

**Instructions:** Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached supporting documentation – additional local requirements may also apply. Further information can be found here: <https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf>.

Inspector must submit completed form to Local Governmental Unit (LGU) and system owner within 15 days of final determination of compliance or noncompliance.

### Property information

Local tracking number: \_\_\_\_\_

Parcel ID# or Sec/Twp/Range: 2702920330005 Local regulatory authority: Washington County

Property address: 1090 Paris Ct N West Lakeland, Mn

Owner/representative: Brad Willert Owner's phone: 651-805-1200

Brief system description: 2 septic tanks and 1 pump tank to STA

### System status

System status on date (mm/dd/yyyy): 4/29/2021

**Compliant – Certificate of compliance\***

*(Valid for 3 years from report date unless evidence of an imminent threat to public health or safety requiring removal and abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.)*

**\*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.**

**Noncompliant – Notice of noncompliance**

*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 or under section 145A.04 subdivision 8.*

*Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.*

#### Reason(s) for noncompliance (check all applicable)

- Impact on public health (Compliance component #1) – *Imminent threat to public health and safety*
- Tank integrity (Compliance component #2) – *Failing to protect groundwater*
- Other Compliance Conditions (Compliance component #3) – *Imminent threat to public health and safety*
- Other Compliance Conditions (Compliance component #3) – *Failing to protect groundwater*
- System not abandoned according to Minn. R. 7080.2500 (Compliance component #3) – *Failing to protect groundwater*
- Soil separation (Compliance component #5) – *Failing to protect groundwater*
- Operating permit/monitoring plan requirements (Compliance component #4) – *Noncompliant - local ordinance applies*

#### 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.*

**By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.**

Business name: David R Brown

Certification number: 9370

Inspector signature: DRB

License number: 3649

*(This document has been electronically signed)*

Phone: 651-788-3296

### Necessary or locally required supporting documentation (must be attached)

- Soil observation logs
- Locally required forms
- Tank Integrity Assessment
- Operating Permit
- Other information (list): \_\_\_\_\_

## 1. Impact on public health – Compliance component #1 of 5

### Compliance criteria:

System discharges sewage to the ground surface  Yes\*  No

System discharges sewage to drain tile or surface waters.  Yes\*  No

System causes sewage backup into dwelling or establishment.  Yes\*  No

*Any "yes" answer above indicates the system is an imminent threat to public health and safety.*

**Describe verification methods and results:**

### Attached supporting documentation:

Other: \_\_\_\_\_

Not applicable

## 2. Tank integrity – Compliance component #2 of 5

### Compliance criteria:

System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Yes\*  No

Sewage tank(s) leak below their designed operating depth?  Yes\*  No

If yes, which sewage tank(s) leaks:

*Any "yes" answer above indicates the system is failing to protect groundwater.*

**Describe verification methods and results:**

### Attached supporting documentation:

Pumped at time of inspection

Name of maintenance business: Meyer's

License number of maintenance business: 915

Date of maintenance: 4/29/21

Existing tank integrity assessment (Attach)

Date of maintenance (mm/dd/yyyy): \_\_\_\_\_ (must be within three years)

*(See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))*

Tank is Noncompliant (pumping not necessary – explain below)

Other: \_\_\_\_\_

### 3. Other compliance conditions – Compliance component #3 of 5

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3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?

Yes\*  No  Unknown

3b. Other issues (*electrical hazards, etc.*) to immediately and adversely impact public health or safety?  Yes\*  No  Unknown

*\*Yes to 3a or 3b - System is an imminent threat to public health and safety.*

3c. System is non-protective of ground water for other conditions as determined by inspector?  Yes\*  No

