

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: 09.029.21.42.0007	Reason for Inspection property sale
Local regulatory authority info: Washington County	property scale
Property address: 8727 Lake Jane Tr N Lake Elmo, MN 55042	
Owner/representative: Brent Rundquist	Owner's phone: 612-860-1550
Brief system description: 2 precast septic tanks and a pump tank	
	The state of the s
System status	
System status on date (mm/dd/yyyy): 3/29/2022	
☐ Compliant – Certificate of compliance*	☐ Noncompliant – Notice of noncompliance
abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.)	Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance. An imminent threat to public health and safety (ITPHS) must be
R. 7080.1500 as of system status date above and does not guarantee future performance.	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.
Reason(s) for noncompliance (check all applicable	
☐ Soil separation (Compliance component #5) – Failing	to protect groundwater Int #3) – Imminent threat to public health and safety Int #3) – Failing to protect groundwater 500 (Compliance component #3) – Failing to protect groundwater to protect groundwater Ipliance component #4) – Noncompliant - local ordinance applies
inadequate maintenance, or future water usage.	n conditions during system construction, possible abuse of the system,
usea for the purpose of processing this form.	and correct, to the best of my knowledge, and that this information can be
Business name: All State Septic Services LLC	Certification number: 323
Inspector signature: Tom Trooien	License number: 1568
(This document has been electronically sign	ed) Phone: 612-594-4496
Necessary or locally required supporting doc	
☐ Soil observation logs ☐ System/As-Built ☐ Locally red	quired forms Tank Integrity Assessment Operating Permit

Impact on public health – Compliance comp		ponent #1 of 5	
Compliance criteria:		Attached supporting documentation:	
System discharges sewage to the ground surface	☐ Yes* ☒ No	Other:	
System discharges sewage to drain tile or surface waters.	☐ Yes* ☒ No	☐ Not applicable	
System causes sewage backup into dwelling or establishment.	☐ Yes* ☒ No		
Any "yes" answer above indicates imminent threat to public health ar			
Describe verification methods and Searched for seeping or surfacing to		none observed during the inspection.	
nnk integrity – Compliance	component #2	of 5	
Compliance criteria:		Attached supporting documentation:	
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit,	component #2. □ Yes* ☑ No	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?	☐ 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 designed operating depth?	☐ 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	
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:	☐ 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): 10/21/2021 (must be within three years)	
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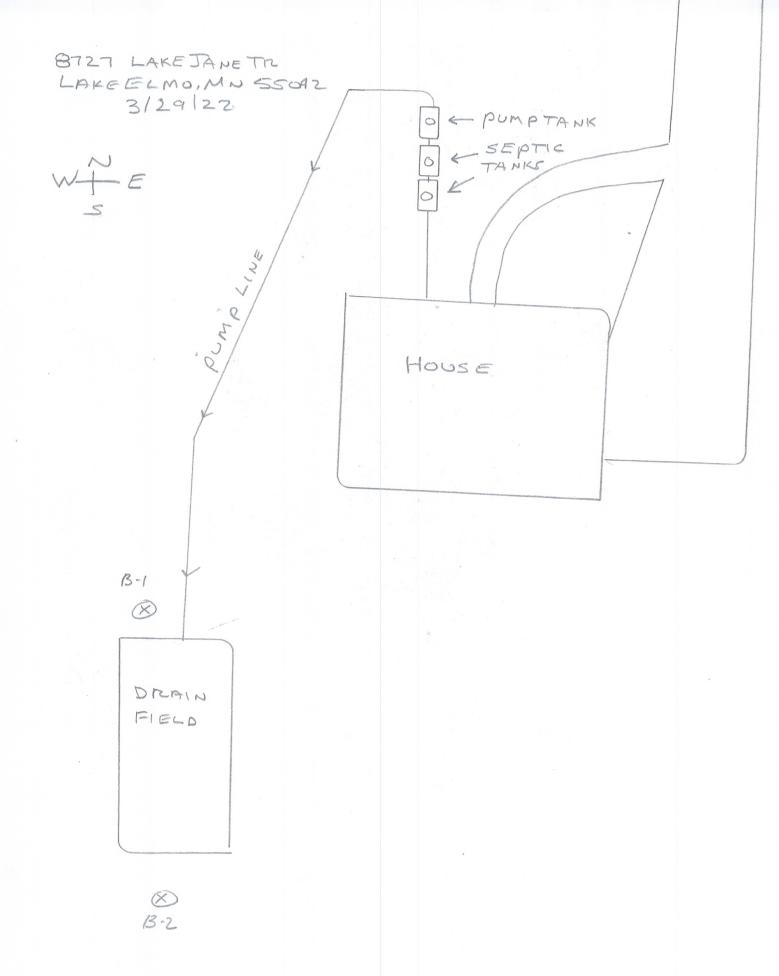
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Pr	Property Address: 8727 Lake Jane Tr N Lake Elmo, MN 55042	
	Business Name: All State Septic Services LLC	Date: 3/29/2022
3	Other compliance conditions – Compliance component #3 of 5	
<u> </u>		
	3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsec	ured?
	☐ 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:	
	Attacked cure orting a decrease to the North Albertain	
	Attached supporting documentation: Not applicable	
Л	Operating permit and nitrogen DMD* Compliance	
4.	Operating permit and nitrogen BMP* – Compliance component #4 of	5 ⊠ Not applicable
		5 ☑ Not applicable "yes", A below is required
		"yes", A below is required
	Is the system operated under an Operating Permit? ☐ Yes ☒ No If	"yes", A below is required
	Is the system operated under an Operating Permit? Is the system required to employ a Nitrogen BMP specified in the system design? Yes No If BMP = Best Management Practice(s) specified in the system design	"yes", A below is required
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Business Name: All State Septic Services LLC			Date: 3/29/2022	
Soil separation – Compliance com	nponei	nt #5 of	5	
Date of installation 8/14/2002 (mm/dd/yyyy)	Unkn	own		
Shoreland/Wellhead protection/Food beverage lodging?	⊠ Yes	□No	Attached supporting documentation: ☑ Soil observation logs completed for the supporting documentation:	ne report
Compliance criteria (select one):			☐ Two previous verifications of required	l vertical separation
	☐ Yes ☐	□ No*	☐ Not applicable (No soil treatment are	a)
not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:				
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.				
	⊠ Yes □ No*	Indicate depths or elevations		
April 1, 1996, or later or for non- performance systems located in Shoreland			A. Bottom of distribution media	3.2
or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:			B. Periodically saturated soil/bedrock	6.5
Drainfield has a three-foot vertical		, ,	C. System separation	3.3
separation distance from periodically			D. Required compliance separation*	3
saturated soil or bedrock.*			*May be reduced up to 15 percent if all Ordinance.	owed by Local
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 (Intermediate Inspector License required ≤ 2,500 gallons per day; Advanced Inspector License required > 2,500 gallons per day)	☐ Yes	□ No*		
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.				
*Any "no" answer above indicates the sy failing to protect groundwater. Describe verification methods and results:	ystem is	S		

