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):   5/6/2019

☒ **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*
☐ 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: 01.027.21.33.0005

Property address: 6855 Lamar Ave S

Reason for inspection: Selling Home

Property owner: Carolyn Benson
or

Owner's phone: 612-419-0292

Owner's representative: _____

Representative phone: _____

Local regulatory authority: _____

Regulatory authority phone: _____

Brief system description: _____

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 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: Shelley Schlomka/Dennis Schlomka

Certification number: C545

Business name: SS Septic Solutions

License number: 1106

Inspector signature: _____

Phone number: 651-343-9117

Necessary or Locally Required Attachments

☒ Soil boring logs   ☐ System/As-built drawing   ☐ Forms per local ordinance
☐ Other information (list): _____

www.pca.state.mn.us   •   651-296-6300   •   800-657-3864   •   TTY 651-282-5332 or 800-657-3864   •   Available in alternative formats
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