

Bob Freiermuth

Invoice

23620 Lillehei Avenue
Hampton, MN 55031
651/437-5566

Date
6/7/2019

Invoice #
14479

Bill To
Kelly Vincent 10555 Lehigh Road Hastings Mn 55033
County
Washington

Special Information
Customer Phone
952-356-4182

Item	Description	Qty	Rate	Amount
Compliance	Compliance Inspection		400.00	400.00

25 June 19

print Compliance Inspection-Passed

Compliance Inspection-Failed

_____ Date

Balance Due	\$400.00
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Completed paperwork will be mailed to you upon receipt of payment.

Licensed Minnesota Onsite Sewage Treatment Systems Inspector
 Specializing in:
 Inspections on new systems
 Compliance on existing systems
 Water tests



Compliance Inspection Form

Existing Subsurface Sewage Treatment System (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): 6/25/2019

- Compliant - Certificate of Compliance** **Noncompliant - Notice of Noncompliance**

(Valid for 3 years from report date, unless shorter time frame outlined by Local Ordinance.)

(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
- 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: _____

Property address: 10555 Lehigh Road Hastings Mn.55033

Reason for inspection: Sale

Property owner: Kelly Vincent

Owner's phone: 952-356-4182

or

Owner's representative: Na

Representative's phone: _____

Local regulatory authority: Washington County

Regulatory authority phone: _____

Brief system description: two septic tanks 1 1500gal. 1 1000gal. Four drainfield lines at 78' each

Comments or recommendations:

Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of the 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: Bob Freiermuth

Certification number: C818

Business name: Bob Freiermuth

License number: L492

Inspector signature: _____

Phone number: 651 437-5566

Necessary or Locally Required Attachments

- Soil Boring Logs System/As-Built Drawings 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 that the system is an imminent threat to public health and safety.

Verification method(s)

- Searched for surface outlet
- Searched for seeping in yard/backup into 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)

Comments/Explanation:

2. Tank Integrity - Compliance component #2 of 5

Compliance Criteria:

System consists of seepage pit, cesspool, drywell, or leaching pit <small>Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance</small>	<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 that the system is failing to protect groundwater.

Verification method(s)

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

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 groundwater for other conditions as determined by the inspector Yes* No

***System is failing to protect groundwater**

Explain:

4. Soil Separation - Compliance component #4 of 5

Date of installation: 24-Jul-00 Unknown
(mm/dd/yyyy)

Shoreland/Wellhead Protection/Food, beverage, lodging? Yes 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:

1-21" 10yr 3/4 top soil med sand, 21-40 10yr 4/6 med sand 40-60" 10yr 5/6 med sand, 60-75' 10 yr 4/6 med sand. End of bore

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. Yes No

Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.

Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving food, beverage or lodging establishment. Yes No

Drainfield has at least a three-foot vertical separation distance from periodically saturated soil or bedrock.

"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)) Yes No

Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Indicate depths or elevations

A. Bottom of distribution media	31-36"
B. Periodically saturated soil/bedrock	none-75"
C. System separation	39"
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 system operating under an Operating Permit? Yes No If "yes", A below is required.

Is the system required to employ Nitrogen BMP? Yes No 3 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 above 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 groundwater, 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.



Well

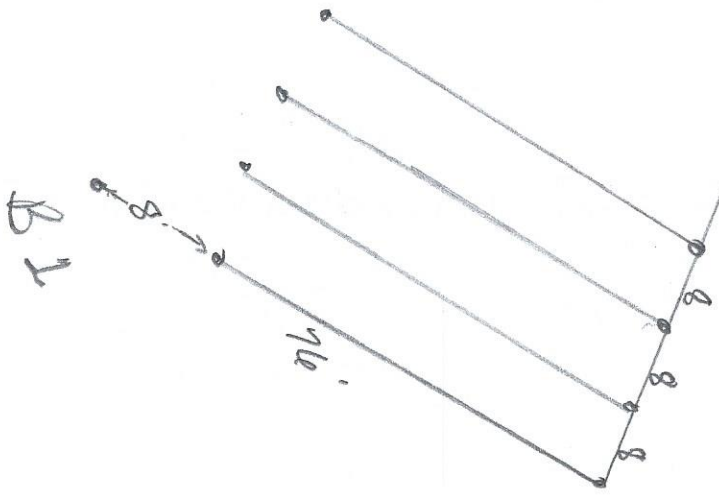
Spaced

10555
Lehigh Rd
Hastings

Lehigh Rd



418'



25 June 19

Date:

25 June 19

Customer Name:

Kelley Vincent

Street Address:

10555 Lehigh Rd

City, State, Zip

HASTINGS MN 55033

Phone Number:

952-356-4182

Based on what we were able to observe and on our experience with on-site wastewater technology, we submit this Onsite Sewage Treatment System Inspection Report based on the present condition of the onsite sewage disposal system. Bob Freiermuth has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of the numerous factors (usage, soil characteristics, previous failures, etc.) which may affect the proper operation of a septic system, this report shall not be construed as a warranty by our company that the system will function properly for any particular buyer. Bob Freiermuth hereby DISCLAIMS ANY WARRANTY, either expressed or implied, arising from the inspection of the septic system or this report. We are not also ascertaining any affect the system is having on the groundwater.

Inspecting Company Bob Freiermuth

Phone 651 437-5566

License No: 818

Owners Signature

I have studied the information contained herein and certify that my assessment is honest, thorough, and to the best of my ability correct.

Name: Bob Freiermuth /

Title SSTS Inspector 818