

St. Paul, MN 55155-4194

## **Compliance Inspection Form**

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

Doc Type: Compliance and Enforcement

For local tracking purposes:

requirements and attached forms – additional local requirements may also ap	oly.
Submit completed form to Local Unit of Government (LUG) and system within 15 days	owner
System Status	
System status on date (mm/dd/yyyy): _5/2/2019	
	e Upgrade Requirements on page 3.)
Reason(s) for noncompliance (check all applicable)  Impact on Public Health (Compliance Component #1) – Immine Other Compliance Conditions (Compliance Component #3) – In Tank Integrity (Compliance Component #2) – Failing to protect Other Compliance Conditions (Compliance Component #3) – Failing to protect Soil Separation (Compliance Component #4) – Failing to protect Operating permit/monitoring plan requirements (Compliance Compliance Component #4)	nminent threat to public health and safety groundwater ailing to protect groundwater t groundwater
Property Information Parcel ID# or Sec	c/Twp/Range: 3102821310002
Property address: 6421 GLEN RD, CITY OF WOODBURY	Reason for inspection: Property Transfer
Property owner: Duwayne Radke	Owner's phone: 651-366-7796
or	
Owner's representative:	Representative phone:
Local regulatory authority: Washington County	Regulatory authority phone: 651-430-6655
Brief system description: 2 Septic tanks to gravity drainfield	
Comments or recommendations:	
On 5/2/19 this system was ruled compliant.	
Cantification	
Certification	rmine the compliance status of this system. No
I hereby certify that all the necessary information has been gathered to determination of future system performance has been nor can be made due possible abuse of the system, inadequate maintenance, or future water usage.	to unknown conditions during system construction,
Inspector name: Dave Brown	Certification number: 9370
Business name: David R Brown	License number: 3649
Inspector signature:	Phone number: 651-788-3296
Necessary or Locally Required Attachments	
	Forms per local ordinance
	·
Other information (list):	

			(mm/dd/yyyy)
	npact on Public Health – C ompliance criteria:	ompliance compon	verification method(s):
Sy	stem discharges sewage to the	☐ Yes ⊠ No	Searched for surface outlet
Sy	ound surface. vstem discharges sewage to drain e or surface waters.	☐ Yes ⊠ No	<ul> <li>Searched for seeping in yard/backup in home</li> <li>☐ Excessive ponding in soil system/D-boxes</li> </ul>
Sy	/stem causes sewage backup into velling or establishment.	☐ Yes ☒ No	<ul> <li>☐ Homeowner testimony (See Comments/Explanation)</li> <li>☐ "Black soil" above soil dispersal system</li> </ul>
A	Any "yes" answer above indicates the system is an imminent threat to public health and safety.		<ul> <li>☐ System requires "emergency" pumping</li> <li>☐ Performed dye test</li> <li>☐ Unable to verify (See Comments/Explanation)</li> <li>☐ Other methods not listed (See Comments/Explanation)</li> </ul>
Co	omments/Explanation:		
. т.	and Integrity Commission		
	ank Integrity — Compliance of compliance criteria:	component #2 of 5	Verification method(s):
Sy	ystem consists of a seepage pit,	☐ Yes ⊠ No	□ Probed tank(s) bottom
Se	pepage pits meeting 7080.2550 may be impliant if allowed in local ordinance.		<ul><li>☐ Examined construction records</li><li>☐ Examined Tank Integrity Form (Attach)</li></ul>
Se	ewage tank(s) leak below their esigned operating depth.	☐ Yes ⊠ No	<ul><li>Observed liquid level below operating depth</li><li>Examined empty (pumped) tanks(s)</li></ul>
	yes, which sewage tank(s) leaks:		<ul><li>☐ Probed outside tank(s) for "black soil"</li><li>☐ Unable to verify (See Comments/Explanation)</li></ul>
	ny "yes" answer above indi ystem is failing to protect gr		Other methods not listed (See Comments/Explanation)
Co	omments/Explanation:		
. O	ther Compliance Condition	es Compliance com	nament #2 of 5
<b>.</b> о			d, or appear to be structurally unsound. ☐ Yes* ☒ No ☐ Unknow
b.		to immediately and adve	ersely impact public health or safety.   Yes*  No  Unknow
	Explain:	,	
C.	System is non-protective of ground *System is failing to protect ground		ns as determined by inspector . ☐ Yes* ☒ No
	Explain:		

