

# Compliance inspection report form

520 Lafavette Road North St. Paul, MN 55155-4194

**Existing Subsurface Sewage Treatment System (SSTS)** 

Doc Type: Compliance and Enforcement

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: 20-031-20-23-0009 Lo	cal regulatory authority: Washington County					
Property address: 14502 Manning Trail N Stillwater, Mn.						
Owner/representative: Alan Feyen	Owner's phone:					
Brief system description: 2 Septic tanks and 1 Pump tank to Mou	und					
System status						
System status on date (mm/dd/yyyy): _5/21/2021						
☐ Compliant – Certificate of compliance*	☐ Noncompliant – Notice of noncompliance					
(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.)	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.					
*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.  Systems failing to protect ground water must be upgrade replaced, or use discontinued within the time required by ordinance.						
Reason(s) for noncompliance (check all applicab	le)					
☐ Soil separation (Compliance component #5) – Failing ☐ Operating permit/monitoring plan requirements (Com Comments or recommendations	ent #3) – Failing to protect groundwater 2500 (Compliance component #3) – Failing to protect groundwater					
Certification						
I hereby certify that all the necessary information has been gather determination of future system performance has been nor can be abuse of the system, inadequate maintenance, or future water us	made due to unknown conditions during system construction, possible					
By typing my name below, I certify the above statements to be to can be used for the purpose of processing this form.	true and correct, to the best of my knowledge, and that this information					
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 do	cumentation (must be attached)					
<ul><li>☑ Soil observation logs</li><li>☑ Locally required forms</li><li>☐ Other information (list):</li></ul>	☐ Tank Integrity Assessment ☐ Operating Permit					
https://www.pca.state.mn.us • 651-296-6300 • 800-657-386	Use your preferred relay service					

1. Impact on public health - Compliance component #1 of 5 Compliance criteria: Attached supporting documentation: ☐ Yes\* ⊠ No System discharges sewage to the Other: ground surface ■ Not applicable System discharges sewage to drain ☐ Yes\* 
☐ No tile or surface waters. System causes sewage backup into ☐ Yes\* ☒ No dwelling or establishment. Any "yes" answer above indicates the system is an imminent threat to public health and safety. Describe verification methods and results: 2. Tank integrity - Compliance component #2 of 5 Compliance criteria: Attached supporting documentation: ☐ Yes\* ☒ No Pumped at time of inspection System consists of a seepage pit, cesspool, drywell, leaching pit, Name of maintenance business: Meyer's or other pit? ☐ Yes\* ⊠ No Sewage tank(s) leak below their License number of maintenance business: 915 designed operating depth? Date of maintenance: 5/21/2021 ☐ Existing tank integrity assessment (Attach) Date of maintenance (mm/dd/yyyy): (must be within three years) If yes, which sewage tank(s) leaks: Any "yes" answer above indicates the system (See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1)) is failing to protect groundwater. ☐ Tank is Noncompliant (pumping not necessary – explain below) Other: Describe verification methods and results:

3. Other compliance conditions – Compliance component #3 of 5	
3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or uns	ecured?
☐ Yes* ☒ No ☐ Unknown	
3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safe	ety? ☐ 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	
Attached capps and accommon to the approach at a second capps and a second capps and a second capps and a second capps are a second capps and a second capps are a se	
4. Operating permit and nitrogen BMP* - Compliance component #4	of 5 Not applicable
4. Operating permit and introgen bivit	O1 3 A 110t applicable
	If "yes", A below is required
	If "yes", A below is required
Is the system operated under an Operating Permit? ☐ Yes ☒ No	If "yes", A below is required
Is the system operated under an Operating Permit? ☐ Yes ☒ No Is the system required to employ a Nitrogen BMP specified in the system design? ☐ Yes ☒ No	If "yes", A below is required If "yes", B below is required
Is the system operated under an Operating Permit? ☐ Yes ☐ No Is the system required to employ a Nitrogen BMP specified in the system design? ☐ Yes ☐ No  BMP = Best Management Practice(s) specified in the system design	If "yes", A below is required If "yes", B below is required
Is the system operated under an Operating Permit?  ☐ Yes ☐ No  Is the system required to employ a Nitrogen BMP specified in the system design? ☐ Yes ☐ No  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 complete.	If "yes", A below is required If "yes", B below is required
Is the system operated under an Operating Permit?  ☐ Yes ☐ No  Is the system required to employ a Nitrogen BMP specified in the system design? ☐ Yes ☐ No  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 complete  Compliance criteria:  a. Have the operating permit requirements been met? ☐ Yes ☐ No	If "yes", A below is required If "yes", B below is required
Is the system operated under an Operating Permit?	If "yes", A below is required If "yes", B below is required
Is the system operated under an Operating Permit?	If "yes", A below is required If "yes", B below is required
Is the system operated under an Operating Permit?	If "yes", A below is required If "yes", B below is required
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https://www.pca.state.mn.us wq-wwists4-31b • 1/11/21

