



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): 12/2/2020

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: 1202721320069

Property address: 7680 Lamar Ave. S. Reason for inspection: Sale of home

Property owner: Mark Anderson Owner's phone: 651-330-1001

or
Owner's representative: _____ Representative phone: _____

Local regulatory authority: Washington County Regulatory authority phone: _____

Brief system description: Two 1000 gallon tanks in ground drain field

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 Certification number: C9917

Business name: SS Septic Solutions, LLC License number: _____

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): _____