

# Compliance inspection report form

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

**Existing Subsurface Sewage Treatment System (SSTS)** 

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.

	number:
Reason for Inspection	Property Transfer
	•
	Owner's phone: 612-799-6006
☐ Noncompliant – Noti	ce of noncompliance
use discontinued within the t	ound water must be upgraded, replaced, or time required by local ordinance.
	health and safety (ITPHS) must be se discontinued within ten months of receip
	rter period if required by local ordinance or
able)	
#1) – Imminent threat to public ing to protect groundwater	health and safety
	public health and safety
	•
	ent #3) - Failing to protect groundwater
The state of the s	,
	loncompliant - local ordinance applies
	tatus of this system. No determination of onstruction, possible abuse of the system,
rue and correct, to the best of my	knowledge, and that this information can be
	Certification number: 9370
	License number: 3649
signed)	Phone: 651-788-3296
documentation (must b	as attached)
ACAD A DEPT CAPTE CAPTER A PROPERTY OF PERSONS ASSESSED.	ne attached)
iocumentation (must k	70 41141071047
y required forms 🛭 Tank Inte	
1 0 0 3	Noncompliant – Noti  Systems failing to protect gruse discontinued within the at the state of this notice or within a shounder section 145A.04 subditable)  #1) – Imminent threat to publicating to protect groundwater conent #3) – Imminent threat to protect groundwater conent #3) – Failing to protect groundwater compliance component #4) – Note that the state of the sta

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* ⊠ No	
System causes sewage backup into dwelling or establishment.	☐ Yes* ☒ No	
Any "yes" answer above indicates imminent threat to public health a		
Describe verification methods and	d results:	
<b>nk integrity</b> – Compliance	e component #2	of 5
<b>nk integrity</b> – Compliance Compliance criteria:	e component #2	
Compliance criteria:	e component #2	Attached supporting documentation:
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit,		Attached supporting documentation:  □ Empty tank(s) viewed by inspector
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their		Attached supporting documentation:
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their	☐ Yes* ⊠ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business:
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their	☐ Yes* ⊠ No	Attached supporting documentation:  Empty tank(s) viewed by inspector  Name of maintenance business:  License number of maintenance business:
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their	☐ 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  10/11/2021
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	☐ 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)
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 10/11/2021 (must be within three 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 complies with

Usiness Name:Dave Blown	roperty Address: 12855 103rd St N Stillwater, Mn. 55082	
3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?    Yes.*	Business Name: Dave Brown	Date: 12/14/2021
3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?    Yes.*		
3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?	Other compliance conditions – Compliance component #3 of 5	
Yest   No   Unknown		unsecured?
3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety?   Yes.   No   Unknow "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    3d. System not abandoned in accordance with Minn. R. 7080.2500?   Yes.   No    3d. System is a failing to protect groundwater.  Describe verification methods and results:    Describe verification methods and results:   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 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:   Answer in the property functioning?   Yes.   No    Any "no" answer indicates noncompliance.    Describe verification methods and results:		unscoured:
*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?		cafety2 □ Ves* □ No □ Hakası
3c. System is non-protective of ground water for other conditions as determined by inspector?		salety! I les Milo I dikilow
3d. System not abandoned in accordance with Minn. R. 7080.2500?  "Yes to 3c or 3d - System is failing to protect groundwater.  Describe verification methods and results:  Attached supporting documentation: □ Not applicable □  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  ### ### ############################		2 D Vast M Na
*Yes to 3c or 3d - System is failing to protect groundwater  Describe verification methods and results:  Attached supporting documentation:   Not applicable      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 require    Is the system required to employ a Nitrogen BMP specified in the system design?   Yes   No   If "yes", B below is require    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 property functioning?   Yes   No    Any "no" answer indicates noncompliance.  Describe verification methods and results:		
Attached supporting documentation:  Not applicable    Operating permit and nitrogen BMP* — Compliance component #4 of 5  Not applicable    Is the system operated under an Operating Permit?		☐ fes ☐ No
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Is the system required to employ a Nitrogen BMP specified in the system design?  Yes No If "yes", B below is require the 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:		
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?		
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Attached connection decomposition.		
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Attached come ation decompositations.     Operation constitution		
Attached oursestion decompositotions.     Operation county (Attach)		
Attached comparties decompartations.		
Attached consertion decompetations		