### 5. Soil separation - Compliance component #5 of 5 7/21/2005 Date of installation Unknown (mm/dd/yyyy) ☐ Yes ⊠ No Shoreland/Wellhead protection/Food Attached supporting documentation: beverage lodging? ☐ Soil observation logs completed for the report (Attach) Compliance criteria (select one): separation (Attach) 5a. For systems built prior to April 1, 1996, ☐ Yes ☐ No\* ☐ Not applicable (No soil treatment area) 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. Yes □ No\* 5b. Non-performance systems built April 1, Indicate depths or elevations 1996, or later or for non-performance -18" A. Bottom of distribution media systems located in Shoreland or Wellhead Protection Areas or serving a food, 18" B. Periodically saturated soil/bedrock beverage, or lodging establishment: C. System separation 36" Drainfield has a three-foot vertical separation distance from periodically D. Required compliance separation\* 36" saturated soil or bedrock.\* \*May be reduced up to 15 percent if allowed by Local Ordinance. 5c. "Experimental", "Other", or "Performance" ☐ Yes ☐ No\* 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. \*Any "no" answer above indicates the system is failing to protect groundwater. Describe verification methods and results: 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.



#### Department of Public Health and Environment

14949 62nd Street North PO Box 6 Stillwater MN 55082-0006

Office: 651-430-6655 TTY: 651-430-6246 Fax: 651-430-6730

 Review Fee:
 \$215.00

 Permit Fee:
 \$370.00

 Total Fee:
 \$585.00

 Previous Payment
 \$585.00

 Balance Due
 \$0.00

scanned 8/18/08 BM

Community:

May Township

Permit Number:

0009-05-1

Owner:

Robert Bramstedt

14520 Morgan AVE N

Marine MN 55047-

Applicant:

Robert Bramstedt

# •

#### PERMISSION IS HEREBY GRANTED

To execute the work specified in this permit on the following identified property upon express condition that said persons and their agents, and employees shall conform in all respects to the provisions of Ordinance #128, Washington County Development Code, Chapter Four, Individual Sewage Treatment System Regulations. This permit may be revoked at any time upon violation of any of the provisions of said ordinance.

Project Address:

14502 Manning TR N

Geo Code:

20-031-20-23-0009

Designer:

R E Palmen Inc

Type of System: Standard Mound				Pressure Distribution			
ype of System. Camada	mound				Number Of Laterals:	3	
Design Criteria		Mound	Sizing		Perforation Spacing:	3	Feet
Percolation Rate:	27	Rock Bed Width:	10	Feet	Perforation Diameter:	1/4	Inch
Depth To Restriction:	18	Rock Bed Length:	60	Feet	Head Size:	1.0	Inch
	0.00%	Absorption Width:	20	Feet	Total Head:	21.15	2
Flow Rate:	600	Depth of Clean Sand:	18	Inches	Connection:	Cente	r
Number of Bedrooms:	4	Downslope Dike Width:	10	Feet	Length of Laterals:	58	Feet
		Upslope Dike:	54	Feet	Perforations / Lateral:	20	
		Length of Dike:	108	Feet	Total Perforations:	60	
		Tank Sizes			Gallons Per Minute:	44.4	
Tank 1: 1000 Tank 2:	1000	Tank 3: 0	Lift Station:	0	Lateral Diameter:	2	Inches

