

Compliance inspection report form

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: 3203119320009 Local regulatory authority: Washington County

Property address: 12381 Riverview Trail N Stillwater, Mn 55082

Owner/representative: Michael Sitzenstock Owner's phone: 952-210-0710

Brief system description: 2 septic tanks to drainfield

System status

System status on date (mm/dd/yyyy): 7/13/2021

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	<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: _____

License number of maintenance business: _____

Date of maintenance: _____

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

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 9/21/2006 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	36"
B. Periodically saturated soil/bedrock	72"
C. System separation	36"
D. Required compliance separation*	36"

*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.

Permit Fee:	\$115.00
Total Fee:	\$115.00
Previous Payment	\$115.00
Balance Due	\$0.00

Community: May Township
Permit Number: 0009-06-16
Owner: Dan Lang Homes
 221 Myrtle ST E
 Stillwater MN 55082-
Applicant: Dan Lang Homes



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: 12381 Riverview TR N
Geo Code: 32-031-19-32-0009
Designer:

Type of System: Standard Drainfield		Pressure Distribution	
		N / A	
Design Criteria		Drainfield Sizing	
Percolation Rate:	14	Square Feet:	1500
Depth To Restriction:	72	Lineal:	500 Feet
Land Slope:	3.00%	Depth Of Rock Below:	12 Inches
Flow Rate:	750	Maximum Trench Depth:	36 Inches
Number of Bedrooms:	5	Number Of Trenches:	5
<input type="checkbox"/> Gravelless		Length Of Trenches:	100 Feet
<input type="checkbox"/> Chambered		Spacing Of Trenches:	7 Feet
Tank Sizes			
Tank 1:	1500	Tank 2:	1000
Tank 3:	0	Lift Station:	0

Authorized Work/Special Conditions

1. Install individual sewage treatment system as per approved design in area tested and shown on the site plan.
2. Maximum trench depth 36 inches into natural soil.
3. This system must be installed by a certified/licensed sewage treatment system installer holding a current license with the Minnesota Pollution Control Agency. (A list of installers is available at your request.)

Pete Ganzel
 Senior Environmental Specialist

Permit Issue Date: 8/30/2006
Permit Expiration Date: 8/30/2007

0009-06-16

DAN LANG HOMES
 LOT 10, Bk 2
 ARGOLA PRESERVE
 MAY TWP.

SCALE: 1" = APPROX. 50'

