

## 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 checked="" type="checkbox"/> Yes* <input type="checkbox"/> No |
| Sewage tank(s) leak below their designed operating depth?                        | <input checked="" type="checkbox"/> Yes* <input type="checkbox"/> No |
| If yes, which sewage tank(s) leaks:  | The only one they have from 1964                                     |

*Any "yes" answer above indicates the system is failing to protect groundwater.*

### Describe verification methods and results:

Probed tank - dirt bottom

### 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: \_\_\_\_\_