https://www.pca.state.mn.us wq-wwists4-31b • 4/28/2021

usiness Name:Dave B	Brown			Da	te: 12/14/2021
Soil separation	– Compliance cor	npone	nt #5 o	f 5	
Date of installation	5/25/1989 (mm/dd/yyyy)	Unkn	iown		
Shoreland/Wellhead beverage lodging?		⊠ Yes	□ No	Attached supporting documentate  Soil observation logs completed	for the report
Compliance criteri	a (select one):				uired vertical separation
5a.For systems built p not located in Shor Protection Area or beverage or lodgin	not serving a food,	☐ Yes	□ No*	☐ Not applicable (No soil treatment	area)
Drainfield has at le separation distance saturated soil or be					
5b. Non-performance		⊠ Yes □ No*	☐ No*	Indicate depths or elevations	
April 1, 1996, or lat	ter or for non- ms located in Shoreland			A. Bottom of distribution media	32"
or Wellhead Protect	ction Areas or serving a		B. Periodically saturated soil/bedro	ck 72"	
Drainfield has a thr	lodging establishment:			C. System separation	40"
separation distance	from periodically			D. Required compliance separation	n* 36"
saturated soil or be	edrock.*			*May be reduced up to 15 percent Ordinance.	if allowed by Local
systems built unde Type IV or V system Rules 7080, 2350 ( (Intermediate Inspe- 2,500 gallons per of License required >	ms built under 2008 or 7080.2400 ector License required ≤ day; Advanced Inspector 2,500 gallons per day) e designed vertical e from periodically	Yes	□ No*		

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.

· WELL DRIVEWAY WELL EXISTING SEPTIC TANK NO NO SCALE 5.6 DRAINFIELD 12855 103rd ST.N. STILLWATER, MN. 55082

FEE: \$ 7500

#### WASHINGTON COUNTY, MINNESOTA

Sewage Treatment Permit No. 5/30

Inspection of Installation Must Be Made By the Building Offical Before Any Portion of System is Covered
Contact Planning Department, 779-5444, 24 Hour Notice Required

Contact Planning Department, 779-5444, 24 Hour Notice Required
OWNER JOE WHITE PIN: 95664-3000
Property Description LOT/BLK 2 SIL VAR LAKE ESMITES
Property Address 12855 103 RD CTREST N
Use of Building: Home Flow Rate: 580 Pm /900 Percolation Rate: 10 mp
Septic Tank Septic Tank Gal. Liquid Capacity Lift Station (if needed) Gal.
Type of System: PRID BOX STEET ALL KIND
Absorption Trench — Square Feet Lineal Feet Width 36
Depth of Rock Below Lines 12 Inches, Above Lines 2 Inches
Depth of Trench From Existing Grade — Minimum 26 Inches, Maximum 42 Inches
Recommended Number of Lines 260 84 (Note: Maximum Length of Individual Line is 100 Feet.)
Minimum Spacing of Lines 71/2 Ft. Center to Center
Special Conditions DYSTER TO GO /N NASA 1 = 9750 AND AS INDICATED ON ATTACHES SITE PLAN.
PERMIT: Permission is hereby granted to the above named applicant to perform the work described in the application to the minimum specifications shown above and per attached site plan. This permit is granted upon express condition that the person to whom it is granted, and his agents, employees and workmen shall conform in all respects to ordinances of Washington County, Minnesota. This permit may be revoked at any time upon violation of any said ordinance, and permit shall be void if work is not commenced within six (6) months.  INSTALLER MUST HOLD CURRENT SEPTIC INSTALLER LICENSE WITH WASHINGTON COUNTY.  Approved:  Date  Soning Administrate/Muthor/tzed Agent
Comments Dennis dellowho inclallar
Installation Approved Questil Confession Date 5.25.89
Distribution: White—Applicant Canary—File Pink—Inspector Goldenrod—Municipality Form 2501 Wash Co 4