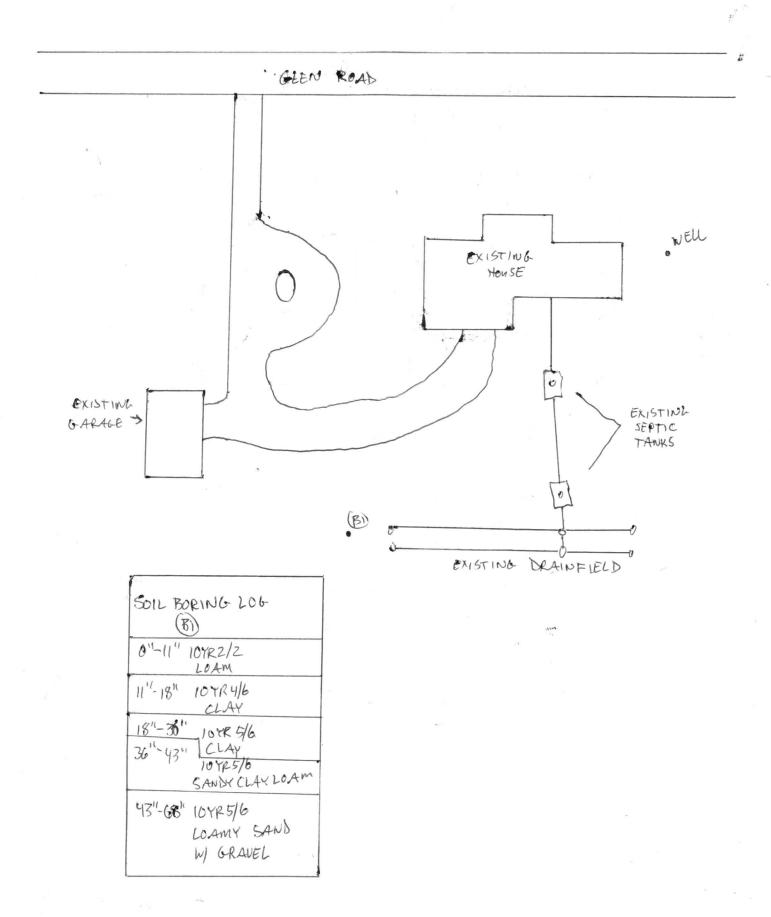
Inspector initials/Date: DB | 5/2/2019

Property address: 6421 GLEN RD, CITY OF WOODBURY

Property address: 6421 GLEN RD, CITY OF V	VOODBU	RY	Inspector initials/Date:		
				(mm/dd/yyyy)	
4. Soil Separation - Compliance co	mnone	nt #4 of 5			
Date of installation:	Unki	nown	Verification method(s):		
(mm/dd/yyyy) Shoreland/Wellhead protection/Food beverage			Soil observation does not expire. Previous soil		
lodging?	☐ Yes ☐ No	observations by two independent pa unless site conditions have been alt	arties are sufficient, ered or local		
Compliance criteria:			requirements 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,			☐ Two previous verifications (Attach boring logs)		
beverage or lodging establishment:			☐ 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.			Other (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,	⊠ Yes □ No		Comments/Explanation:		
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 or V systems built under 2008 Rules (7080.		A. Bottom of distribution media	32"		
2350 or 7080.2400 (Advanced Inspector License required)			B. Periodically saturated soil/bedrock	68"	
Drainfield meets the designed vertical			C. System separation	36"	
separation distance from periodically saturated soil or bedrock.			D. Required compliance separation*	36"	
Any "no" answer above indicates t	he syst	em is	*May be reduced up to 15 percent if Ordinance.	f allowed by Local	
failing to protect groundwater.			Ordinance.		
5. Operating Permit and Nitroger	BMP*	– Complian	ce component #5 of 5	Not applicable	
Is the system operated under an Operating			☐ No If "yes", A below is requi	red	
Is the system required to employ a Nitroge		_	☐ No If "yes", B below is requi		
BMP = Best Management Practice(s)					
If the answer to both questions is "r		•			
,	,				
Compliance criteria					
a. Operating Permit number:     Have the Operating Permit requirement	ante heen	met?	☐ Yes ☐ No		
			g? Yes No		
b. Is the required nitrogen BMP in place			g!   Tes   No		
Any "no" answer indicates Nonc	отрна	rice.			
Upgrade Requirements (Minn. Stat. § 115.55 discontinued within ten months of receipt of this ground water, the system must be upgraded, rej is not failing as defined in law, and has at least tits use discontinued, notwithstanding any local of	notice or volaced, or wo feet of	vithin a shorter p its use discontina design soil sepa	eriod if required by local ordinance. If the super within the time required by local ordinal ration, then the system need not be upgra	system is failing to protect ance. If an existing system ded, repaired, replaced, or	

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Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.



## St. Paul - Ramsey County Public Health

## Well Water Report Form

Laboratory Name	St. Paul - Ramsey County Public Health Laboratory
Laboratory Address	555 Cedar Street, St. Paul, MN 55101
Telephone Number	651-266-1321
MN Lab ID	027-123-140

Client Name	Dave Brown			
Address	4787 Radio Drive, Woodbury, MN 55129			
Well Address	6421 Glen Rd., Woodbury, MN			
County	Washington			
Specimen ID#	30-19 Tech	APD		
Date and Time Collected	4/29/19 11:55 AM			
Date and Time Received	4/29/19 12:20 PM Waive	N/A		
Temperature	8°C Waive	N/A		
Notes	Sample on ice and received day of collection.			

Bacteria Result			
Date and Time Setup	4/29/19 1:00 PM		
Date and Time Completed	4/30/19 2:20 PM	Tech	APD
Coliforms Colisure®	Absent		
E. Coli Colisure®	Absent		

Nitrate Result				
Date and Time Tested	4/29/19 2:05 PM	Tech	APD	
Nitrate sm 4500-NO3? D-97	2.2 mg/L			

Date Reported: 4/30/2019 Tech: APD

Quality control samples were within acceptable range unless otherwise noted. The results listed within the report relate only to the sample received on the date indicated. This report must not be reproduced, except in full, without the written approval from the St. Paul - Ramsey County Public Health Laboratory.

Report Authorized by: Page DeLong, Technical Director

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