NOT A SURVEY
 VERIFY LOT LINES

North

1500 SQ. FT. DRAINFIELD

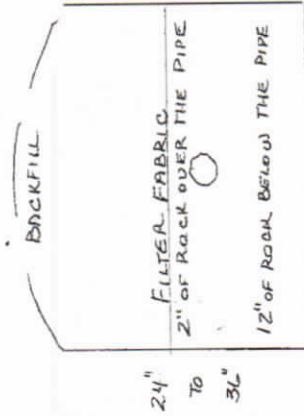
5 RUNS - 100' LONG

3 1/2" WIDE - 24" TO 36" DEEP

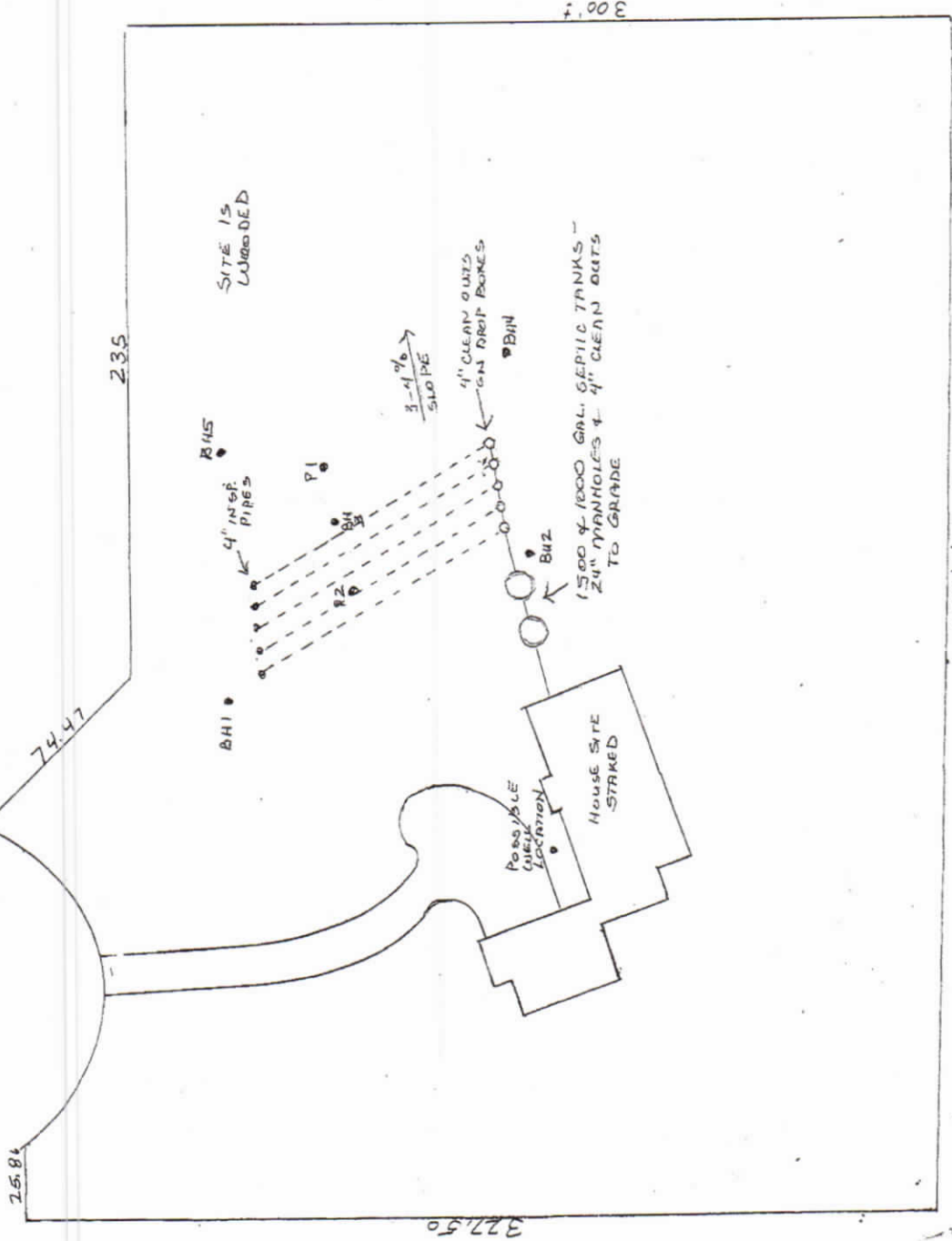
7 1/2" CENTER TO CENTER TRENCH SPACING

FOLLOW THE CONTOURS

KEEP BOTTOM OF TRENCH LEVEL



NEW TEST SITE
 7-31-2004





SITE REVIEW and/or SEPTIC PERMIT APPLICATION
Washington County Public Health & Environment
 14949 62nd Street N, PO Box 6, Stillwater, MN 55082-0006
 651/430-6688 FAX 651/430-6730

Paid \$ _____

Make checks payable to WASHINGTON COUNTY

Receipt # _____

- | | |
|--|---|
| \$215 - Drainfield System Permit | \$205 - Individual Lot |
| \$350 - Mound System Permit | \$140 - Subdivision Soil/Site Review - Base fee |
| \$350 - Alternative/Experimental System | Plus \$65/lot |
| \$ 85 - Additional Review Fee (1 hour minimum) | \$105 - Renewal of an Expired Permit |

0009-0417

Legal Description and Parcel Identification Number (especially if this is for a NEW SUBDIVISION OR MINOR SUBDIVISION) TL 31 H
SEC 31
RA 19-20 W

LOT 10 BLOCK 2 ARCOLA PRESERVE MAY TUSA

Applicant DAN LANG HOMES Address 221 E. MYRTLE ST. City STILLWATER State MN Zip 55082 Phone _____

Owner (if different from applicant) Address 439-3430 City _____ State _____ Zip _____ Phone _____

New Home Existing Home New Business Existing Business Number Of Bedrooms: 5 Gallons Per Day: 750

Check the following fixture(s) which are or will be installed Garbage Disposal _____ Recreational Bathing Facility: (jacuzzi, hot tub, etc.) _____

New Home Drainfield System Mound System Alternate/Experimental System Existing Permit Renewal

Existing Home Replacement System Drainfield System Mound System Tank Replacement Only

Site Approval Only If this site has been previously approved, attach copy of approval letter Additional Soil Test Data for Previously Approved Site

The following exhibits are required as part of this application and shall be attached hereto: Percolation Test Reports; Soil Boring Logs; Site Plan drawn to scale showing location of buildings, lot lines, percolation test holes, soil boring holes, proposed location of system and well; one (1) copy of the System Design; and one (1) copy of the Final Building Plan. The house and the drainfield areas must be staked. Inaccurate or incomplete information will result in delays in processing.