#### **Authorized Work/Special Conditions**

1. Install individual sewage treatment system as per approved design in area tested and shown on the site plan.

Permit Issue Date: Permit Expiration Date: 1/21/2005

Pete Ganzel

Senior Environmental Specialist

3

2-1000 1000 Caff 600 H

7-21-05
Palmen excursts
Pough of + Sant
Rock Bed

"MANNING LAKE PRAIRIE"

2ND ADDITION

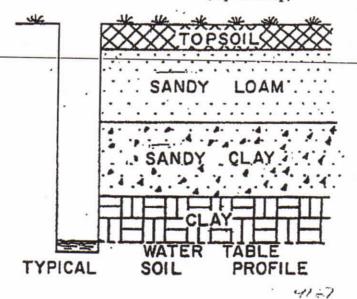
Pt. of Sec.'s 19 & 20, all in T31N R2OW (May Township)

Soil borings are made in order to determine the type and structure of soils at various depths as well as the location of the water table, impervious strata or bedrock.

Borings are most easily made with a hand auger, however other expedients may be utilized - back hoe, post hole auger, etc.

Soils encountered at various depths should be listed as to appearance, texture and composition.

Depth at which water, bedrock or heavy clay layer is encountered should be recorded.



Soil Borings: RS Johnson Soil Testing

Date: October 2004

### LOG OF SOIL BORINGS

BOR	ING NO. 3194		ING NO.	BORI	NG NO.	BORING NO.		
DEPTH IN FEET	SOIL DESCRIPTION DATA BOWN (10/R 3/3)	DEPTH IN FEET	SOIL DESCRIPTION	DEPTH IN FEET	SOIL DESCRIPTION	DEPTH IN FEET	SOIL. DESCRIPTION	
- Commence of the local division in which the local division in the local division in which the local division in the local	(10YR 3/3) Silty Fine Sand	0		0		0		
1/2	Dark Brown (7.5YR 4/4)	1/2		1/2		1/2		
1		1		- 1		1.		
11/2	Silty Fine Sand	-		11/2	·	11/2		
21/2	(End)	21/2		2		2		
3		3		21/2		21/2		
. 31/2		31/2		31/2		3		
4		4		4		31/2		
41/2		41/2		41/2		41/2		
5		5		5		5		
51/2		51/2		51/2		51/2		
6		6		6		6		
61/2		61/2	Ì	61/2		61/2		
7	Mottling	7		7		7		
71/2	Depth: 19"	71/2		71/2		71/2		
8		8	_ ]	8		8		
81/2		81/2		81/2		81/2		
9		9		9		9		

-SOIL BORINGS-

Lot 2, BLOCK I Preliminary Plat "MANNING LAKE PRAIRIE" 2ND ADDITION

Pt. of Sec. 's 19 & 20, all in T31N R20W

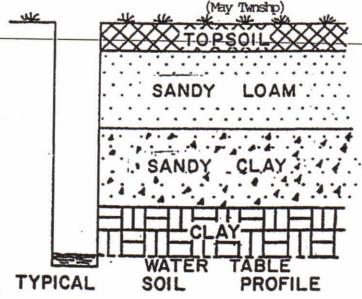
(May Twnshp)

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Depth at which water, bedrock or heavy clay layer is encountered should be recorded.



