

## Compliance inspection report form **Existing Subsurface Sewage Treatment System (SSTS)**

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

Doc Type: Compliance and Enforcement

Instructions: Inspector must submit completed form to Local Governmental Unit (LGU) and system owner within 15 days of final determination of compliance or noncompliance. Instructions for filling out this form are located on the Minnesota Pollution Control Agency (MPCA) website at <a href="https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf">https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf</a>.

Property information	Local tracking number:
Parcel ID# or Sec/Twp/Range: 19.031.19.43.0011	Reason for Inspection property sale
Local regulatory authority info: Washington County 651-430-66	
Property address: 14155 St Croix Trail N Stillwater, MN 55082	
Owner/representative: Karl Myhre	Owner's phone: 651-295-8722
Brief system description: septic tank and a pump tank lifting to a	
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System status	
System status on date (mm/dd/yyyy): 6/10/2021	
☑ 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	Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.
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
*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.	of this notice or within a shorter period if required by local ordinance or under section 145A.04 subdivision 8.
Reason(s) for noncompliance (check all applicab	le)
☐ 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 compone	ent #3) – Imminent threat to public health and safety
☐ Other Compliance Conditions (Compliance compone	ent #3) – Failing to protect groundwater
System not abandoned according to Minn. R. 7080.2	2500 (Compliance component #3) – Failing to protect groundwater
Soil separation (Compliance component #5) – Failing	
Operating permit/monitoring plan requirements (Com	pplance component #4) – Noncompliant - local ordinance applies
Comments or recommendations	
Reviewed septic system records on file with Washington (	County
Certification	
	o determine the compliance status of this system. No determination of on conditions during system construction, possible abuse of the system,
	and correct, to the best of my knowledge, and that this information can be
Business name: All State Septic Services LLC	Certification number: 323
Inspector signature: _ Tom Trooien	License number: 1568
(This document has been electronically sign	
Necessary or locally required supporting do	cumentation (must be attached)
	equired forms  Tank Integrity Assessment  Operating Permit
Other information (list):	Addition to the integrity Assessment.   ☐ Operating Permit

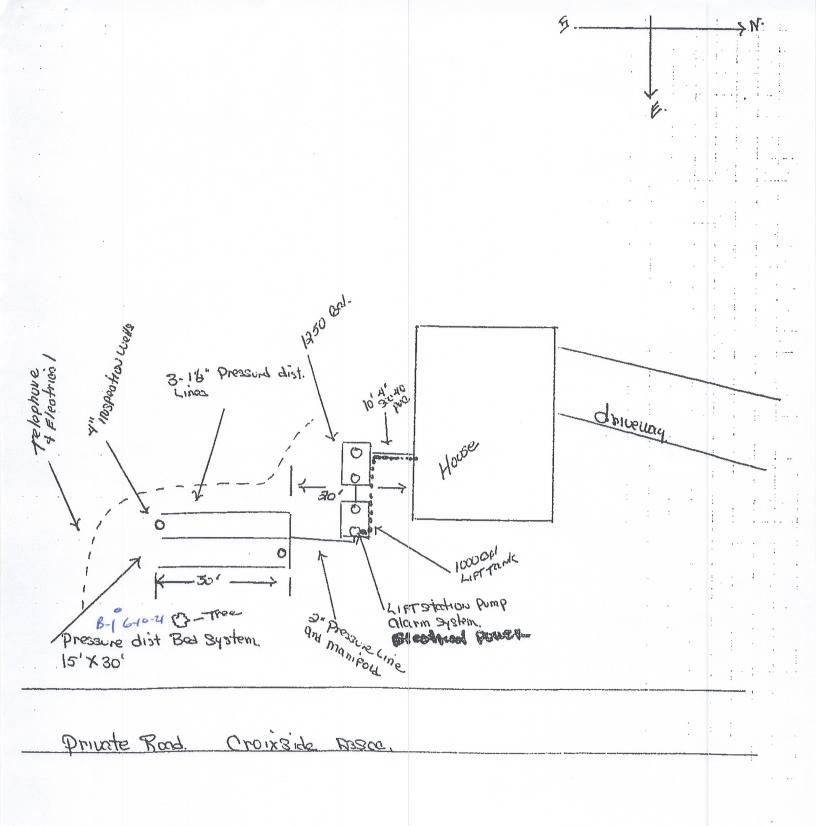
mpact on public health – Con	npliance com	ponent #1 of 5	
Compliance criteria:		Attached supporting documentation:	
System discharges sewage to the ground surface	☐ Yes*        No	☐ Other: ☐ Not applicable	
System discharges sewage to drain tile or surface waters.	☐ Yes*	Not applicable	
System causes sewage backup into dwelling or establishment.	☐ Yes*        No		
Any "yes" answer above indicates th imminent threat to public health and		_	
Describe verification methods and re	esults:		
ank integrity — Compliance co	omponent #2	of 5  Attached supporting documentation:	
Compliance criteria:  System consists of a seepage pit,	omponent #2 ⊐ Yes* ⊠ No	Attached supporting documentation:  Empty tank(s) viewed by inspector	
Compliance criteria:		Attached supporting documentation:  Empty tank(s) viewed by inspector	Meyer's So
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their		Attached supporting documentation:  Empty tank(s) viewed by inspector	Service
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	J Yes* ⊠ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business:  License number of maintenance business:  Date of maintenance:	Service
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their	J Yes* ⊠ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business:  License number of maintenance business:  Date of maintenance:	Service _915
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their	J Yes* ⊠ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business:  License number of maintenance business:  Date of maintenance:	Service _915 6/10/2021
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their designed operating depth?	☐ Yes* ☑ No ☐ Yes* ☑ No ☐ Yes* ☑ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business:  License number of maintenance business:  Date of maintenance:  Existing tank integrity assessment (Attach)  Date of maintenance	Service _915 6/10/2021 ree years)
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their designed operating depth?  If yes, which sewage tank(s) leaks:  Any "yes" answer above indicates	☐ Yes* ☑ No ☐ Yes* ☑ No ☐ Yes* ☑ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business: License number of maintenance business: Date of maintenance: Existing tank integrity assessment (Attach) Date of maintenance (mm/dd/yyyy): (See form instructions to ensure assessment Minn. R. 7082.0700 subp. 4 B (1))  Tank is Noncompliant (pumping not necessary)	Service _915 6/10/2021 ree years)
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Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their designed operating depth?  If yes, which sewage tank(s) leaks:  Any "yes" answer above indicate is failing to protect groundwater.  Describe verification methods and retained to the septic tank was pumped during the	☐ Yes* ☑ No ☐ Yes* ☑ No ☐ Yes* ☑ No es the system esults:	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business: License number of maintenance business: Date of maintenance: Existing tank integrity assessment (Attach) Date of maintenance (mm/dd/yyyy): (See form instructions to ensure assessment Minn. R. 7082.0700 subp. 4 B (1))  Tank is Noncompliant (pumping not necessary)	Service _915 6/10/2021 ree years) at complies
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Pi	operty Address: 14155 St Croix Trail N Stillwater, MN 55082
В	siness Name: All State Septic Services LLC Date: 6/10/2021
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:
	and total methods and results.
	Attached supporting documentation:   Not applicable
4.	Operating permit and nitrogen BMP* – Compliance component #4 of 5 ⋈ Not applicable
	ls 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:

