

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

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS) Doc Type: Compliance and Enforcement

Page 1 of 4

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						
Parcel ID# or Sec/Twp/Range: 0402620220002	Reason for Inspection	Property Transfer					
Local regulatory authority info: Washington County							
Property address: 12104 St. Croix Trail S Hastings, Mn.							
Owner/representative: Scott Durdall		Owner's phone: 651-783-6914					
Brief system description: 2 septic tanks to gravity drainfield. Sy System status	stem was installed with a pel	mit from washington County.					
System status on date (mm/dd/yyyy): 4/21/2022							
☐ Compliant – Certificate of compliance*	■ Noncompliant – Noti	ce of noncompliance					
Valid for 3 years from report date unless evidence of an mminent threat to public health or safety requiring removal and abatement under section 145A.04. subdivision 8 is discovered or		ound water must be upgraded, replaced, o time required by local ordinance.					
shorter time frame exists in Local Ordinance.) Note: Compliance indicates conformance with Minn. 7.020.1500 as of system status date above and does not quarantee future performance.	upgraded, replaced, or its us of this notice or within a sho	An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receip 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 applica	ble)						
☐ Impact on public health (Compliance component #1) – Imm ☐ Tank integrity (Compliance component #2) – Failing to prote ☐ Other Compliance Conditions (Compliance component #3) ☐ Other Compliance Conditions (Compliance component #3) ☐ System not abandoned according to Minn. R. 7080.2500 (C ☐ Soil separation (Compliance component #5) – Failing to prote ☐ Operating permit/monitoring plan requirements (Compliance Comments or recommendations	ect groundwater – Imminent threat to public h – Failing to protect groundwa Compliance component #3) – otect groundwater	ealth and safety ster Failing to protect groundwater					
hereby certify that all the necessary information has been gathered future system performance has been nor can be made due to unknot nadequate maintenance, or future water usage. By typing my name below, I certify the above statements to be true	own conditions during system o	onstruction, possible abuse of the system,					
used for the purpose of processing this form.		0-475-41					
dusiness name: David R Brown		Certification number: 9370					
nspector signature: DRB (This document has been electronically signature)	ned)	License number: 3649					
Necessary or locally required supporting do		Phone: 651-788-329 be attached)					
☑ Soil observation logs ☑ System/As-Built ☐ Locally re ☐ Other information (list):							
https://www.pca.state.mn.us • 651-296-6300 • 800-657-38 vq-wwists4-31b • 4/28/2021	64 • Use your preferred rela	ay service • Available in alternative forma					

Compliance criteria:		Attached supporting documentation	1.
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 indicate imminent threat to public health	es the system is an and safety.		
Describe verification methods ar	nd results:		
ank integrity – Compliand	e component #2	of 5	
'ank integrity – Compliano _Compliance criteria:	e component #2	of 5 Attached supporting documentation:	
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit,	e component #2	Attached supporting documentation:	
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit? Sewage tank(s) leak below their		Attached supporting documentation: Empty tank(s) viewed by inspector Name of maintenance business:	Meyer's
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	☐ Yes* ⊠ No	Attached supporting documentation:	Meyer's
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 busines	Meyer's ss: 915 4/21/2022
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 busines Date of maintenance: Existing tank integrity assessment (Attac	Meyer's :s: 915 4/21/2022 :h)
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 indi	☐ Yes* ☒ No ☐ Yes* ☒ No ☐ Cates the system	Attached supporting documentation: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance busines Date of maintenance: Existing tank integrity assessment (Attac	Meyer's :s: 915 4/21/2022 :th)
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Property Address: 12104 St. Croix Trail S Hastings, Mn.

