



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

Instructions: 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): 11/27/2019

[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
[] 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: 14032204300016

Property address: 21020 Ozark AVE N, Scandia, MN 55073 Reason for inspection: Property Transfer

Property owner: James R. Schneider Owner's phone: 612-222-5984

Owner's representative: Representative phone:

Local regulatory authority: City of Scandia/WashCo Regulatory authority phone:

Brief system description: 1000 gallon solid septic tank, 1000 gallon lift tank and gravity flow trenches.

Comments or recommendations:

Inspected in August - Sent to County not returned!
Resubmitted 11/27/19 JAA

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: Jeffrey Fertig Certification number: 2942

Business name: Sunrise Septic Services License number: 2299

Inspector signature: [Signature] Phone number: 651-253-2969

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 discharge sewage to the ground surface.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System discharge sewage to drain tile or surface waters.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System cause 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.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, which sewage tank(s) leaks:	

Any "yes" answer above indicates the system is Failing to Protect Groundwater.

Comments/Explanation:

Pumper Testimony - Smiley's Sewer

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 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: After to 4/1/96 Unknown
 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

Any “no” answer above indicates the system is Failing to Protect Groundwater.

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 of elevations

A. Bottom of distribution media	30 inches
B. Periodically saturated soil/bedrock	66 inches
C. System separation	36 inches
D. Required compliance separation*	36 inches

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

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.

SUNRISE SEPTIC SERVICES, INC.

Jeffrey Fertig
Licensed and Bonded, PCA Certified #2942
12180 Saint Croix Trail, North Branch, MN 55056
(651) 253-2969

ON-SITE SEPTIC SYSTEM CONDITION REPORT

DATE: November 27, 2019
CLIENT: James R. Schneider
ADDRESS: 21020 Ozark AVE N, Scandia, MN 55073
PID#: 14032204300016

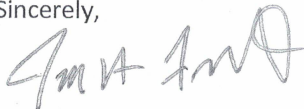
REPORT SUMMARY:

At the request of the seller of this property, I have performed an MPCA Compliance Inspection of this septic system. It is my opinion that this onsite sewage treatment system is **compliant**. The system consists of a 1000-gallon solid septic tank, and a 1000-gallon lift station and gravity flow trenches. Based on my inspection of the system it is my opinion that this system presently meets MPCA minimum compliance inspection requirements. The bottom of the trenches were found at 24 – 36 inches below grade. Redoximorphic features were not found in a 66-inch soil boring, rendering the system with 36 inches of separation. Smiley's Sewer service pumped the septic tanks which appeared to be watertight, baffles in place and functioning properly.

Minimum compliance inspection requirements include only verification that the septic system has a water tight septic tank, the required drain field separation to saturated soils, no backup of sewage into the dwelling and no discharge of sewage/effluent onto the ground surface or surface water (lakes, streams, etc.). Sewage back up verification is limited to observing the floor drain area and/or the information supplied by the last occupants of the dwelling prior to inspection. Sunrise Septic Services cannot guarantee that the information given to us relative to back-ups is accurate. Certification of this system does not warranty future use beyond the date of the inspection.

Please contact me if you have any questions.

Sincerely,



Jeffrey A. Fertig
Sunrise Septic Services, Inc.

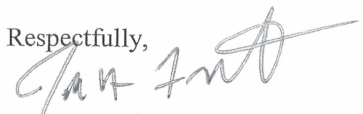
NOTE: This report is not complete without the inclusion/attachment of the respective MPCA Septic System Compliance Inspection form, which consists of two separate pages. Sunrise Septic Solutions has not been retained to guarantee or certify the proper functioning of the system for any period in the future. Because of the numerous factors (usage, maintenance, tank pumping, soil characteristics, previous failures, etc.) which may affect the proper operation of a septic system, and the inability of my company to supervise or monitor the use or maintenance of the system, this report shall not be construed as a warranty by my company that the system will function properly for any particular buyer. Sunrise Septic Services hereby **DISCLAIMS ANY WARRANTY**, either expressed or implied, arising from the inspection of the septic system or this report. We are also not ascertaining any effect the system is having on the groundwater. **This report/inspection is being done for only the seller and the buyer of this property. There is no contract between Sunrise Septic Services and any other party except the seller/buyer. Liability to Sunrise Septic Services Inc. is limited to the cost of this inspection.**

