

# Compliance inspection report form

## 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: 35.029.20.33.0027 Reason for Inspection: Property Transfer  
 Local regulatory authority info: Washington County Envir. Health  
 Property address: 16111 - 1st St. North Lakeland MN. 55043  
 Owner (representative): Dieg Kuntz Agent - Owner's phone: 651-270-3007  
 Brief system description: \_\_\_\_\_

### System status

System status on date (mm/dd/yyyy): 6-12-2022

Compliant – Certificate of compliance\*

Noncompliant – Notice 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 ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.*

**\*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.**

*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.*

#### Reason(s) for noncompliance (check all applicable)

- 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 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. 7080.2500 (Compliance component #3) – *Failing to protect groundwater*
- Soil separation (Compliance component #5) – *Failing to protect groundwater*
- Operating permit/monitoring plan requirements (Compliance component #4) – *Noncompliant - local ordinance applies*

#### Comments or recommendations

**RECEIVED**

**JUN 23 2022**

**PUBLIC HEALTH**

### Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Business name: Sauher P & H Co Certification number: 925  
 Inspector signature: [Signature] License number: 317  
 (This document has been electronically signed) Phone: 651-463-7934

### Necessary or locally required supporting documentation (must be attached)

- Soil observation logs
- System/As-Built
- Locally required forms
- Tank Integrity Assessment
- Operating Permit
- Other information (list): \_\_\_\_\_

Property Address: 16111 - 1<sup>st</sup> St. N., Lakeland MN.  
 Business Name: Samber PTH Co. Date: 6-12-2022

**1. Impact on public health – Compliance component #1 of 5**

Compliance criteria:	
System discharges sewage to the ground surface	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No

**Attached supporting documentation:**

Other: \_\_\_\_\_  
 Not applicable

*Any "yes" answer above indicates the system is an imminent threat to public health and safety.*

**Describe verification methods and results:**

**2. Tank integrity – Compliance component #2 of 5**

Compliance criteria:	
System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
If yes, which sewage tank(s) leaks:	

**Attached supporting documentation:**

Empty tank(s) viewed by inspector  
 Name of maintenance business: Meyers Pumping Service  
 License number of maintenance business: 915  
 Date of maintenance: 6-16-2022  
 Existing tank integrity assessment (Attach)  
 Date of maintenance (mm/dd/yyyy): 6-16-2022  
 (must be within three years)

*Any "yes" answer above indicates the system is failing to protect groundwater.*

(See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))

Tank is Noncompliant (pumping not necessary – explain below)  
 Other: \_\_\_\_\_

**Describe verification methods and results:**



Property Address: 16111 - 1st St. N. Lakeville MN.  
Business Name: Janber P+H Co.

Date: 6-12-2022

**3. Other compliance conditions – Compliance component #3 of 5**

- 3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?  
 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:

Attached supporting documentation:  Not applicable

**4. 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**  
*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:

Attached supporting documentation:  Operating permit (Attach)

Property Address: 1611 - 1st St. N. Lakeland MN.  
 Business Name: Sauer P & H Co.

Date: 6-12-2022

**5. Soil separation – Compliance component #5 of 5**

Date of installation 1997  Unknown  
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging?  Yes  No

**Compliance criteria (select one):**

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\*  
 Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.

5b. Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:  Yes  No\*  
 Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.\*

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.

**Attached supporting documentation:**

- Soil observation logs completed for the report
- Two previous verifications of required vertical separation
- Not applicable (No soil treatment area)
- \_\_\_\_\_

**Indicate depths or elevations**

A. Bottom of distribution media	<u>46" S</u>
B. Periodically saturated soil/bedrock	<u>&gt; 78" S</u>
C. System separation	<u>&gt; 3'</u>
D. Required compliance separation*	<u>3'</u>

\*May be reduced up to 15 percent if allowed by Local Ordinance.

