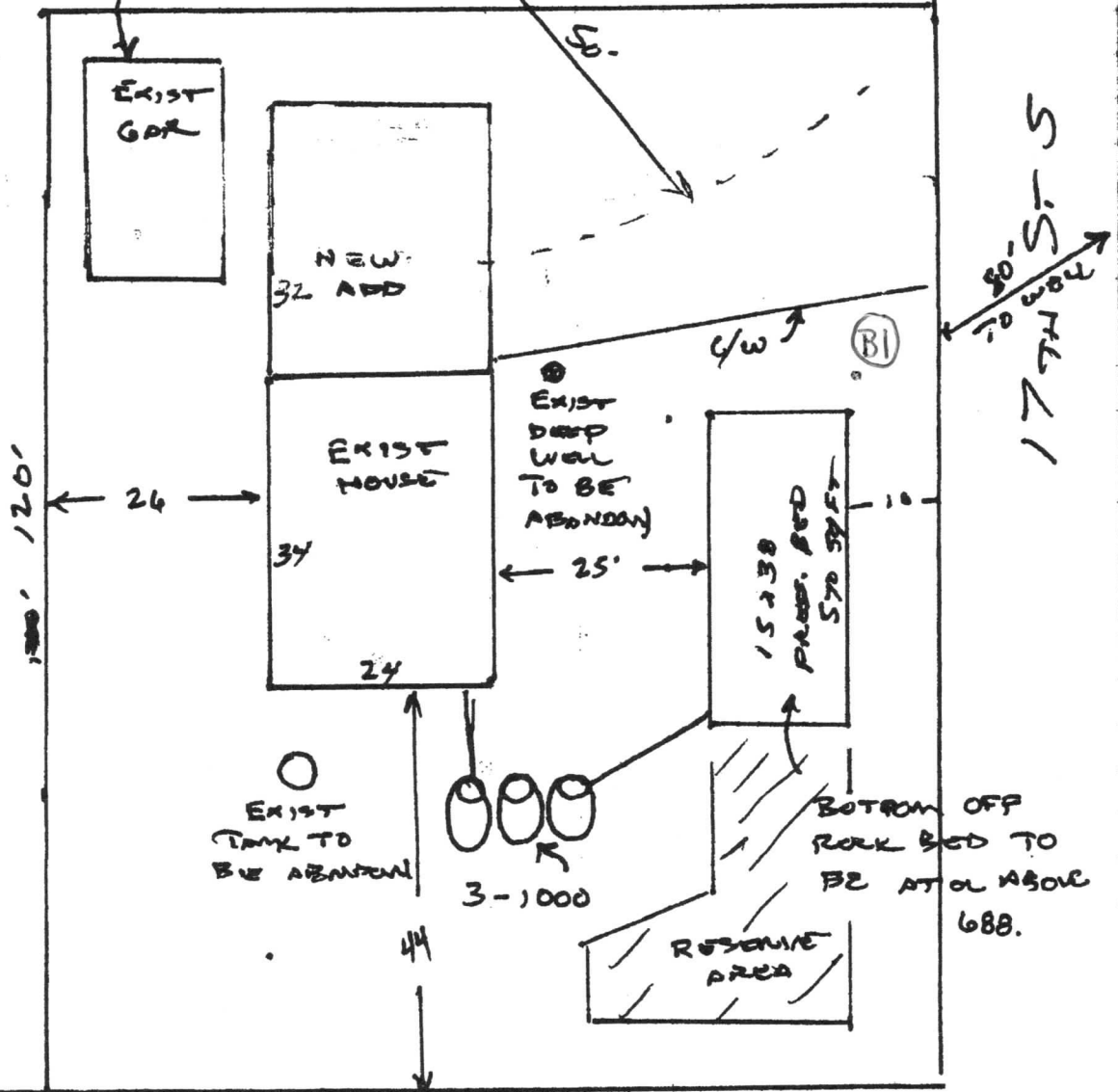
SCALE - 1" = 20' APPROX

SOIL BORING LOG	
(B1)	
0" - 23" = 10YR 2/2	LO. AMPY SAND
23" - 70" = 10YR 3/3	MEDIUM SAND

TO BE REMOVED

16827  
17TH ST  
DEEP WELL

740  
RIVERA  
CITY WATER  
10 WELL



80' ST S  
TO WELL  
17TH ST

RIVERA




**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:	\$230.00
Permit Fee:	\$240.00
<b>Total Fee:</b>	<b>\$470.00</b>
Previous Payment	\$470.00
Balance Due	\$0.00

**Community:** Lake Saint Croix Beach  
**Permit Number:** 2000-06-3  
**Owner:** Bill Carlson  
 1720 Riviera AVE S  
 Lakeland MN 55043-  
**Applicant:** Joe Chaves Excavating

*Mailed 5/16/06* 

*2000-06-3*

**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:** 1720 Riviera AVE S  
**Geo Code:** 11-028-20-41-0040  
**Designer:** Thomas F. Trooien

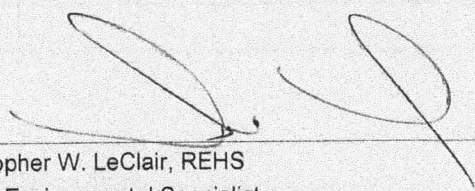
<b>Type of System:</b> Floodplain System	
<b>Design</b>	
System must be installed with a depth restriction of 688 MSL	
<b>Monitoring</b>	
Monitoring Required: <input type="checkbox"/> Monitoring Due Date:	

Design Criteria / Tank Sizes	
Percolation Rate:	15
Depth To Restriction:	0
Land Slope:	3.00%
Flow Rate:	450
Number of Bedrooms:	0
Tank 1:	1000
Tank 2:	1000
Tank 3:	0
Lift Station:	1000