Business Name: David R Brown

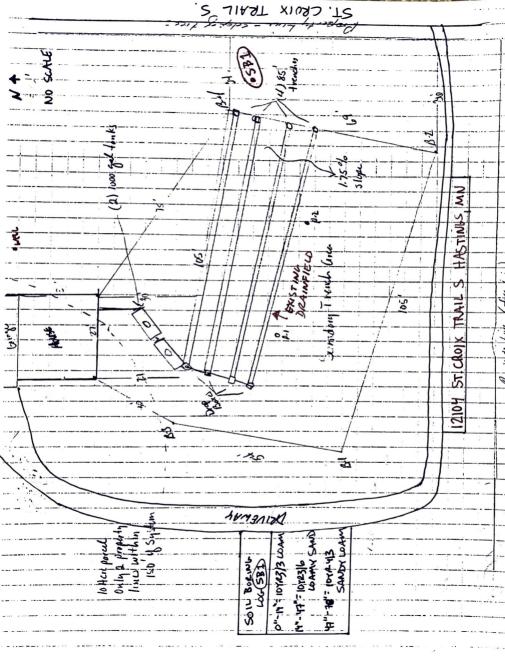
Date: 4/21/2022

Pro	pperty Address: 12104 St. Croix Trail S Hastings, Mn.	
Bu	siness Name: David R Brown	Date: 4/21/2022
3.	Other compliance conditions – Compliance component #3 of 5	
	3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unso Yes* ⊠ No ☐ Unknown	ecured?
	3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safe	ty? ☐ 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:	
	Attached supporting documentation: Not applicable	
	Attached supporting documentation.	
,	Operating permit and nitrogen BMP* – Compliance component #4 c	of 5. ⊠ Not applicable
4.	Operating permit and introgen biving compliance component was	7 5 140t 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? \square Yes \square 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 complete	d.
	Compliance criteria:	
	a. Have the operating permit requirements been met?	
	b. Is the required nitrogen BMP in place and properly functioning? Yes No	
	Any "no" answer indicates noncompliance.	
	Describe verification methods and results:	
	Attached supporting documentation: Operating permit (Attach)	

ness Name: David R Brown			Date: 4/	21/2022			
Soil separation – Compliance com	npone	nt #5 of	5				
Date of installation 1999 (mm/dd/yyyy)	Unkn	iown					
Shoreland/Wellhead protection/Food beverage lodging?	☐ Yes	⊠ No	Attached supporting documentation:	ne report			
Compliance criteria (select one):			☑ Two previous verifications of required				
5a.For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:	☐ Yes	□ No*	□ Not applicable (No soil treatment area □				
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.							
5b.Non-performance systems built	1	□ No*	Indicate depths or elevations				
April 1, 1996, or later or for non- performance systems located in Shoreland			A. Bottom of distribution media	36"			
or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:			B. Periodically saturated soil/bedrock	78"			
Drainfield has a three-foot vertical			C. System separation	42"			
separation distance from periodically			D. Required compliance separation*	36"			
saturated soil or bedrock.*			*May be reduced up to 15 percent if allo Ordinance.	owed by Local			
5c. "Experimental", "Other", or "Performance" systems built under pre-Z008 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.							

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.

Describe verification methods and results:



LOG OF SOIL BORINGS

ook Tshy	_				ni ni	-	 -		21.0								
S. Craix trail So. Ibum		ì	Blee le han	1/2 2/1	2	441100 Brown Loam	1/5 1/6/	,	2000 Day	Red brown	Syr 4/3		49	Red Grown Sund	54r 1/8	P	
acres behind 12080		R 3	Black Par	1/2 2/1	91		yellow brown	10:15 K	9/10 100			Marsaran	Med brown southy	1045 4/3	74		
26N Rouge 20W, 10		B2	Black low	10 tr 2/11	Margaran	yellow brown loam		marga 3	yellow brown	1045 5/4	5		-	{	Sendy liem 10 yr 4/3 84		
Job: Sectim 4, Township 26N Range 20 W, 10 acres Dehind 12080 S. Craix trail S. Dumant Tship date: 5-1849		B1	Black Loom	1/2 shot	yellow brown loam	109, 5/6	32,		Med. Drown Joany Sank	1			med brown		7.50		
		Depth Feet		-		2		3		4		2	,	0	7		8



PERMIT NUMBER

Owner :

Plow Capacity

Rotton Area

Applicant : SCOTT

ATC 29 NIN MINNES OT A Department of Public Health

and Environment 651/430-6708

DENHARK TOWNSHIP 000499004 SEWAGE PERHIT

SCOTT DURDALI. 1393 BREDA

SAINT PAUL IIN

55108 DURDALL.

651-917-3969

NEW DRAINFIELD PERHIT SEPTIC APPLICATION/SOIL REVIEW

ADDITIONAL SOIL REVIEW PER

Total Fees :

25.00

150.00

150.00

325.00

150.00

175.00

Total Paid :

Total Due :

PERMISSION IS HERRBY GRANTED

To execute the work specified in this permit on the following described property upon express condition that said persons and their agents, employees and workmen shall conform in all respects to the provisions of the Building Code, and/or Ordinances.

This permit may be revoked at any time upon the violation of any of the provisions of eatd code and ordinances.