3d. System not abandoned in accordance with Minn. R. 7080.2500?  Yes\*  No

*\*Yes to 3c or 3d - System is failing to protect groundwater.*

**Describe verification methods and results:**

Attached supporting documentation:  Not applicable  \_\_\_\_\_

### 4. Operating permit and nitrogen BMP\* – Compliance component #4 of 5 Not applicable

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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 specified in the system design?  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. Have the operating permit requirements been met?  Yes  No

b. Is the required nitrogen BMP in place and properly functioning?  Yes  No

***Any "no" answer indicates noncompliance.***

**Describe verification methods and results:**

Attached supporting documentation:  Operating permit (Attach)  \_\_\_\_\_

## 5. Soil separation – Compliance component #5 of 5

Date of installation 8/22/1997  Unknown  
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging?  Yes  No

### Compliance criteria (select one):

5a. 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.

5b. 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:  Yes  No\*

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

5c. "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.

**\*Any "no" answer above indicates the system is failing to protect groundwater.**

**Describe verification methods and results:**

### Attached supporting documentation:

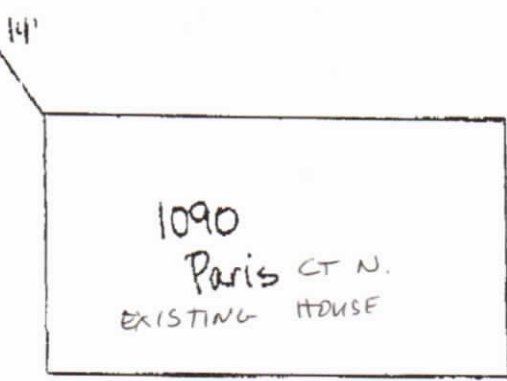
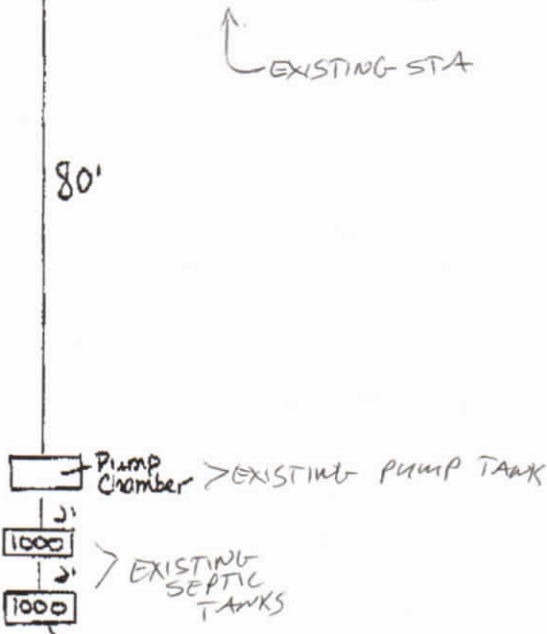
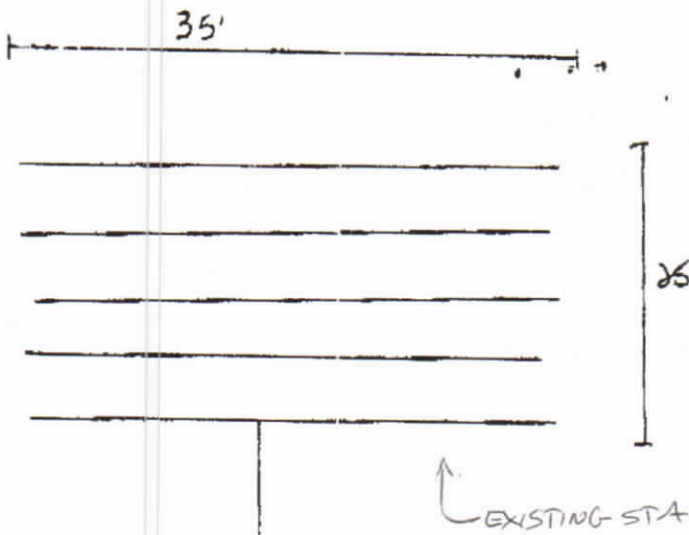
- Soil observation logs completed for the report (Attach)  
 Two previous verifications of required vertical separation (Attach)  
 Not applicable (No soil treatment area)  
 \_\_\_\_\_