**\*Any "no" answer above indicates the system is failing to protect groundwater.**

**Describe verification methods and results:**

**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

Project ID: \_\_\_\_\_

V 04.01.2019

Client: Greg Kuntz - Agent

Location / Address: 16111 - 155th St. N. Lakeland, MN

Soil parent material(s): (Check all that apply)  Colluvial  Lacustrine  Loess  Till  Alluvium  Bedrock  Organic Matter

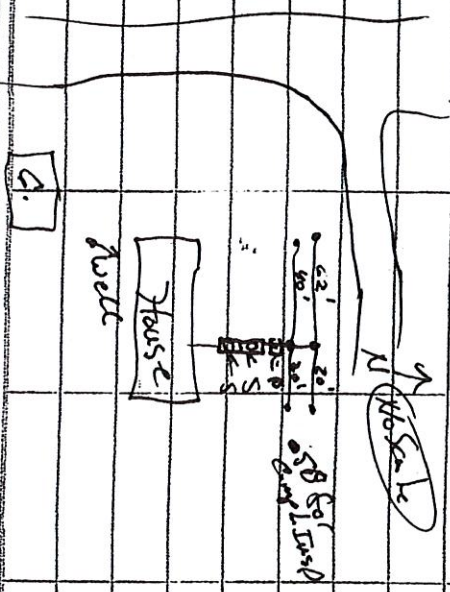
Landscape Position: (check one)  Summit  Shoulder  Back/Side Slope  Foot Slope  Toe Slope

Vegetation: Aspen Soil survey map units: \_\_\_\_\_ Slope shape: LL

Weather Conditions/Time of Day: Clear - PM. Slope %: 1% Elevation: \_\_\_\_\_

Observation #/Location: H1 - East End of meadow Date: 6-19-2022

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Observation Type:		
							Shape	Grade	Consistence
0-14	Sandy loam	<35	10YR 3/2	—	—	—	Granular	No dark	Friable
14-41	Sandy loam	<35	10YR 4/4	—	—	—	Single Grain	Weak	Loose
41-78	SAND	35-50	10YR 5/4 to 6/4	—	—	—	—	—	—
No Redox									



Comments: \_\_\_\_\_

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

Designer/Inspector) \_\_\_\_\_

(Signature)

(License #)

(Date)



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CHECK	CASH	CHARGE	DATE
		<input checked="" type="checkbox"/>	6/16/22
NAME: <u>Greg Kuntz</u>			
ADDRESS: <u>Job At 16111 1st St. N Lakeland</u>			
PUMPED AND BACKFLUSHED:		450	00
<u>Septic Tank</u>			
<u>Overflow Tank</u>			
Cesspool			
Holding Tank			
<u>Lift Station</u>			
Distribution or Junction Box			
Extra Backflushing			
<u>80</u> feet of hose (Extra charge for over 100 feet of hose)		20	00
<u>Washington County Fee</u>		20	
PUMPED:			
Sandtrap			
Sump			
Other:			
Weekend or Evening Charge			
RECEIVED BY		TOTAL	470 00
X			
TOTAL GALLONS: <u>2700</u>			
Pumped through <u>manhole</u> or inspection pipe Septic tank: <u>Precast</u> - Block - Plastic - Unknown Overflow tank: <u>Precast</u> - Block - Plastic - Unknown Condition of baffle: <u>Good</u> , Repair Needed, or Unknown Drainfield: Mound, <u>Trench</u> , or Unknown Effluent surface discharge: Yes or <u>No</u> Lift Station: <u>Yes</u> or No Comments:			



73664

Thank You

STATEMENT / INVOICE

MEYER SEWER SERVICE, INC.  
 5325 Manning Avenue South  
 Afton, MN 55001

Telephone (651)459-0162

Page 1

Statement Date: 06/20/22

Account Number: w6525

Kuntz, Greg  
 971 Sibley Memorial Hwy

Lilydale, MN 55118

Terms: 30Day

Last Payment: 10/25/19 \$342.00

Date	Number Invoice	Service Type	Gallons	Amount	Balance
06/16/22	64930 73664	MULTIPLE TANKS/DOMESTIC At 16111 1st St. N. Lake1	2700	470.00	470.00
Pumped & backflushed septic tank & overflow tank-Pumped lift station-\$450 wash. Cty. Fee-\$20					

Thank you!

Current	over 30	over 60	over 90	Over 120	Total Due
470.00	0.00	0.00	0.00	0.00	470.00