

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 https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf.

Property information	Local tracking	number:
Parcel ID# or Sec/Twp/Range: 2503220110001	Reason for Inspection	Purchase of home
Local regulatory authority info: Washington County		
Property address: 16061 Oakhill Road North - Scandia		
Owner/representative: Larry Bies		Owner's phone: 651-235-0223
Brief system description: 1250 septic tank with 4 90' drain field li	ines (gravity fed)	
System status		
System status on date (mm/dd/yyyy): 10/5/2021		
□ Compliant – Certificate of compliance*	☐ Noncompliant - Notice	ce of noncompliance
(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 exist in Local Ordinance.)		ound water must be upgraded, replaced, or ime required by local ordinance.
	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.	
*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.		
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 p	public health and safety
☐ Other Compliance Conditions (Compliance components)	ent #3) – Failing to protect gr	roundwater
System not abandoned according to Minn. R. 7080.2		nt #3) – Failing to protect groundwater
Soil separation (Compliance component #5) – Failing		
Operating permit/monitoring plan requirements (Com	npliance component #4) – No	oncompliant - local ordinance applies
Comments or recommendations		
Certification		
	to determine the compliance of	satua of this quatern No data-mination of
I hereby certify that all the necessary information has been gathered to future system performance has been nor can be made due to unknow inadequate maintenance, or future water usage.		
By typing my name below, I certify the above statements to be true used for the purpose of processing this form.	and correct, to the best of my l	knowledge, and that this information can be
Business name: SS Septic Solutions, LLC		Certification number: 9917
Inspector signature:		License number: 4137
This document has been electronically sign	ned)	Phone: 651-343-9117
Necessary or locally required supporting do		
☐ Soil observation logs ☐ System/As-Built ☐ Locally re	equired forms	grity Assessment
Other information (list):		