Soil Borings: RS Johnson Soil Testing

Date: November 2003

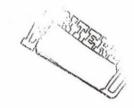
## OF SOIL BORINGS

BOR	ING NO. 319D	BOR	ING NO. 319E	BORI	NG NO. 319F	BORI	NG NO. 3193
DEPTH IN FEET	SOIL DESCRIPTION	DEPTH IN FEET	SOIL DESCRIPTION	DEPTH IN FEET	SOIL	DEPTH IN FEET	SOIL DESCRIPTION
0	(7.5YR 4/4)	0	Dark Brown (10YR 3/3)	0	Dark Brown (7.5YR 4/4)	0	Dark Brown (7.5YR 4/4)
1/2	Silty Fine Sand	1/2	Silty Fine Sand	1/2	Silt Loam	1/2	Silty Fine Sand
1	Reddish Brown (5YR 4/4)	1	Dark Brown (7.5yr 4/4)	ı	Dark Brown (7.5YR 4/4)	1.	Reddish Brown
11/2	Loamy Sand	11/2	(7.5YR 4/4) Silt	11/2	Silty Sand	11/2	(5YR 4/4) Silty Fine Sand
2	(End)	2	(End)	2	(End)	2	(End)
21/2		21/2		21/2		21/2	
3		3		3		3	
. 31/2		31/2		31/2		31/2	
4		4		4	ļ	4	
41/2		41/2		41/2		41/2	
5		5	[	5		5	
51/2		5 1/2		51/2	l	51/2	
6		6		6		6	
61/2		61/2	Ì	61/2	ì	61/2	
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71/2	Mottling	71/2	Mottling	71/2	Mottling	71/2	Mottling
8	Depth: 18"	8	Depth: 18"	8	Depth: 18"	8	Depth: 18"
81/2		81/2		81/2	Ì	81/2	
9		9	Ì	9	}	9	



### **AS-BUILT REPORT** INDIVIDUAL SEWAGE TREATMENT SYSTEM

Washington County Public Health and Environment 14949 62<sup>nd</sup> Street North, PO Box 3803, Stillwater, MN 55082-3803 651/430-6655 FAX 651/430-6730