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.





Soil Observation Log

v 04.02.2019

Project ID:

Consistence 8727 Lake Jane Tr N Lake Elmo, MN 55042 3/29/22 I------ Structure------I 03/29/22 Auger Organic Matter Elevation: Grade Bedrock Date Slope shape Observation Type: Shape 1568 Alluvium Location / Address: Toe Slope Slope %: Indicator(s) hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws. Ē Foot Slope Redox Kind(s) Loess Back/Side Slope Tom Trooien Outwash Lacustrine Soil survey map units: Mottle Color(s) B-1 Shoulder Matrix Color(s) **Brent Rundquist** 10YR 3/2 10YR 4/4 10YR 4/3 7.5YR 4/4 Summit Soil parent material(s): (Check all that apply) Frag. % Rock Weather Conditions/Time of Day: Landscape Position: (check one) Observation #/Location: sandy clay loam Texture Tom Trooien silt loam loam sand Vegetation: Comments Depth (in) 12-44 44-58 58-78 0-12 Client:

				1
UNIVERSITY OF MINNESOTA	ONSITE	SEWAGE	TREATMENT	PROGRAM

Soil Observation Log

Project ID:

v 04.02.2019

Client:		_	Brent Rundquist		Locati	Location / Address:	8727 Lake .	8727 Lake Jane Tr N Lake Elmo, MN 55042	.lmo, MN 55042
Soil parent m	Soil parent material(s): (Check all that apply)	ck all that		Outwash 🔲 Lacustrine	Loess Till	Alluvium	n Bedrock	Organic Matter	latter
Landscape Po	Landscape Position: (check one)	ne)	Summit Shoulder	ulder Back/Side Slope	Foot Slope	Toe Slope	Slope shape		,
Vegetation:	, in the second		- ·	Soil survey máp units:		Slope %:		. Elevation:	
Weather Cond	Weather Conditions/Time of Day:	Day:					Date	. 03,	03/29/22
Observatio	Observation #/Location:			B-2		Obse	Observation Type:	A	Auger
Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Change	Structure	[
			10YR 3/2						
- -	sandy toam	5000 0000 000					***********	•••••	
14.33	pues /meo/		10YR 4/6						
CC-+1	todiny sain								
22.70	sandy clay		10YR 5/4			······	***********		
22-40	loam						*********		
48-78	pues //meo/		7.5YR 5/4						
0/-0	codiny sain								
								•••••	
	oon oon oo								
			***************************************				***********		
						~~~~	**********		
Comments							X		
I hereby certif	y that I have o	ompleted	this work in accordar	I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.	ordinances, rules	and laws.			
F	Tom Trooien			Tom Trooien			1568		3/29/22
						1			

## Optional Section: Sewage Tank Compliance Certification

This form does not represent a complete system inspection report and only certifies sewage tank compliance status.

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/ssts-and-msts-technical-and-compliance-criteria.

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 the inspection report. It 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 required according to local regulations. Additional Administrative R. 7082.0700, subp. 4 Items B, C, and D; 7083.0730 Item C.

R. 7082.0700, subp. 4 Items B, C, and D; 7083.0730 Item C.	ile references for this activity can be found at Minn.
Affirm all three statements:  The SSTS does not contain a seepage pit, cesspool, drywell, 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.	Notice of sewage tank non-compliance     Select all that apply:
Company information  Company name: Phylips Sewer Service	Designated Certified Individual (DCI) information
Business license number: 1673	Certification number: C2814
I personally conducted the work described above as a Designated C Business. I personally conducted the necessary procedures to assess	ertified Individual of a Minnesota-licensed SSTS Maintenance as the compliance status of each sewage tank in this SSTS:
Designated Certified Individual's signature:	Date (mm/dd/yyyy): \0[5]2[