**Authorized Work/Special Conditions**

1. Building sewer can be no closer than 20' to well and must be pressure tested within 50 feet of well.
2. 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.
3. Install individual sewage treatment system as per approved design in area tested and shown on the site plan.
4. Maximum depth to 688 MSL elevation
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: 5/16/2006  
 Permit Expiration Date: 5/16/2007

  
 Christopher W. LeClair, REHS  
 Senior Environmental Specialist

## Individual Sewage Treatment System Inspection Form

<b>Project Address:</b> 1720 Riviera AVE S <b>Community:</b> Lake Saint Croix Beach <b>Owner:</b> Bill Carlson <b>Applicant:</b> Joe Chaves Excavating	<b>Application ID:</b> 2000-06-3 <b>Geo Code:</b> 11-028-20-41-0040 <b>Type of System:</b> Floodplain System <b>Designer:</b> Thomas F. Trooien
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<b>Type of Installation:</b> <input type="checkbox"/> New <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Other	<b>Type of Inspection:</b> <input type="checkbox"/> Site Review <input type="checkbox"/> Tank <input type="checkbox"/> Rough-Up <input type="checkbox"/> Treatment Area <input checked="" type="checkbox"/> Final	<b>Inspector:</b> <input type="checkbox"/> Pete Ganzel <input checked="" type="checkbox"/> Chris LeClair <input type="checkbox"/> Other
<b>Number of Bedrooms:</b> _____		<b>Inspection Dates:</b> 11 JUL 2006

**Installer:** CHAVES

Site Review	Mounds / At-Grade
<b>Date:</b> _____ <b>Conclusions:</b> <input type="checkbox"/> Soil Boring <input type="checkbox"/> Soil Pit Depth of Pit/Boring _____ Comments _____ <input type="checkbox"/> Site Suitable <input type="checkbox"/> Site Unsuitable <input type="checkbox"/> Additional Tests Required	<input type="checkbox"/> Mound <input type="checkbox"/> At-Grade    Absorption Area _____ Percent Slope _____ Sand Below Bed _____ Upslope Width _____ Rock Below Pipe _____ Downslope Width _____ Perf Size/Spacing _____ Sideslope Width _____ Pipe Size/Spacing _____ Pressure Bed Dimensions: Length _____ Width _____

Sewage / Holding Tanks	Pump Information
Tank 1 <u>1000</u> <input checked="" type="checkbox"/> New <input type="checkbox"/> Existing    Baffle Type <input type="checkbox"/> Plastic <input type="checkbox"/> Fiberglass Tank 2 <u>1000</u> <input checked="" type="checkbox"/> New <input type="checkbox"/> Existing <input type="checkbox"/> San-T <input type="checkbox"/> Concrete	Lift Station Capacity <u>1000</u> Feet of Head _____ Horsepower/GPM _____ Size of Discharge Line: _____ Gallons Per Cycle _____ Type/Location or Alarm _____ Gallons Per Minute _____

Trenches, Bed or Gravelless Drainfield	Setbacks																														
<input type="checkbox"/> Drop Box <input type="checkbox"/> Distribution Box <input type="checkbox"/> Gravity <input type="checkbox"/> Pump Trench <input type="checkbox"/> Pressure Bed <input type="checkbox"/> Serial <input type="checkbox"/> Parallel <input type="checkbox"/> Chambers <input type="checkbox"/> Gravelless <input type="checkbox"/> 8" <input type="checkbox"/> 10"	Building(s) to tanks <u>710</u> Building(s) to drainfield <u>26'</u> Surface Water <u>&gt;100'</u> Property Lines <u>10'</u> Wells <input checked="" type="checkbox"/> 50' <input type="checkbox"/> 100'																														
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">Trench Depth (in)</td> <td style="width:20%;">T1 _____</td> <td style="width:20%;">Trench Length (ft)</td> <td style="width:20%;">T1 _____</td> <td style="width:20%;">Trench Width</td> <td style="width:20%;">Rock Below Pipe</td> </tr> <tr> <td></td> <td>T2 _____</td> <td></td> <td>T2 _____</td> <td><input type="checkbox"/> 24"</td> <td><input type="checkbox"/> 6"</td> </tr> <tr> <td></td> <td>T3 _____</td> <td></td> <td>T3 _____</td> <td><input type="checkbox"/> 36"</td> <td><input checked="" type="checkbox"/> 12"</td> </tr> <tr> <td></td> <td>T4 _____</td> <td></td> <td>T4 _____</td> <td><input type="checkbox"/> Other _____</td> <td><input type="checkbox"/> 18"</td> </tr> <tr> <td></td> <td>T5 _____</td> <td></td> <td>T5 _____</td> <td>Trench Spacing _____</td> <td><input type="checkbox"/> 24"</td> </tr> </table>	Trench Depth (in)	T1 _____	Trench Length (ft)	T1 _____	Trench Width	Rock Below Pipe		T2 _____		T2 _____	<input type="checkbox"/> 24"	<input type="checkbox"/> 6"		T3 _____		T3 _____	<input type="checkbox"/> 36"	<input checked="" type="checkbox"/> 12"		T4 _____		T4 _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 18"		T5 _____		T5 _____	Trench Spacing _____	<input type="checkbox"/> 24"	<b>Pressure Test</b> Time _____ Time _____ PSI _____ PSI _____
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Pressure Bed Dimensions: Length 38 Width 15 Absorption Area 570

**Comments:** BOTTOM OF BED IS AT 688.5 MSL. JOE AND I MEASURED ELEVATIONS FROM SURVEYED STAKE ON SOUTHEAST CORNER OF LOT

Inspector \_\_\_\_\_