Septio Tank Information Tenk Manufacturer: Minnesota Precast Industries Dauld Capacity: 2 - 10.00 gallon septic tan  PUMP CHAMBER (if installed)  Tank Manufacturer: Minnesota Precast Industries Dauld Capacity: 10.00 gallon Pump tan  Pump Chamber (if installed)  Tank Manufacturer: Minnesota Precast Industries Dauld Capacity: 10.00 gallon Pump tan  Pump Discharge in Galions Per Minuta: 38 at 30 Feet of Head Number of Galions Pumped Per Cycle: 15.0  DRAINFIELD TRENCH SYSTEM  BED OR MOUND SYSTEM  Midth: Rock Bottom from Finished Grade: Bed Depth from Grade: 10.00 gallon Pumped Per Cycle: 15.0  Method of Distribution: Distribution Box Depth of Mound: 10.00 gallon Pumped Per Cycle: 15.0  Method of Distribution: Distribution Box Depth of Rock Under Pipe: 10.00 gallon Pumped Per Cycle: 15.0  MOUND: Width: Area: 15.00  Depth of Rock Under Distribution Pipe: Depth of Rock Under Pipe: 15.00  Pressure Poolage of Tested Area Used: Perforation Speaking Associated Perforation Speaking Speaking: 15.00 gallon Perforation Speaking Speaking: 15.00 gallon Speaking Speaking Speaking Speaking: 15.00 gallon Speaking Speaking Speaking Speaking Speaking Speaking: 15.00 gallon Speaking Speaki	Legal Description or Complete Street Address	of Septic System installed	-		City or Township					
Owner Name    Mail Address   City   State Zip	14502 Mann	ing Ave. North		May	Tourship					
Installer R. E., Palmen, Fr.c. 155 East Acter St. St. Paul Min n. 55117  Septito Tank Information Tank Manufacturer: Minnesota Precast Industries Usuid Capacity: 2 - 10.00 gal for septic tan Tank Manufacturer: Minnesota Precast Industries Usuid Capacity: 1 - 10.00 gal for pump tan  PUMP CHAMBER (if installed)  Pump Discharge in Gallons Per Minuta: 38 M 30 Feet of Head Number of Gallons Pumped Per Cycle: 150  DRAINFIELD TRENCH SYSTEM SED OR MOUND SYSTEM Width: Length of Each Tranch: Rock Bed Length: Width: Ans: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Owner Name	Mail Address	Gity		,					
R. E. Palmen, Inc. 155 East Acker St. St. Paul Minn. 55117 Septio Tank Information Tenk Manufacture: Minnesotra Precast Industries Uquid Capacity: 1000 gallon pump tan  PUMP CHAMBER (I installed)  Tank Manufacture: Minnesotra Precast Industries Uquid Capacity: 1000 gallon pump tan  PUMP CHAMBER (I installed)  Tank Manufacture: Minnesotra Precast Industries Uquid Capacity: 1000 gallon pump tan  Pump Discharge in Gallona Per Minuta 38 at 30 Feet of Head Number of Gallona Pumped Per Cycle: 50  DRAINFIELD TRENCH SYSTEM  BED OR MOUND SYSTEM  Width: Are: 500  Depth of Trench Bottom from Finished Grade: Bed Depth from Grade: 100 MOUND: 1	Robert Brams	tedt								
Seguitor Tank Information Tank Manufacturer: Minnesota Precast Industries Liquid Capacity: 2 - 10:00 got I on Pump tand  PUMP CHAMBER (if installed)  Tank Manufacturer: Minnesota Precast Industries Liquid Capacity: 10:00 got I on Pump tand  Pump Discharge in Galiona Per Minuta: 38 at 30 Feet of Head Number of Galiona Pumped Per Cycle: 50  DRAINFIELD TRENCH SYSTEM BED OR MOUND SYSTEM  Width: Length of Each Trench: Rock Bed Length: Width: Area: 500  Depth of Trench Bottom from Finished Grade: Bed Depth from Grade: 10:00  Method of Distribution: Distribution Box Dirop Box Depth of Rock Under Pipo: 500  Depth of Rock Under Distribution Pipo: Depth of Rock Under Pipo: 500  Square Footage of Tested Area Used: Perforation Space I and Structures applied tank, pump chamber; line from house to tank treatment system; distribution or drop boxes, well, and Structures, seglic tank, pump chamber; line from house to tank treatment system, distribution ilines, distribution or drop boxes, well, and Structures, seglic tank, pump chamber; line from house to tank treatment system, distribution ilines, distribution or drop boxes, well, and Distribution lines, lands 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 regularings and system of the Washington County Individual Sewage Treatment System Ordinance regularings and system of the Mashington County Individual Sewage Treatment System Ordinance regularings and system distance between well and several regularings and system of the Mashington County Individual Sewage Treatment System Ordinance regularings and system of the System Ordinance			City		State Zip					
Tank Manufacturer: Mr. nnesotra: Precast Industries Uquid Capacity: 1000 gallon septic tan 1000 gallon pump tand 1000 gallon gal	K. E. Yalmen, In	C 155 East	Hcker St. St	taul n	lina. 55117					