Sunrise Septic Services DISCLAIMER SHEET

Relative to Septic System Compliance Inspections:

1. This inspection/report is being performed for only the seller/owner or of the property on which the septic system is located; there is no contract between Sunrise Septic Services, Inc. and any other party except the seller/owner unless otherwise noted. In such case that the buyer of the property is paying for the inspection, the contract is between only the buyer of the property and Sunrise Septic Services, Inc., there is no contract with any other party unless otherwise noted. **Liability to Sunrise Septic Services Inc. is limited to the cost of this inspection.**
2. Sunrise Septic Services, Inc. has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time beyond the date of inspection or the future. Because of the numerous factors (usage, maintenance, tank pumping, soil characteristics, previous failures, etc.) which may affect the proper operation of a septic system, as well as the inability of Sunrise Septic Services, Inc. to supervise or monitor the use or maintenance of the system, the report shall not be construed as a warranty by Sunrise Septic Services, Inc. that the system will function properly for any particular person for any period of time.
3. Minimum Compliance Inspection requirements relative to this inspection and this report include only verification that the septic system has a water tight septic tank(s) and lift tank, the required separation from the bottom of the drainfield/mound distribution medium and saturated soils, no back-ups of sewage into the dwelling, and no discharge of sewage/effluent onto the ground surface or surface water (lakes, streams, etc.) Sunrise Septic Services, Inc. does not inspect basement ejector pumps or exterior lift tank pumps as they are considered to be a "maintenance item". Sewage backup verification is limited to observing the floor drain area and/or the information supplied by the last occupants of the dwelling prior to inspection Sunrise Septic Services, Inc. cannot guarantee that the information given to them by the last occupants of the dwelling prior to inspection relative to backups or failure is accurate. Some persons may attempt to hide or conceal signs of previous back-ups.
4. Certification of this system does not warranty future use beyond the date of the inspection. Any system, old or new, can be hydraulically overloaded as a result of more people moving into the house than were previously occupying the house, improper maintenance and/or heavy usage, tree roots, freezing conditions, surface drainage problems, or the system can simply stop working because of its age. The average life expectancy of a properly maintained septic system is twenty-five years.
5. A Compliance Inspection is not meant to be a test or inspection for longevity of the septic system, a Compliance Inspection is strictly for the purpose of determining if the septic system is polluting the environment at the date and time the inspection is performed. This inspection is not intended to determine if the septic system was originally designed or installed to past or present MPCA or Local Unit of Government code requirements.
6. WINTER WORK: Client (person paying for inspection) understands that inspections conducted during winter weather (approximately November 1st through April 1st) are more difficult to perform because of the possible snow cover and ground frost. Septic system components such as tanks, tank covers, drop boxes, drop box covers and soil treatment areas are more difficult to locate because of snow cover and ground frost. Soil borings and locating drainfields are more difficult to perform because of ground frost. Sunrise Septic Services, Inc. will attempt to use the same level of standards when performing winter work as when performing non-winter work. However, the client understands that because of aforementioned considerations, the same level of standards may not be possible.

