

Compliance inspection report form **Existing Subsurface Sewage Treatment System (SSTS)** 

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

**Property information** 

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 <a href="https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf">https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf</a>.

| Property Information   | Local tracking   | number:   |
|--|--|---|
| Parcel ID# or Sec/Twp/Range: 33.030.21.43.0007   | Reason for Inspection  | property sale   |
| ocal regulatory authority info: Washington County  | •  |   |
| Property address: 6244 Inwood Ct N Grant, MN 55082   |  |   |
| wner/representative: Bob Johnson   | •  | Owner's phone: 651-206-8070   |
| rief system description: Two precast septic tanks and a gravit   | y rock trench drainfield.                                      |   |
|  |  |   |
| ystem status   |  |   |
|  |  |   |
| ystem status on date (mm/dd/yyyy): 8/11/2022   |  |   |
| ☑ Compliant – Certificate of compliance*   | Noncompliant – Notic   | ce of noncompliance   |
| /alid for 3 years from report date unless evidence of an nminent threat to public health or safety requiring removal and   |  | ound water must be upgraded, replaced, or<br>ime required by local ordinance.                           |
| batement under section 145A.04, subdivision 8 is discovered or shorter time frame exists in Local Ordinance.)  | An imminent threat to public                                   | health and safety (ITPHS) must be   |
| Note: Compliance indicates conformance with Minn.  . 7080.1500 as of system status date above and does not   |  | e discontinued within ten months of receip<br>ter period if required by local ordinance or<br>ivision 8 |
| uarantee future performance.   |  |   |
| Reason(s) for noncompliance (check all application   | · ·  |   |
| Impact on public health (Compliance component #1   | ·  | health and safety   |
| Tank integrity (Compliance component #2) – Failing   | · · · · · · · · · · · · · · · · · · ·                          |   |
| ☐ Other Compliance Conditions (Compliance compor   | nent #3) – <i>Imminent threat to</i>                           | public health and safety  |
| ☐ Other Compliance Conditions (Compliance compor   | nent #3) – Failing to protect g                                | roundwater  |
| System not abandoned according to Minn. R. 7080  | .2500 (Compliance compone                                      | nt #3) – Failing to protect groundwater   |
| Soil separation (Compliance component #5) – Failin   |  |   |
| Operating permit/monitoring plan requirements (Co  |  | loncompliant - local ordinance applies  |
| Comments or recommendations  | mphanics component in 17                                       | onoon phane room channel expire   |
|  |  | 0 4   |
| Reviewed design, permit, soil, inspection and pumping re   | ecords on file at washington                                   | County.   |
| •  |  |   |
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|  |  |   |
| ertification   |  |   |
| hereby certify that all the necessary information has been gathered<br>uture system performance has been nor can be made due to unkno<br>nadequate maintenance, or future water usage. | I to determine the compliance sown conditions during system co | tatus of this system. No determination of onstruction, possible abuse of the system,                    |
| By typing my name below, I certify the above statements to be truesed for the purpose of processing this form.   | e and correct, to the best of my                               | knowledge, and that this information can be   |
| usiness name: All State Septic Services LLC  |  | Certification number: 323   |
| spector signature: Tom Troolen   |  | License number: 1568  |
| (This document has been electronically sign  | gned)  | Phone: 612-594-4496   |
| lecessary or locally required supporting do  | ocumentation (must b   | oe attached)  |
|  | required forms  Tank Inte                                      |   |
|  | redemonstration from the transfer                              |   |
| Other information (list):  | /  |   |
|  |  |   |
| ttps://www.pca.state.mn.us • 651-296-6300 • 800-657-38   | <ul> <li>Use your preferred related</li> </ul>                 |   |
| ua_wwicted 21h . 1/29/2021   |  | Daga 1 of   |