AGREEMENT. The undersigned hereby makes Application for Permit to Install or Extend Sewage Treatment System herein specified, agreeing that all such work shall be done in strict accordance with ordinances and regulations of the County of Washington, Minnesota. Applicant agrees that the Site Plan, Sketches and Design submitted herewith, and which are reviewed by Washington County, together with any requirement and/or restriction made necessary by conditions peculiar to a particular location, shall become a part of the permit. Applicant further agrees to provide access, at reasonable times, to Washington County for the purpose of performing inspections required and that no part of the system shall be covered until it has been inspected and accepted. **APPLICATION IS FOR AN INSTALLATION AT A SPECIFIC LOCATION; ANY DEVIATION FROM THE APPROVED LOCATION WILL VOID THE PERMIT.** It shall be the responsibility of the applicant for the permit to notify the Office of the Washington County Dept. of Public Health & Environment that the installation is ready for inspection.

I hereby certify the above to be true and correct. In connection with your request for a soil review/septic permit, I hereby give Washington County Department of Public Health and Environment permission to enter upon my property during normal business hours for the purpose of determining the suitability of the location, design, and construction, which may include minor excavation or soil borings by the Department.

DAN LANG
BY [Signature]

8-2-2004

Signature of Applicant (Owner or Contractor)

Date

THE AREA BELOW IS FOR COUNTY USE ONLY

SITE EVALUATION BY INSPECTOR _____ DATE _____

SETBACKS:	REQUIRED (CIRCLE APPROPRIATE ITEM(S))					ACTUAL
Well (including adjacent property)	50'	75'	100'	150'		
Weiland, Pond, Lake, Stream, River, or Bluffline	20'	40'	75'	100'	150'	

CONCLUSIONS: Site Suitable Site Unsuitable: Additional Tests Required: Verify Use: _____ Bedrooms _____

NOTES: Lot Size _____ Year Built _____

3203119320009
12381 River View TRAIL N

JOB DAN LANG HOMES
 LOT 10, BUK 2, ARCOLA PRESERVE
 MAY TUSR

BORING LOG

DATE 7-31-04

NEW TEST SITE

BOREHOLE DIAMETER 4" - 3 1/2" - 2 1/2"
 H/BD AUGER

DEPTH FEET	HOLE #1	HOLE #2	HOLE #3	HOLE #4	HOLE #5	SOIL CLASSIFICATION
1	TOP SOIL - BROWN, SANDY LOAM	TOP SOIL - BROWN LOAM	TOP SOIL - BROWN LOAM	TOP SOIL - BROWN, SANDY LOAM	TOP SOIL - BROWN, SANDY LOAM	TOP SOIL - BROWN LOAM 7.5YR 4/4
2	YELLOWISH BROWN FINE SAND - SILTY	YELLOWISH BROWN SANDY LOAM	YELLOWISH BROWN, FINE SAND - SILTY	YELLOWISH BROWN, FINE SAND WITH LOAM	YELLOWISH BROWN, FINE SAND - SILTY - ROCKS	YELLOWISH BROWN, LOAM & SAND 10YR 5/8
3						LIGHT BROWN SAND 7.5YR 4/3
4	LIGHT BROWN, FINE SAND SILTY	LIGHT BROWN, FINE TO MEDIUM SAND	LIGHT BROWN, FINE TO MEDIUM SAND - ROCKS - OBSTRUCTION STOP	LIGHT BROWN, FINE TO MEDIUM SAND		
5						
6						
7	STOP OKAY 6'	STOP OKAY 6'	1 1/2" AUGER USED THE LAST 12"	STOP OKAY 6'	1 1/2" AUGER USED THE LAST 12"	
8						
9						



Tri-City / William Lloyd Analytical Laboratory

9300 Poplar Bridge Road • Bloomington, MN 55437 • (952) 563-4904

Dave Brown 4787 Radio Dr. Woodbury, MN 55129	Sample Results Report	Report Date: 07/15/2021 07:23
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Received By: Deb Weltzin Received Date / Time: 14-Jul-2021 9:15	Sample Condition Upon Receipt: <input type="checkbox"/> Acceptable Temperature <u>5.1</u> °C <input checked="" type="checkbox"/> On ice
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Sample ID: 2107111-01
12381 Riverview Trail N Stillwater, MN 55082
Sample Collector: Dave Brown
Collection Date/Time: 7/13/2021 12:19:00PM

Analyte	Result	Units	MCL*	PASS	Date Analyzed	Analyst Initials	Method
Nitrate as N	<0.0500	mg/L	10	PASS	07/14/2021 10:04	DJW	EPA 353.2 Rev. 2.0
P/A total coliform	Absent	MPN/100 mL	Absent	PASS	07/14/2021 07:23	DJW	SM 9223 B (Collert-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: *Deb Weltzin*

Deb Weltzin
Water Quality Supervisor