Respectfully,



Jeffrey A. Fertig
Inspector/Owner

Soil Boring Log

Depth of System or Sand Lift 30 Inches

Flood Plain: Yes No

Depth to Restrictive Layer >60 inches

Shoreland: Yes No

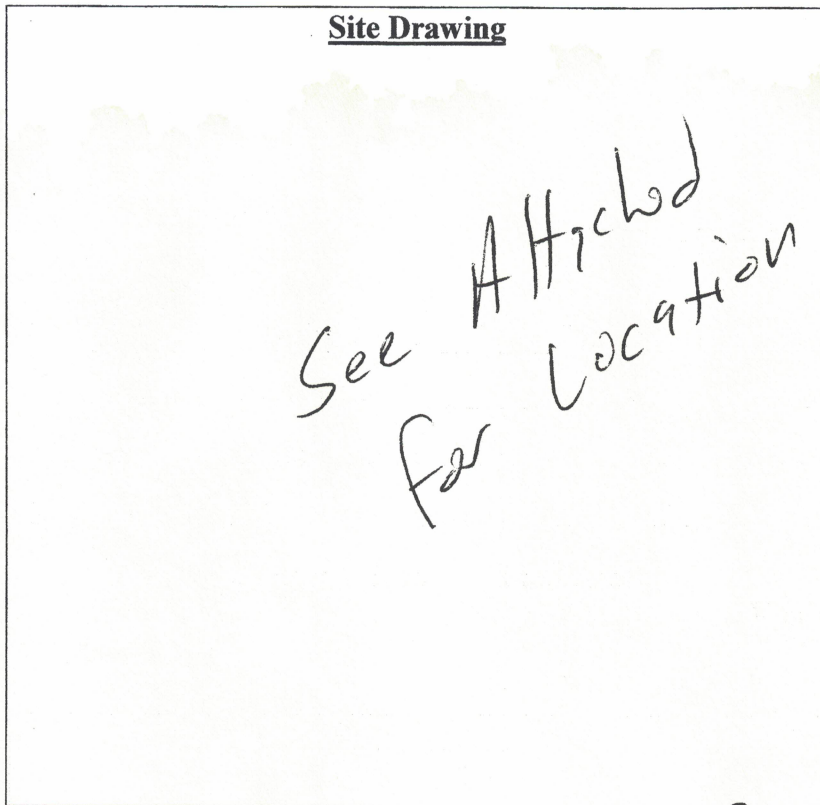
Type of Observation: Probe Pit Boring

Well Head Protection area: Yes No

General Soil Texture: Sand Loam Clay

Drainage: Good Problems

Well Info: Location _____
Depth >50"



Depth	Texture	Color	Structure
0-6"	Loamy fine sand	10YR 3/2	Blocky Platy Prismatic
6-24"	Loamy sand	10YR 4/3	Blocky Platy Prismatic
24-40"	Sandy loam	10YR 4/4	Blocky Platy Prismatic
40-66"	Sandy loam	10YR 5/4	Blocky Platy Prismatic

Additional Notes:

Inspection Performed by: Sunrise Septic Services *AT*

Registration Number 2942

Property Owner James R. Schneider

Site Address 21020 Ozark AVE N, Scandia, MN 55073

PID # 14032204300016

EKLIN SOIL TESTING AND INSPECTIONS, INC.

1986 Ridgewood Avenue
White Bear Lake, MN 55110
1-629-1090

Owner's Name <u>JAMES SCHNEIDER</u>
Job Site Address <u>LOT 9 BCK) - HAWKINSONS COMMERCIAL PARK ADDITION - OZARK TRAIL</u>
City or Township <u>SCANDIA, MN.</u>
Use of Building <u>NEW HOME . 3-BEDROOMS</u>

Design Flow Rate <u>450 gpd.</u>	Percolation Rate <u>16 AND 34 MPI</u>	Land Slope <u>8</u> Percent
Two Required Tank Sizes <u>1,000 Gallons 1,000 Gallons</u>	Lift Station Tank Size	
Type of System (standard, at grade or bed) <u>STANDARD</u>		
System Size: <u>900</u> -Square Feet	<u>300</u> -Lineal Feet	<u>36"</u> -Trench Width
Depth of rock below pipe <u>12"</u>	Depth of Rock Above Pipe <u>2"</u>	
MINimum Depth of Trench From Existing Grade <u>24</u> Inches	MAXimum Depth of Trench From Existing Grade <u>30</u> Inches	
Recommended Number of Trenches <u>3</u>	Recommended Length of Trenches <u>100'</u>	
Trench Spacing Measured Center to Center <u>7'6"</u> Feet		
Any Other Special Conditions		

This system has been designed by a Pollution Control Agency (PCA) Certified Professional.

Designer Name <u>DALE EKLIN</u>	PCA Certification # <u>695</u>
Address <u>1986 RIDGEWOOD AVE</u> <u>WHITE BEAR LAKE</u> <u>MINN 55110</u>	Phone # <u>429-1090</u>
Signature <u><i>[Signature]</i></u>	Date <u>6-10-2001</u>

BH5

DRIVEWAY

WELL

APPROX. HOUSE SITE

TWO 1000 GAL. SEPTIC TANKS - 24" MANHOLES & 4" CLEAN OUTS TO GRADE

4" INSP.