Trench Bottom Square Footage Required:  Area As Built:  Liquid Cepacity:  No Peet of Head  Number of Galibns Pumped Per Cycle:  DRAINFIELD TRENCH SYSTEM  BED OR MOUND SYSTEM  Rock Bed Length:  Width:  Lange of Each Trench:  Rock Bed Length:  Pressure  Distribution:  Pressure  Distribution Box  Depth of Rock Under Distribution  Depth of Rock Under Distribution Pipex  Square Footage of Tested Area Used:  PRESSURE DISTRIBUTION SYSTEM  Lateral Inside Dismeter:  Length:  Preforation Spacing:  Specing:  Specing: Specing	Septic Tank Information									
Trench Bottom Square Footage Required:  Area As Built:  Liquid Cepacity:  No Peet of Head  Number of Galibns Pumped Per Cycle:  DRAINFIELD TRENCH SYSTEM  BED OR MOUND SYSTEM  Rock Bed Length:  Width:  Lange of Each Trench:  Rock Bed Length:  Pressure  Distribution:  Pressure  Distribution Box  Depth of Rock Under Distribution  Depth of Rock Under Distribution Pipex  Square Footage of Tested Area Used:  PRESSURE DISTRIBUTION SYSTEM  Lateral Inside Dismeter:  Length:  Preforation Spacing:  Specing:  Specing: Specing		PUMP CHAMBE	R (if installed)							
Pump Discharge in Gallons Per Minuto: 38 at 30 Feet of Head Number of Gallons Pumped Per Cycle: 50    DRAINFIELD TRENCH SYSTEM   BED OR MOUND SYSTEM		Liquid Capacity:	Horsepower of Pump:	10 //						
Pressure   Distribution:   Drop Box   Drop		20			J PENESTAT					
Depth of Trench Bottom from Finished Grade:   Bed Depth from Grade:   Downslope Sand Base Depth:   Depth of Rock Under Pipe:   PRESSURE DISTRIBUTION SYSTEM    Trench Bottom Square Footage Required:   Area As Buill:   Lateral Inside Dismeter:   Length:   Perforation Spacing:   J. // A. // J.	DRAWELL DATE	ANCH BYSY TO								
Depth of Tranch Bottom from Finished Grade:    Bed Depth from Grade:										
Depth of Tranch Bottom from Finished Grade:    Mound	1111111	Edigaron Edigin		. 0	and the second s					
Pressure Distribution Box Drop Box Drop Box Depth of Rock Under Distribution Pipe:  Square Poolage of Tested Area Used:  PRESSURE DISTRIBUTION SYSTEM  Trench Bottom Square Footage Required: Area As Buili:  Lateral Inside Dismeter: Length: Perforation Size; J. Mumber: Perforation Spacing: 38 J. Miles Dismeter: Perforation Spacing: 30 Dismeter: Perforation of the following Items.  Perforation Spacing: Perforation Spacing: Dismeter: Perforation of the following Items.  Perforation Spacing: Perforation Spacing: Dismeter: Perforation of the following Items.  Perforation Spacing: Perforation Spacing: Dismeter: Perforat	Depth of Trench Bottom from Finished Grade		Bed Depth from Grade:							
Square Footage of Tested Area Used:  PRESSURE DISTRIBUTION SYSTEM  Trench Boltom Square Footage Required:  Area As Buili:  Lateral Inside Dismeter:  Length;  Perforation Stag;  A multiple Spacing:  Spacing:  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, 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:  MPCA License #: 493 Dated: 2 - 01 - 05		Вох 🗆 Вгор Вох	MOUND: Upstope Sand Base Depth: / 5 Downslope Sand Base Depth: 20							
Trench Bottom Square Footage Required:  Area As Buill:  Lateral Inside Diameter:  Length:  Perforation Stag:  Perforation Spacing:  Spacing:  Number:  Perforation Spacing:  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 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 regularments.  MPCA License #:	Depth of Rook Under Distribution Pipe:									
Specing:  Specing:  Number:  Perforation Spacing:  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.  MPCA License #: 493 Dated: 2 - 0/-05	Square Footage of Tested Area Used:				YSTEM					
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.  MPCA License #: 1493 Dated: 2 - 01 - 05	Trench Bottom Square Footage Required:	Area As Built:		Length: 48						
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 regularments.  MPCA License #: 1493 Dated: 2 - 01 - 05			specing: 38 MOHES.	Number:						
Signed: MPCA License #: 1493 Dated: 8-01-05	Structures, septic tank, pump driveway. Show all distances between distribution lines, ler	chamber, line from house to tank treats applicable to the sewage treatment system of distribution lines, and distance be	ment system, distribution lin	to tank, tank to treatme	nt system, distance					
2000 05-1	Ordinance requirements.			•						
VASHINGTON COUNTY SEPTIC PERMIT NUMBER: (COC) 1 INSTALLED DATE:		2000	- 0.5 - 1							
An Equal Employment Opportunity/affirmative Action Employer If You Need Assistance Due to Disability or Language Barrier, Please Call 651/430-8655 (TDD 651/439-3220)			tulatfirmative Action Empl	08						

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