### Indicate depths or elevations

A. Bottom of distribution media	24"
B. Periodically saturated soil/bedrock	66"
C. System separation	42"
D. Required compliance separation*	36"

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

**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.



SOIL BORING LOG	
(B1)	
0" - 12"	10YR 2/3 LOAM
12" - 20"	10YR 3/4 SANDY SILT LOAM
20" - 48"	10YR 3/4 SANDY SILT LOAM
48" - 66"	10YR 3/6 LIGHT SAND



1090 PARIS CT N WEST LAKE LAND, MN



## AS-BUILT REPORT INDIVIDUAL SEWAGE TREATMENT SYSTEM

Washington County Health, Environment & Land Management  
 14900 61ST ST N, PO BOX 3803, STILLWATER, MN 55082-3803  
 612/430-6708 or 612/430-6656 FAX 612/430-6730



Legal Description or Complete Street Address <b>1090 PARIS AVENUE COURT</b>		City or Township <b>Stillwater MN 55082</b>	
Owner Name <b>Brad Wilfert - owner</b>	Mail Address <b>DAN BROWN BLDGS</b>	City <b>2225 Periwinkle Ave</b>	State Zip <b>Stillwater 55082</b>
Installer <b>EMERALD IRRIGATION</b>	Mail Address <b>21820 Typo Creek Dr</b>	City <b>Wyoming MN</b>	State Zip <b>55092</b>
Septic Tank Information Tank Manufacturer: <b>Royal Concrete Pipe</b>		Liquid Capacity: <b>1000 gal tanks (2)</b>	

PUMP CHAMBER (if installed)			
Tank Manufacturer: <b>Royal Concrete Pipe</b>	Liquid Capacity: <b>1000</b>	Horsepower of Pump: <b>SW 33 1/3 hp</b>	Type of Warning Device: <b>Float</b>
Pump Discharge in Gallons Per Minute Head <b>33</b>	at <b>12</b>	Feet of	Number of Gallons Pumped Per Cycle: <b>150</b>

DRAINFIELD TRENCH		<u>Stepage</u> BED	
Width:	Length of Each Trench:	Rock Bed Length: <b>35'</b>	Width: <b>25'</b> Area: <b>875</b>
Depth of Trench Bottom from Finished Grade:		Bed Depth from Grade: <b>24"</b>	
Method of Distribution: <input type="checkbox"/> Pressure <input type="checkbox"/> Distribution Box <input type="checkbox"/> Drop Box		MOUND: Upslope Sand Base Depth:      Downslope Sand Base Depth:	
Depth of Rock Under Distribution Pipe:		Depth of Rock Under Pipe: <b>12"</b>	
Square Footage of Tested Area Used:		PRESSURE DISTRIBUTION SYSTEM:	
Trench Bottom Square Footage Required:	Area As Built:	Lateral Inside Diameter: <b>1 1/2"</b>	Length: <b>33'</b> Perforation Size: <b>1/4"</b>
		Spacing: <b>5'</b>	Number: <b>55</b> Perforation Spacing: <b>3'</b>

Complete site plan on attached sheet. On the site plan, include location of the following items:  
 Structures, septic tank, pump chamber, line from house to tank treatment system, distribution lines, distribution or drop boxes, well, and driveway. Show all distances applicable to the sewage treatment system (distance from structure to tank, tank to treatment system, distance between distribution lines, length of distribution lines, and distance between well and sewage treatment system). Indicate NORTH on the site plan and the scale of the plan.

I hereby certify that the system at the above referenced address was installed according to the Washington County Individual Sewage Treatment System Ordinance requirements.  
 Signed: Tom Calote MPCA License # 1675 Dated: 8/21/97

WASHINGTON COUNTY SEPTIC PERMIT NUMBER 98-97031