BH7

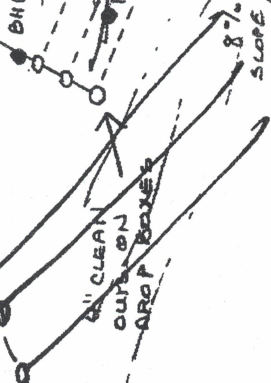
BH6

PZ

BH4

BH2

BH3



900 SQ. FT. DRAINFIELD

3 TRENCHES - 100' LONG

36" WIDE - 24" TO 30" DEEP

7'6" CENTER TO CENTER TRENCH SPACING

FOLLOW THE CONTOURS

KEEP BOTTOM OF TRENCH LEVEL

BH8

Sewage tank maintenance reporting form

Subsurface Sewage Treatment Systems (SSTS) Program

Purpose: Management and maintenance of Subsurface Sewage Treatment Systems (SSTS) are important to ensure resource protection and long-term and cost-effective sewage treatment. Completion of this form complies with the sewage tank maintenance requirements under Minn. R. 7080.2450 and 7082.0600. This form may be used to certify the compliance status of the sewage tank components of the SSTS. **This form is not a complete SSTS inspection report and may only certify sewage tank compliance status when entirely completed and signed on page 3 by a qualified professional.**

Instructions: A copy of this information must be submitted to the system owner within 30 days of the maintenance date and be maintained by the licensed SSTS maintainer business for a period of five (5) years from the maintenance date. Maintenance reporting to the local unit of government may be required by local ordinance. Check with your local SSTS program for maintenance reporting protocol.

Secure maintenance hole covers

All maintenance hole covers must be returned to service in a sound and durable condition and be capable of withstanding the anticipated load.

Covers must be re-secured in accordance with Minn. R. 7080.2450, subp. 3, Items C or D:

- a) Covers installed under local ordinances adopted after February 4, 2008 must be locked, bolted or screwed or must be 95 pounds in weight. They must be made of material suitable for outdoor use, resistant to ultraviolet degradation and leaks, and not susceptible to being slid or flipped. They must have a label warning of hazardous conditions inside the tank. All screw openings must be refastened.
- b) Covers installed under local ordinances adopted before February 4, 2008 must either be buried with at least 12 inches of soil cover or be secured according to the local ordinance in effect before February 4, 2008.
- c) Covers must meet item 'a' above when raised to the ground surface or less than 12 inches from the ground surface.

Reporting information

Date of maintenance (mm/dd/yyyy): 8/5/2019 Reason for maintenance: Compliance Inspection

Property address: 21020 Ozark AVE N, Scandia, MN 55073 Parcel ID: 14032204300016

City: Scandia State: MN Zip code: 55073

Property owner's name: James R. Schneider

Property-owner's address if different: _____

City: _____ State: _____ Zip code: _____

Phone number: _____ Email address: _____

1. Did you measure the accumulation of scum and sludge? Yes No (tank(s) pumped without measuring)

Tank (check if present)	Scum	Sludge	Operating depth	Percent full
<input checked="" type="checkbox"/> Septic/holding tank #1				
<input checked="" type="checkbox"/> Septic/holding tank #2				
<input type="checkbox"/> Pretreatment tank				
<input type="checkbox"/> Pump tank				

2. Access used to remove septage: Maintenance hole Other (Unless a holding tank, go to #4 below)

3. If the maintenance hole was used, were all covers secured in place? Yes No If no, please explain below:

4. If the owner refuses to allow a Subsurface Sewage Treatment System (SSTS) to be pumped through the maintenance hole, have them complete and sign the following statement.

I, _____, refuse to allow the removal of the solids and liquids through the maintenance

(Print owner's name)

hole. I understand that removal of solids and liquids through other access points is not considered a compliant method of solids removal and does not fulfill the solids removal requirements of Minn. R. 7080.2450 and 7082.0600.

