Property addr	ress:	Parcel ID:	Hary 17 B	allone	Lane		
City:	State:	Zip code:	Je	Marys	Point	Mn	. 55043
				, 0		(	
				ance Certific	· //r · )		

this form, completed, may serve as a tank integrity assessment.

Instructions: This section of the form may be completed and signed by a Designated Certified Individual (DCI) of a licensed SSTS Maintenance Business who personally conducts the necessary procedures to assess the compliance status of each sewage tank in the system.

When this section of the form is signed by a qualified certified professional, it becomes necessary supporting documentation to an Existing System Compliance Inspection Report: Compliance inspection form - Existing system (wg-wwists4-31b). This form can be found on the MPCA website at https://www.pca.state.mn.us/water/service-and-maintenance.

The information and certified statement on this form is required when existing septic tank compliance status is determined by an individual other than the SSTS Inspector that submits an inspection report. This form represents a third party assessment of SSTS component compliance and is allowable under Minn. R. 7082.0700, subp. 4 Item (B) subitem (1). This form is valid for a period of three years beyond the signature date on this form unless a new evaluation is requested by the owner or owner's agent or is required according to local regulations. Additional Administrative Rule references for this activity can be found at Minn. R. 7082.0700, subp. 4 Items B, C, and D; 7083.0730 Item C.

Notice of sewage tank non-compliance

Select all that apply:
The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit — "Failure to Protect Groundwater."  It has a sewage tank that was designed to be watertight, but subsequently leaks below the designed operating depth — "Failure to Protect Groundwater."  It presents a threat to public safety by reason of unsecured, damaged, or weak maintenance hole cover(s) or other unsafe condition — "Imminent Threat to Public Health or Safety."
gnated Certified Individual (DCI) information
ame: CHRIS WAGNER
cation number: 976 1
1

Maintenance Business. I personally conducted the necessary procedures to assess the compliance status of each sewage tank

By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that

That's Massin Date (mm/dd/yyyy):

651-296-6300 800-657-3864 Use your preferred relay service www.pca.state.mn.us

Available in alternative formats

Designated Certified Individual's signature:

this information can be used for the purpose of processing this form.

Certificate of sewage tank compliance

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in this SSTS.

6/16/2021