Business Name: All State Septic Services LLC			Date:	6/10/2021
. Soil separation – Compliance co	mpone	nt #5 o	f 5	
Date of installation 9/28/1990 (mm/dd/yyyy)	_ Unkn	own		
Shoreland/Wellhead protection/Food beverage lodging?	Yes	□No	Attached supporting documentation  ☑ Soil observation logs completed for	
Compliance criteria (select one):			☐ Two previous verifications of require	d vertical separation
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 🗆 Yes	□ No*	☐ Not applicable (No soil treatment are	ea)
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.				
5b. Non-performance systems built	⊠ Yes	□ No*	Indicate depths or elevations	
April 1, 1996, or later or for non- performance systems located in Shoreland	,		A. Bottom of distribution media	2.3
or Wellhead Protection Areas or serving a			B. Periodically saturated soil/bedrock	6
food, beverage, or lodging establishment:  Drainfield has a three-foot vertical			C. System separation	3.7
separation distance from periodically			D. Required compliance separation*	3
saturated soil or bedrock.*			*May be reduced up to 15 percent if al Ordinance.	lowed by Local
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 (Intermediate Inspector License required ≤ 2,500 gallons per day; Advanced Inspector License required > 2,500 gallons per day)		□ No*		
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.				
*Any "no" answer above indicates the failing to protect groundwater.	system is	s		

**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, 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.

800-657-3864



Permit # 92.25
William Klein
14155 3t Otoix to 12.
Stillwater min socas.
450 80 Pt Pressure dist
Bed System. Instilled 12"
Into Stode.

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-	VERSITY OF MINNESOTA	NSITE .	SEWAGE	REATMENT	ROGRAM

## Soil Observation Log

	DOLL DESCRIPTION FOR	5			
			Project ID:		v 04.01.2021
Karl Myhre	yhre	Location / Address:	Address:	14155 St Cr	14155 St Croix Trail N Stillwater, MN 55082
rial(s): (Check all that apply)	Outwash Lacustrine	Loess	Ailuvium	Bedrock	Organic Matter
ion: (select one)	Slope %:	Slope shape			Elevation-relative to benchmark:
	Soil survey map units:				Limiting Layer Elevation:
Time of Days				4	70,071,70

Client:			Karl Mynre		Locat	Location / Address:	14155 St (	roix Trail N Still	14155 St Croix Trail N Stillwater, MN 55082
Soil parent n	Soil parent material(s): (Check all that apply)	ck all that	Ш	Outwash Lacustrine	Loess	Aliuvium	Bedrock	Organic Matter	Matter
Landscape Po	Landscape Position: (select one)	(auc		Slope %:	Slope shape			Elevation	Elevation-relative to benchmark:
Vegetation:			S	Soil survey map units:				Limiting Layer Elevation:	Elevation:
Weather Con	Weather Conditions/Time of Day:	Day:					Date	ŏ	06/10/21
Observati	Observation #/Location:		B-1			Observa	Observation Type:		Auger
Depth (in)	Texture	Rock Frag %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)			[
I		S	10YR 3/3			<b>-</b>	Shape	Grade	Consistence
/-ò	topsoil	**************************************					A 6440 6440 64		
7 78	pass / waso	300 300 30	10YR 4/3			•	•		
07-7	toainy saira								
78-77	fine cand	X	10YR 4/4			***********			
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Comments									
I hereby cert	ify that I have c	ompleted t	I hereby certify that I have completed this work in accordance with		all applicable ordinances, rules and laws.	and laws.			
	Tom Trooien		Tom Trooien	oien			1568		6/10/21
(De	(Designer/Inspector)	(.		(Signature)		(Li	(License #)		(Date)
	STATE OF THE PARTY								