RECEIVED APR 2 3 1989 Application Fee \$75.00 Permit Fee \$75.00\_ 'Additional Reviews \$25.00/hr. (1 hr. min.) Reinspection Fee \$25.00/hr. (1 hr. min.) Washington County Planning Dept. 14900 - 61st Street North Stillwater, Minnesota 55082 APPLICATION FOR PERMIT TO INSTALL SEWAGE TREATMENT SYSTEM WASHINGTON COUNTY PLANNING DEPARTMENT Legal Description and Parcel Number T30N RZOW BIKZ 01 Use of Building: Is a Garbage Disposal Number of Bedrooms or Gallons Per Day to Yes No X New Type of Work: Alteration Repair Approval Only Has site previously been reviewd by Washington County? (If previously approved, attach letter of approval) Yes Approved The following exhibits are required as a part of this application and shall be attached hereto: Percolation Tests Logs; Soil Boring Logs; Site Plan drawn to scale showing location of Buildings, Lot Lines, Percolation Test Boles, Soil Boring Holes, Proposed Location of System, and Well. Also, the house and the drainfield area must be staked. One copy of the final building plan must be svalidable for review at the tipe application is processed. Improper or inadequate test or information will result in delays in processing. Agreement: The undersigned hereby makes Application for Permit to Install or Extend Swage 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 Specifications submitted herewith, and which are approved by the Washington County Zoning Administrator, 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 the Zoning Administrator or his agent for the purpose of performing improctions 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 on the cities any deviation from the approved location will cause the permit to become void. It shall be the responsibility of the applicant for the permit to notify the Office of the Zoning Administrator that the installation is ready for inspection. DATE SIGNATURE OF APPLICANT FOR OFFICE USE ONLY Raviaus: Planner: Inspector: Date: Revisus: Figure :Site Evaluation:
Soil Soring Evaluation: Depth of Water Table, Seasonal Water Table (Mottled Soil), Impervious Layer or Bedrock:
Soil Soring Evaluation: Soils Map Data: Percolation Test Evaluation:

\_\_\_\_\_\_Pump System Required: Topography: \_ Setbacks: Required (circle) Well (including adjacent property). Lake, Pond, Stream, River, or Bluffline. Bulfdings (including adjacent property). Property Lines 501 1001 1501 200 Conclusions: Site Unsuitable: Additional Tests Required: Verify No. Bed Site Suitable: Notes:

DECRIVEDMAR 1 3 1989 Application Fee \$75.00 AGU Fermit Fee \$75.00\_ Additional Reviews \$25.00/hr. (1 hr. min.) Reinspection Fee \$25.00/hr. (1 hr. min.) Note: Subject To APPLICATION FOR PERMIT TO INSTALL SEWAGE TREATMENT SYSTEM Washington County Planning Dept. 14900 - 61st Street North Stillwater, Minnesota 55082 Officials Approval WASHINGTON COUNTY PLANNING DEPARTMENT, Legal Description and Parcel Number 95664- 3000 SILVER LAKE ESTATES ADD.
Mail Address City Phone 736-6053 LOT 1- BLK AMERICAN ESTATE HONES INC. SUITE 250 7650 CUTTEN BLVD. STET wood bury 44.537 25 433.2990 EARTH SCIENCE 7257146- 20620 JUNO AUE NO. PORES LARG, NA. 55025
Installer Mail Address City Zip Phone Installer Use of Building: NEW Home!
Is a Garbage Disposal to be connected to this System? Number of Bedrooms or Gallons Per Day 3-4 Yes \_\_X\_lieu Type of Work: Alteration Repair Approval Only Has site previously been reviewd by Washington County? (If previously approved, attach letter of approval) Approved The following exhibits are required as a part of this application and shall be attached hereto: Percolation Tests Logs; 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. Also, the house and the drainfield area must be staked. One copy of the final building plan must be statished for review at the time application is processed. Improper or inadequate test or 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 Specifications submitted herevith, and which are approved by the Washington County Zoning Administrator, 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 the Boning Administrator or his agent 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 on the cite; any deviation from the approved location will cause the bernit to become void. It shall be the responsibility of the applicant for the permit to notify the Office of the Zoning Administrator that the installation is ready for inspection. for: arrenem & state before Inc. 11 march 1989 SIGNATURE OF APPLICANT Reviews: Planner: Sevaluation:
Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table (Mottled Soil), Impervious Layer or Bedrock:

Joseph Jo Site Evaluation: Additional Tests Required: Conclusions: Site Suitable: Site Unsuitable: Verify No. Pedrooms: Gooded site. Jos boyer rigined. Hard anger boring showed sardy loam soil: Howy Deaver was gusent asked hom if he were comfortable with the CARI secolation rate. He stating he'd bump it up to 16 MPI.