| iness Name: All State Septic Services LL   | С  | Date:   | 8/11/2022  |
|--|--|---|--|
| mpact on public health — Co  | -<br>ampliance com   | nonent #1 of 5  |  |
| Compliance criteria:   | inpliance com  | Attached supporting documentati   | on:  |
| System discharges sewage to the  | ☐ Yes* ☒ No  | Other:  | <b>O</b> 11.   |
| ground surface   |  | ☐ Not applicable  |  |
| System discharges sewage to drain tile or surface waters.  | ☐ Yes³   No  | -   |  |
| System causes sewage backup into dwelling or establishment.  | ☐ Yes <sup>*</sup> No  | -   |  |
| Any "yes" answer above indicates<br>imminent threat to public health an  |  | -   |  |
| Describe verification methods and  | results:   |   |  |
| None of the above observed.  |  |   |  |
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| ank integrity – Compliance   | component #2   | of 5  |  |
| Compliance critéries   |  |   |  |
| Compliance critéria:   |  | Attached supporting documentati   | on:  |
| System consists of a seepage pit,  | ☐ Yes* ☑ No  | Attached supporting documentati  Empty tank(s) viewed by inspector  | on:  |
| System consists of a seepage pit, cesspool, drywell, leaching pit,   | ☐ Yes <sup>*</sup> 🏻 No  | ☑ Empty tank(s) viewed by inspector   | Meyer's Sewe   |
| System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?   |  | ☑ Empty tank(s) viewed by inspector     Name of maintenance business:   | Meyer's Sewe<br>Service  |
| System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their  | ☐ Yes* ☒ No ☐ Yes* ☒ No  | ☑ Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business  | Meyer's Sewe<br>Service<br>ness: 915   |
| System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?   |  | ☑ Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business Date of maintenance:   | Meyer's Sewe<br>Service<br>ness: 915<br>8/11/2022  |
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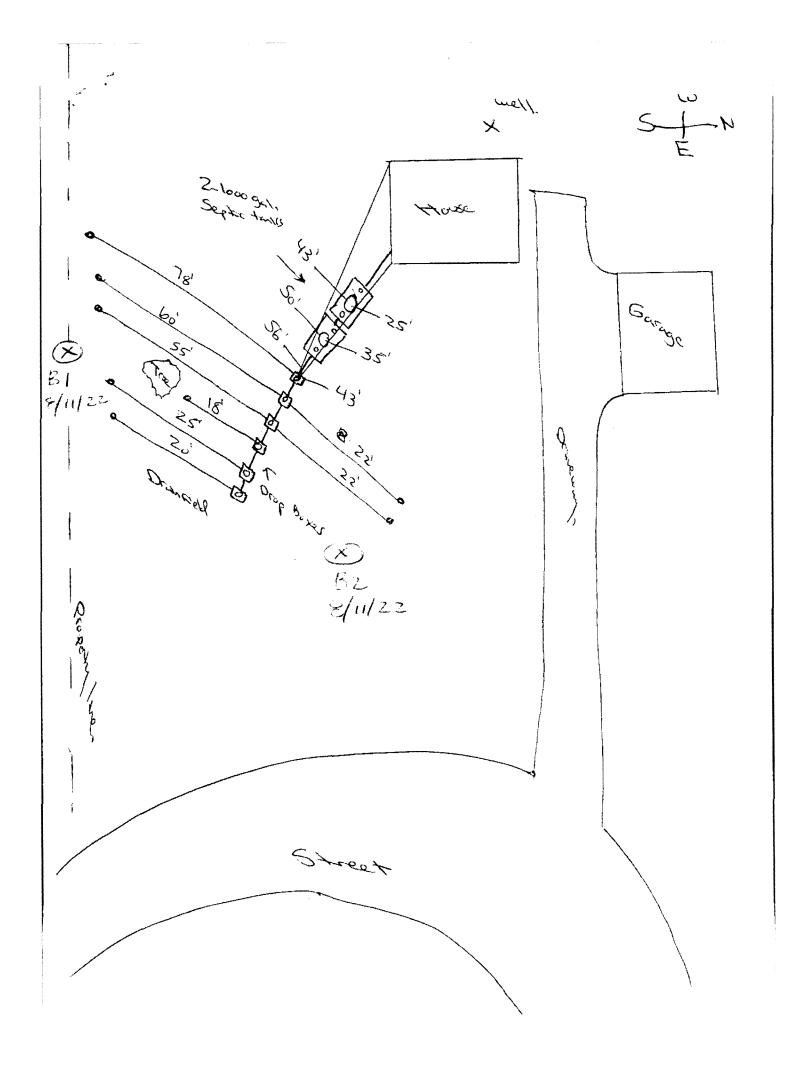
| Property Address: 6244 Inwood Ct N Grant, MN 55082   |  |
|--|--|
| Business Name: All State Septic Services LLC   | Date: 8/11/2022                                      |
| ~  |  |
| Other compliance conditions – Compliance component #3 of 5   |  |
| 3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or un-             | secured?   |
| ☐ Yes ☑ No ☐ Unknown   |  |
| 3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or saf       | ety? ☐ 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* <b>☒</b> 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:   |  |
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| Attached supporting documentation:   Not applicable  |  |
| постаррновые   |  |
| . Operating permit and nitrogen BMP* — Compliance component #4   | of 5 Mot applicable                                  |
|  |  |
|  | 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                         | ed.  |
| 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:   |  |
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| Attached supporting documentation:   Operating permit (Attach)   |  |
|  |  |
| tps://www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • Use your preferred relay service                 | <ul> <li>Available in alternative formats</li> </ul> |

