

## 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.

Property information	Local tracking	number:
Parcel ID# or Sec/Twp/Range: 3502920230014	Reason for Inspection	Sale of home
Local regulatory authority info: Washington County		
Property address: 16140 6TH ST N, CITY OF LAKELAND		
Owner/representative: LAUSENG RUSSELL		Owner's phone: 651-348-0196
Brief system description: 1200 Septic with in ground drain field		
System status		
System status on date (mm/dd/yyyy): 4/4/2022		
☐ 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 exists in Local Ordinance.)	Systems failing to protect grouse discontinued within the ti	ound water must be upgraded, replaced, or ime required by local ordinance.
	An imminent threat to public i	health and safety (ITPHS) must be
*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.	upgraded, replaced, or its use	e discontinued within ten months of receipt ter period if required by local ordinance or
Reason(s) for noncompliance (check all applicab	le)	
☐ Impact on public health (Compliance component #1)		health and safety
☐ Tank integrity (Compliance component #2) – Failing to protect groundwater		
☐ Other Compliance Conditions (Compliance component #3) – Imminent threat to public health and safety		
☐ Other Compliance Conditions (Compliance component #3) – Failing to protect groundwater		
System not abandoned according to Minn. R. 7080.2	2500 (Compliance componer	nt #3) – Failing to protect groundwater
Soil separation (Compliance component #5) – Failing		
Operating permit/monitoring plan requirements (Com	pliance component #4) – No	oncompliant - local ordinance applies
Comments or recommendations		
Certification		
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.	o determine the compliance sta on conditions during system con	atus of this system. No determination of nstruction, possible abuse of the system,
By typing my name below, I certify the above statements to be true a used for the purpose of processing this form.	and correct, to the best of my k	rnowledge, and that this information can be
Business name: SS Septic Solutions, LLC	(V)	Certification number: 9917
Inspector signature: Shler Shloro	A CONTRACTOR OF THE PARTY OF TH	License number: 4137
(This document has been electronically sign	ed)	Phone: 651-343-9117
Necessary or locally required supporting doc	cumentation (must be	
· · · · · · · · · · · · · · · · · · ·		
☐ Soil observation logs ☐ System/As-Built ☐ Locally required forms ☐ Tank Integrity Assessment ☐ Operating Permit ☐ Other information (list):		
Calci information (list).		