Owner's signature: _____ Date (mm/dd/yyyy): _____

Property address: 21020 Ozark AVE N, Scandia, MN 55073
City: Scandia State: MN

Parcel ID: 14032204300016
Zip code: 55073

5. Is the tank designed as a leaky tank? (Example: seepage pit, cesspool, drywell, leaching pit)

Tank #1: Yes No Verification method used: _____
Tank #2: Yes No Verification method used: _____

6. Is there evidence of the following?

Tank (check if present)	Tank leaks below the designed operating depth	Tank leaks above the designed operating depth	Maintenance hole cover is damaged, cracked, unsecured, or appears to be structurally unsound
<input checked="" type="checkbox"/> Septic/holding Tank #1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Septic/holding Tank #2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Pretreatment Tank	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Pump Tank	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Describe detail for any "Yes"			

7. How many gallons of septage were removed?

Tank #1: 1000 Tank #2: 1000 Pretreatment Tank: _____ Pump Tank: _____

8. Where was the septage taken? Wastewater treatment facility Land application Other
Explanation (Facility name/Site #): _____

9. Did you identify any operational issues or unsafe conditions while assessing the sewage tanks in this system?

Yes No If yes, identify tank and explain:
 Evidence of non-domestic waste Baffle(s) condition Effluent screen condition
 Maintenance hole and extensions condition Other conditions (e.g. structural integrity of tank or lid, electrical hazard, etc.)
Explanation: _____

10. List any troubleshooting and minor repairs completed or declined by owner:

<input type="checkbox"/> Troubleshooting and repairs conducted:	<input type="checkbox"/> Repairs declined by owner:
_____	_____
_____	_____

Additional comments or suggestions for owner's consideration: _____

Pumping record

I personally conducted the work described above on behalf of a Minnesota-licensed SSTS Maintenance Business, in compliance with Minnesota Rules Chapters 7080 - 7083:

As a noncertified individual who has received proper training, daily work review, and periodic observation, or
 As a designated certified individual of the business listed below.

Company information

Company name: Smiley's Sewer Service

Business license number: L2428

Email: _____

Employee's signature: [Signature]

Employee information

Print name: Keith Valento

Certification number: (if applicable): C6457

Phone number: 651-433-3005

Date (mm/dd/yyyy): 8/5/2019

Property address: 21020 Ozark AVE N, Scandia, MN 55073
City: Scandia State: MN

Parcel ID: 14032204300016
Zip code: 55073

Optional section: Sewage Tank Compliance Certification

This form does not represent a complete system inspection report and only certifies sewage tank compliance status.

Instructions: This section of the form may be completed and signed by a Designated Certified Individual (DCI) of a licensed SSTS Maintenance Business who personally conducts the necessary procedures to assess the compliance status of each sewage tank in the system.

When this section of the form is signed by a qualified certified professional, it becomes *necessary supporting documentation* to an Existing System Compliance Inspection Report: Compliance inspection form - Existing system (wq-wwists4-31b). This form can be found on the MPCA website at <https://www.pca.state.mn.us/water/ssts-and-msts-technical-and-compliance-criteria>.

The information and certified statement on this form is **required** when existing septic tank compliance status is determined by an individual other than the SSTS Inspector that submits the inspection report. It represents a third party assessment of SSTS component compliance and is allowable under Minn. R. 7082.0700, subp. 4 Item (B) subitem (1). This form is valid for a period of three years beyond the signature date on this form unless a new evaluation is requested by the owner or owner's agent or is required according to local regulations. Additional Administrative Rule references for this activity can be found at Minn. R. 7082.0700, subp. 4 Items B, C, and D; 7083.0730 Item C.

Certificate of sewage tank compliance

Affirm all three statements:

- The SSTS does not contain a seepage pit, cesspool, drywell, leaching pit, or other pit.
- It does not contain a sewage tank that was designed to be watertight, but subsequently leaks below the designed operating depth.
- It does not represent an imminent safety threat by reason of unsecured, damaged, or weak maintenance hole cover(s) or other unsafe condition.

Notice of sewage tank non-compliance

Select all that apply:

- The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit – **“Failure to Protect Groundwater.”**
- It has a sewage tank that was designed to be watertight, but subsequently leaks below the designed operating depth – **“Failure to Protect Groundwater.”**
- It presents a threat to public safety by reason of unsecured, damaged, or weak maintenance hole cover(s) or other unsafe condition – **“Imminent Threat to Public Health or Safety.”**

Company information

Company name: Smiliens Sewer Service
Business license number: L2428

Designated Certified Individual (DCI) information

Print name: Keith Valento
Certification number: C6457

I personally conducted the work described above as a Designated Certified Individual of a Minnesota-licensed SSTS Maintenance Business. I personally conducted the necessary procedures to assess the compliance status of each sewage tank in this SSTS:

Designated Certified Individual's signature:  Date (mm/dd/yyyy): 08/06/19