

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: 1802920310001

Local regulatory authority: Washington County

Property address: 3275 Manning Ave N Baytown Township, Mn.

Owner/representative: Alan Thompson

Owner's phone: 563-249-6714

Brief system description: 1 Holding Tank

System status

System status on date (mm/dd/yyyy): 6/1/2021

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

1 Holding Tank

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	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
System causes 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.

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?	<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.

Describe verification methods and results:

Attached supporting documentation:

Pumped at time of inspection

Name of maintenance business: Meyers

License number of maintenance business: 915

Date of maintenance: 6/1/2021

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: Holding Tank

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

- 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

- 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 _____ 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.

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	N/A
B. Periodically saturated soil/bedrock	N/A
C. System separation	N/A
D. Required compliance separation*	N/A

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

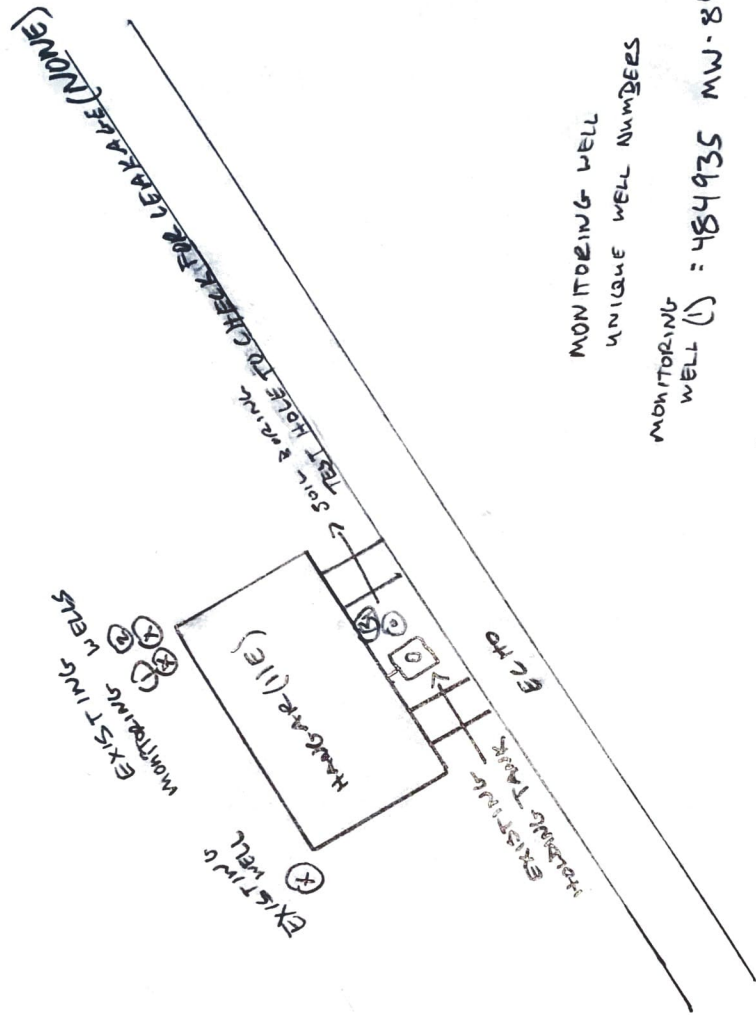
***Any "no" answer above indicates the system is failing to protect groundwater.**

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.

LAKE ELMO AIRPORT HANGAR (11E) BAYTOWN TOWNSHIP, MN
 3275 MANNING AVE. N. BAYTOWN TOWNSHIP, MN.

NT
 NO SCALE



SOIL BORING LOG	
(B1)	
0' - 18" =	MIXED FILL CLAY LOAM
18" - 48" =	10YR 4/3 SANDY CLAY LOAM

MONITORING WELL
 UNIQUE WELL NUMBERS

MONITORING WELL (1) = 484935 MW-8PL

MONITORING WELL (2) = 494942 MW-85L



Tri-City / William Lloyd Analytical Laboratory
9300 Poplar Bridge Road • Bloomington, MN 55437 • (952) 563-4904

Sample Results Report

Dave Brown
4787 Radio Dr.
Woodbury, MN 55129

Report Date:
06/02/2021 12:28

Received By: Deb Weltzin
Received Date / Time: 01-Jun-2021 13:08

Sample Condition Upon Receipt:
 Acceptable Temperature 5.5 °C
 On ice

Sample ID: 2106018-01
3275 Manning Ave N Baytown, MN 55042 (Hanger 11E)
Sample Collector: Dave Brown
Collection Date/Time: 6/1/2021 11:12:00AM

Analyte	Result	Units	MCL*	Date Analyzed	Analyst Initials	Method
Nitrate as N	2.45	mg/L	10	06/02/2021 12:05	AT	EPA 353.2 Rev. 2.0
P/A total coliform	Absent	MPN/100 mL	Absent	06/01/2021 07:25	DJW	SM 9223 B (Colliert-18® P/A)

*MCL (maximum contaminant level) set by the EPA

PASS - The analyte(s) reported, for the sample(s) listed above, meet standards set by the Minnesota Department of Health and U. S. Environmental Protection Agency for safe drinking water.

Approved By:

Aaron Tschida
Operator

Laboratory Identification Number: 027-053-355

The results in this report apply to the above listed sample(s). All routine quality assurance procedures were followed, unless otherwise noted. This analytical report must be reported in its entirety. All methods are certified by the Minnesota Department of Health, unless otherwise noted. EPA 200.7 for the analysis of lead, EPA 300.0 for the analysis of chloride & sulfate, EPA 365.3 for the analysis of total phosphate, SM 4500P-E for the analysis of ortho phosphate, and SM 2510B for the analysis of conductivity in drinking water are not certified by the MDH. The test report shall not be reproduced except in full, without written approval of the laboratory.