| susiness Name: All State Septic Services LLC   |       |         | Date: 8   | 3/11/2022    |
|--|-------|---------|---|--------------|
| Soil separation – Compliance con   | npone | nt #5 o | f 5   |              |
| Date of installation 9/21/2001 (mm/dd/yyyy)  | Unkr  | nown    |   |              |
| Shoreland/Wellhead protection/Food beverage lodging?   | ☐ Yes | ⊠ No    | Attached supporting documentation:  |              |
| Compliance criteria (select one):  |       |         | Soil observation logs completed for the      Two previous verifications of required     Two previous verifications of required     Soil observation logs completed for the log | •            |
| 5a. For systems built prior to April 1, 1996, and<br>not located in Shoreland or Wellhead<br>Protection Area or not serving a food,<br>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.   |       |         |   |              |
|  | ⊠ Yes | □ No*   | Indicate depths or elevations   |              |
| April 1, 1996, or later or for non-<br>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*  | 3.0          |
| saturated soil or bedrock.*  |       |         | *May be reduced up to 15 percent if allo<br>Ordinance.  | wed 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.  |       |         |   |              |

## Describe verification methods and results:

Reviewed design, permit, soil, inspection and pumping records on file at Washington County.

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.



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|-----------------------|--------|----------|----------------------|---------|--|

## Soil Observation Log

v 04.01.2021

Project ID:

| Client:       |   |            | Bob Johnson   |                          | Locat  | Location / Address:                    | 6244              | 6244 Inwood Ct N Grant, MN 55082 | ant, MN 55082                       |
|---------------|---|------------|---|--------------------------|--|--|-------------------|----------------------------------|-------------------------------------|
| Soil parent m | Soil parent material(s): (Check all that apply) | k all that | арріу) [  | Outwash Dacustrine       | Loess Till                                   | Alluvium                               | m 🔲 Bedrock       | LJ                               | Organic Matter                      |
| Landscape Po  | Landscape Position: (select one)                | ne)        |   | Slope %:                 | Slope shape                                  |  |                   | Elevatio                         | Elevation-relative to<br>benchmark: |
| Vegetation:   |   |            | ¥*  | Soil survey map units:   |  |  |                   | Limiting Layer Elevation:        | Elevation:                          |
| Weather Cond  | Weather Conditions/Time of Day:                 | Jay:       |   |                          |  |  | Date              | 0                                | 08/11/22                            |
| Observatic    | Observation #/Location:                         | В          | B-1   |                          |  | )sqO                                   | Observation Type: |                                  | Auger                               |
| Denth (in)    | Textlife  | Rock       | Matrix Color(s)   | Mottle Color(s)          | Redox Kind(s)                                | Indicator(s)                           |                   |                                  |                                     |
| Deptil (III)  | וביינמור  | Frag. %    | macrix corol (3)  | (c)                      | (6) 21111 2222                               | (2)                                    | Shape             | Grade                            | Consistence                         |
| 0             | Liconot vibraco                                 | 7350       | 10YR 3/2  |                          |  |  | 0.000.088         |                                  |                                     |
| 2             | salidy topsoft                                  | 0/0        |   | over more to             | erre erre e                                  | ardinana in                            | erri een in       |                                  | ••••                                |
|               | loamy fine                                      | ć          | 10YR 5/4  |                          |  | e ana yang                             | A ANN NY FI       |                                  |                                     |
| 10-44         | sand  | %cs>       |   |                          |  | preduna u                              | INNE FOR IN       |                                  |                                     |
| 011           |   | ,03C       | 10YR 4/4  |                          |  | S *43. A4A                             | 6 . 242. ANS      |                                  | ••••                                |
| 44-30         | todiny saiku                                    | %CC>       |   | 1000 700                 |  | pAA A33 ZA                             | eoeax xe          |                                  |                                     |
| 5.8.78        | paes  | /35%       | 10YR 3/4  |                          |  |  | 600 N             |                                  |                                     |
| 07-00         | 2   |            |   |                          |  | OC. 1883. 436                          | v varal jajav     |                                  |                                     |
|               |   |            |   | Anne Ammin               |  | .008. 333                              | AAA AAA 2         |                                  |                                     |
|               |   |            |   |                          |  | *** ****                               |                   |                                  | ************                        |
|               |   |            | ana ana ana ana an  |                          |  | ,884 844 4                             | NAX ##Y #         |                                  |                                     |
|               |   |            |   |                          |  | M. 200 SAN                             | T NOO 221         |                                  |                                     |
|               |   |            |   |                          |  | ************************************** | ann ann n         |                                  |                                     |
|               |   | <b>M</b>   |   |                          |  | M. AAA 247                             | 50 NAX YYY        |                                  | VV<********                         |
| Comments      |   |            |   |                          |  |  |                   |                                  |                                     |
| I hereby cert | ify that I have o                               | ompleted   | I hereby certify that I have completed this work in accordance with | tance with all applicabl | n all applicable ordinances, rules and laws. | s and laws.                            |                   |                                  |                                     |
|               | Tom Trooien                                     |            |   | Tom Trooien              |  | 1                                      | 1568              | •                                | 8/11/22                             |
| (De           | (Designer/Inspector)                            |            |   | (Signature)              |  |  | (License #)       |                                  | (Date)                              |

|          |     | 50.0 |      |  |
|----------|-----|------|------|--|
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|          |     | 944  | - 55 |  |
|          | 300 |      |      |  |
|          |     | 32   |      |  |
| <br>8.77 | -23 | 2.0  |      |  |
| ~        |     | 100  |      |  |
| 900      | 15. | à.   |      |  |
|          |     |      |      |  |