EARTH SCIENCE 20620 JUNO AVE. NO. FOREST LAKE, MN 55025 433-2890

PERCOLATION TEST DATA

T HOLE PREP	ARED:	9 MARCH 89	BOTTOM DEPTH 42 "
T HOLE DIAM	ETER: 6		
T HOLE SOIL	PROFILE:		TEXTURE:
0.5			DEX. BEN. PINE SAMEY LOAD
5"- 16"			BRN. FINE SANDY LOAM &
16" 42"			LT. REDDISH BAH. WAMY SLAD
		HEALIER - MECA	H CE.
COLATION TE	STS BY: H.	WEHVER - TIPCH.	
		# #9	AM
COLATION TE			AM
RT:	PMARC	# 19	AM
RT:	PMARC	# 19	AM PM)
RT:	PMARC	# 19	AM PM)
RT:E:	6"IN. H	# 19	AM PM)
E: 2:05 2:05 2:15	6"IN. H	W #9	AM PM)
E: Z:05  Z:05  Z:15  Z:17	6"IN. H	W #9	AM PM) EVEL REMARKS:
RT:E:	6"IN. H	# #9 20 DROP LE	AM PM) EVEL REMARKS:
E: 2:05 2:05 2:15 2:17 2:27 2:29	6"IN. H	# #9 20 DROP LE	EVEL REMARKS:
E: Z: 05  2: 05  2: 17  2: 27	6"IN. H	# #9 20 DROP LE	EVEL REMARKS:
2:05 2:05 2:15 2:17 2:27 2:29	6"IN. H	# #9 20 DROP LE	EVEL REMARKS:

#### LOG OF SOIL BORINGS

TRO	RING N			RING	TO s
_		_	_		
DEPTH	SOIL DES	CRIPTION	DEPTH	SOIL DES	CRIPTION
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	Loam			Loan	1
4-			6		
	BEN. FINE SA	wy conw		BRU. KINE	sa way too me
	# POCKS	1		4 ROCES	1
9"				+ 12023	
	BRW. FOF CAM	my 5000	12"		
	y RICES				
	A WAST.			ET. ALODISA	an.
				fine . weo.	coamy sand
25"				y mocks	
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	cuo Boring	-1			

#### LOG OF SOIL BORINGS

	LOG OF SO	IL BORINGS .	
BO	RING NO. 3	BORING NO. 4	
DEPTH	SOIL DESCRIPTION	DEPTH SOIL DESCRIPTION	
0		O DEF. BEN. KINE SAME	,
-	OKE BAN KINE BANDY		
	10+m	10AM	
		6-	
6			
	BAN. RINE SANDY LOAM	BRN. Aire Sawy Coan	n
_	y reces	YMICKS	
11"			
	ET. RED BEH. LINE - MED.	16-	
	Comy save wreacts	LT. HED BAN. HILE- ME	0.
		CIAMY SANO	
		VROCKS	
		32	
$\vdash$		LT. ALD - TAN RINE - MED	
$\vdash$			
		LANNY SAND Y MOCKS	
$\vdash$			
H			
$\vdash$			
6:9.			
0.7			
	RED BEN. L'AL GAMY		
$\vdash$	SAUG WROCKE-	7:0"	
$\vdash$	CLEAH. SAMO	OBSTRUCTION	
	mires	7:0"	
	E.G. enf		
-			
			- 1
8:0"			- 1
	640 8.3		

LOG OF SOIL BORINGS BORING NO. 5 BORING NO. SOIL DESCRIPTION DEPTH SOIL DESCRIPTION DEPTH ORK. BRN. FINE SANSY Loam BEN. FINE SMOY GAM + ROCES ET. HEDO'SH BEN. (wany recey) OBSTRUCTION 10:0"

### As Built Individual Sewage Treatment System Report

Washington County Planning Department

1	Legal Description  Sut   Blk 2 Silver Suke Est  Owner Mail Address City State Zip
2	Aal While 12855 103 Re St. no.
3	Anstaller Mail Address City State Zip  A ara Pullerties Centre At Aluel Mon
4	Septic Tank  Manufacturer: A: Liquid Capacity: 1500
5	Pump Chamber (if installed)
1	Manufacturer of Tank:; Liquid Capacity:
1	Horse Power of Pump:; Pump Discharge in Gallons Per
	Minute: at feet of Head; Type
	of Warning Device:; Number of Gallons Pumped Per
	Cycle:
5	Drainfield Trench  Width: 3 A ; Length of Each Trench: /05 ;  Method of Distribution: Down Boy ; Depth of Trench Bottom  from Finish Grade: 26 to 42 ; Depth of Rock Under Distribution  Pipe: 12 No 18 ; Area Required: 1253 ;  Area as Built: 1260
7	Complete site plan on attached sheet. On site plan include location of: structures, septic tank, pump chamber, line from house to tank, line from tank treatment system, distribution lines, distribution or drop boxes, well, and driveway. Show all distances applicable to the sewage treatment system: distance from structure to tank, tank to treatment system, distance between distribution lines, length of distribution lines and distance between well and sewage treatment system. Indicate on the site plan north and the scale of the site plan.