Project Address : 12104 SAINT CROIX TR S Legal Description: NW1/4-NW1/4 Gal/Day Tank Volume 600

HASTINGS 042620 EXC K 726PT OF N 600FT

Perc Rate

16 Hin/Inch

55034 Geo :

4-026-20-22-0002

Soil Conditions: Depth to Restriction 96 Inches Soil Treatment Type:

1000 Rock Depth

2000

Authorized Work / Special Conditions - Install individual sewage treatment system as per approved design in area tested and shown on site plan. - Permit revised 6/2/1999

** Permit Expiration Date : Sawage Treatment : 2000-02-18

A CERTIFICATE OF OCCUPANCY MUST BE REQUESTED AND ISSUED PRIOR TO USE OR OCCUPANCY OF WORK PERMITTED BY A RUIT.DING PERMIT.

aw This permit shall expire and be null and void if the work authorized by the Building Permit is not commenced within 60 days of the date of lesumnos or if work is abundoned or suspended for a period of 120 days. Term of the Building Permit is 12 mouths from date of issue. Term of sewage treatment permit is 12 months from date of tesue.

Pensity for violation of any of the provisions of building code: Fine not to exceed five bundred dollars (4500.00) or imprisionment for not more than ninety (90) days, or both.

Parmit Essua Data 1999-06-02 Code Enforcement Officer



RECEIVE Tington County Health, Environment & Land Management 14900 61st Street N., P.O. Box 3803

Stillwater, MN 55082-3803 2/4B0-6708 or 612/430-6656

FAX 612/430-6730

Receipt # 335

Ma

ke	checks	payable	to W	ASHIN	GTON	COU	YTY	TRE	ASU	JRER
\$150	- Applica	tion Fee (sit	e review	w)	\$25 - Add	litional R	eview	Fee (1	hour r	ninimur

\$150 - New Drainfield System Permit Fee \$70 - Replacement Drainfield System Permit Fee

\$100 base fee, plus \$50 per lot - Subdivision Fee

\$250 - New Mound System Permit Fee \$170 - Replacement Mound System Permit Fee Legal Description and Parcel Identification Number (especially if this is for a NEW SUBDIVISION OR MINOR SUBDIVISION) NW YY OF NW YY OF SEC #4, TWMSHIP #210, DENMARK TOWNSHIP PARCEL # RO4-026-20-22-000

12164 ST. CROIX TRAIL DENMARK TOWNSHIP Phone

Address State Zip City

Applicant 393 MN 55768

Address State Zip City

165

Owner (if different from applicant)

New Home **Existing Home New Business Existing Business** Number Of Bedrooms: Gallons Per Day:

Check the following fixture(s) which are or will be installed: Garbage Disposal Recreational Bathing Facility: (jacuzzi, hot tub, etc.) New Drainfield System X New Mound System Replacement Drainfield System Replacement Mound System Permit Renewal If this site has been approved, attach copy of approval letter Additional Soil Test Data for Previously Approved Site

The following exhibits are required as part of this application and shall be attached hereto: Percolation Test Reports; 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; one (1) copy of the System Design; and

one (1) copy of the Final Building Plan. The house and the drainfield areas must be staked. Inaccurate or incomplete 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 Design submitted herewith, and which are reviewed by the Washington County Building Official or his agent, 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 Building Official 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; ANY DEVIATION FROM THE APPROVED LOCATION

WILL VOID THE PERMIT. It shall be the responsibility of the applicant for the permit to notify the Office of the Building Official that the installation is ready for inspection.

In connection with your request for a soil review/septic permit, you are hereby giving us permission to enter upon your property during normal business hours for the purpose of determining the suitability of the location, which may include minor excavation or soil borings.

Signature of Applicant (Owner or Builder) THE AREA BELOW IS FOR COUNTY USE ONLY

DATE BY INSPECTOR SITE EVALUATION:

Required [circle appropriate item(s)] Setbacks: 50 100 75 Well (including adjacent property) 75 20

Wetland, Pond, Lake, Stream, River, or Bluffline Site Unsuitable: CONCLUSIONS: Site Suitable:_

10 acres NOTES: Lot Size

40 Additional Tests Required:

150 100

150

Verify Use:

Bedrooms

Year Built

An Equal Employment Opportunity/Affirmative Action Employer If You Need Assistance Due to Disability or Language Barrier, Please Call 430-6656 OR 430-6708 (TDD 439-3220) SEPTFORM DC 147