## Soil Observation Log

v 04.01.2021

Project ID:

| Client:       |   |   | Bob Johnson     |            |  | Locat                | Location / Address: | 6244 lr           | 6244 Inwood Ct N Grant, MN 55082 | ant, MN 55082                           |
|---------------|---|---|-----------------|------------|--|----------------------|---------------------|-------------------|----------------------------------|---|
| Soil parent m | Soil parent material(s): (Check all that apply) | sk all that                             | apply)          | $^{\circ}$ | Outwash Dacustrine   | Loess Till           | Mluvium 🔲           | m 🔲 Bedrock       | LJ                               | Organic Matter                          |
| Landscape Po  | Landscape Position: (select one)                | ne)                                     |                 |            | Slope %:   | Slope shape          |                     |                   | Elevatio                         | Elevation-relative to<br>benchmark:     |
| Vegetation:   |   |   |                 | Soil       | Soil survey map units:   |                      |                     |                   | Limiting Layer Elevation:        | Elevation:                              |
| Weather Conc  | Weather Conditions/Time of Day:                 | Day:                                    |                 |            |  |                      |                     | Date              | )                                | 08/11/22                                |
| Observatic    | Observation #/Location:                         | Ġ                                       | B-2             |            |  |                      | Obse                | Observation Type: |                                  | Auger                                   |
| Depth (in)    | Texture   | Rock<br>Frag. %                         | Matrix Color(s) | r(s)       | Mottle Color(s)  | Redox Kind(s)        | Indicator(s)        | I                 | Grade                            | Consistence                             |
|               |   |   | 10YR 3/2        |            |  |                      |                     | •                 |                                  |   |
| 0-12          | sandy topsoil                                   | <35%                                    |                 |            | and the state of t |                      | Y 777. AAA A        |                   |                                  | ***********                             |
| i i           |   | , ou                                    | 10YR 3/4        |            |  |                      |                     | c. 223.247.       |                                  | V/(111111111111111111111111111111111111 |
| 05-71         | Tine sand                                       | %C5>                                    |                 |            |  |                      |                     |                   |                                  | dyxynx a c c                            |
| 50-78         | fine sand                                       | <35%                                    | 10YR 4/4        |            |  |                      | * **** ****         | * 228. ABB. ASS.  |                                  |   |
|               |   |   | ~~~             |            | 7 - Paris J. 10  | v Contro ⊕o          | . 383 °M            |                   |                                  |   |
|               | a ja jamanana ka                                | as agreemen                             |                 |            | ** (AAA)********************************   | . 200 PCA            |                     | 255 950 A         |                                  | NASA OBSANTA                            |
|               |   | 10.000.000 × 2° 00                      |                 | 1          |  |                      | pak tan ma          | 550 PAR 584       |                                  | **********                              |
|               |   |   |                 |            |  |                      |                     | - V 6 6, ABA      |                                  | *************                           |
|               |   | essans secre second                     |                 | ********   |  |                      | na ude one          | ** «** •••        |                                  |   |
|               |   |   |                 |            |  |                      |                     |                   |                                  | **********                              |
|               | annonno ( ) A A A                               | 200000000000000000000000000000000000000 |                 |            |  |                      |                     | na anna chùis     |                                  | .,,,,,,,,,,,                            |
|               |   |   |                 |            | energe e the con   | unigo de 1994 e 1994 |                     | ,,                |                                  |   |
|               |   | sandron Audendo                         |                 |            |  |                      | A. JANA VIV         | ,A 102 ***        |                                  | ********                                |
| Comments      |   |   |                 |            |  |                      |                     |                   |                                  |   |
| I hereby cert | tify that I have c                              | completed                               | this work in ac | ccordan    | I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.   | le ordinances, rule  | s and laws.         |                   |                                  |   |
|               | Tom Trooien                                     |   |                 |            | Tom Trooien  |                      | ı                   | 1568              |                                  | 8/11/22                                 |
| (De           | (Designer/Inspector)                            | -                                       |                 |            | (Signature)  |                      |                     | (License #)       |                                  | (Date)                                  |