## Log Of Soil Borings

Loca	ation of Project:	12855 103rd St N, S	tillwater Tv	vp, MN 5	55082	
		Inspect Minnesota			Date:	6/15/15
	Auger Used:	Hand/Bucket	Class	ification	System:	USDA
E	Boring Number:	1		Boring	Number:	
Surface Elevation of Boring  Same ground surface as last drainfield trench		Surface Elevation Boring				
Depth In Inches	Solls Encountered		Depth In Inches		Soils En	countered
0-21 21-30 30-41 41-45 45-50 50-60 60-72	10YR 4/3 10YR 4/3 Loam ≈20% Ro 10YR 3/4 Loam ≈20% Ro 10YR 3/4 10YR 3/4	2/2 Loam 3 Sandy Loam by Sand With Gravel bock Fragments by Sand With Gravel bock Fragments 4 Loamy Sand Medium Sand dium Coarse Sand			#1	
72" D	Pepth To End Of B	oring Or Redox		Depth To	End Of Bo	oring Or Redox
		Relative To System				Relative To System
-32" D	Depth To Bottom C	The state of the s		Depth To	Bottom O	
≥40" C	Of Separation			Of Separ	ation	
	End Of Boring At:	72" None			Boring At:	
	Water Present At:	None None	Standing		resent At:	
Standing V	Valer Fresent At.	None	Standing	Water P	CSCIIL AL.	

Bottom O	f Distribution	Medium At:	32 Inches	

ty: Stillwetter s	zip code: 550 82
ptional section: Sewage Tank Compliance Ce	ertification
nis form does not represent a complete system inspection re	port and only certifies sewage tank compliance status.
structions: This section of the form may be completed and sign	ned by a Designated Certified Individual (DCI) of a licensed SSTS ocedures to assess the compliance status of each sewage tank in
then this section of the form is signed by a qualified certified profitsiting System Compliance Inspection Report: Compliance are secured on the MPCA website at https://www.nca.signe.are.ips/website.are.ips//website.are.ips//website.are.ips//website.are.ips/website.are.ips//web	otion roun - Existing system (we wwisted 31b). This form can be
ne information and certified statement on this form is required wildividual other than the SSTS Inspector that submits the inspection ponent compliance and is allowable under Minn. R. 7082.0700 ree years beyond the signature date on this form unless a new equired according to local regulations. Additional Administrative Fig. 7082.0700, subp. 4 Items B, C, and D; 7083.0730 Item C.	on report. It represents a third party assessment of SSTS 0, subp. 4 Item (B) subitem (1). This form is valid for a period of evaluation is requested by the owner or owner's agent or is
Certificate of sewage tank compliance	Notice of sewage tank non-compliance
Affirm all three statements:	Select all that apply:
The SSTS does not contain a seepage pit, cesspool, crywell, leaching pit, or other pit.  It does not contain a sewage tank that was designed to be watertight, but subsequently leaks below the designed operating depth.  It does not represent an imminent safety threat by reason of unsecured, damaged, or weak maintenance hole cover(s) or other unsafe condition.	<ul> <li>☐ The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit – "Fallure to Protect Groundwater."</li> <li>☐ It has a sewage tank that was designed to be watertight, but subsequently leaks below the designed operating depth – "Fallure to Protect Groundwater."</li> <li>☐ 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."</li> </ul>
ompany information	Designated Certified Individual (DCI) information
company name: PINCYS TENEY SCYVICE	Print name: Yell Clymer
Business license number: (673	Certification number: (2814)
personally conducted the work described above as a Designate Business. I personally conducted the necessary procedures to a	ed Certified Individual of a Minnesota-licensed SSTS Maintonance ssess the compliance status of each sewage tank in this SSTS:
Designated Certified Individual's signature:	Date (mm/dd/yyyy): 10/11/21