

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: 33.028.21.43.0014 Reason for Inspection: property sale

Local regulatory authority info: Washington County

Property address: 4781 Stimson Trl Woodbury, MN 55129

Owner/representative: Wade Hanson, ReMax Results Realty Owner's phone: 651-274-8584

Brief system description: Two precast septic tanks and a pump tank lifting to a mound drainfield.

System status

System status on date (mm/dd/yyyy): 8/15/2022

Compliant – Certificate of compliance*

(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.)

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

Noncompliant – Notice of noncompliance

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 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

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

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: All State Septic Services LLC Certification number: 323

Inspector signature: Tom Trooien License number: 1568

(This document has been electronically signed) Phone: 612-594-4496

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): ISTS Certificate of Compliance dated 7/14/2004 Permit site review showing mottling at 19"

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

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

Describe verification methods and results:

None of the above observed.

Attached supporting documentation:

- Other: _____
- Not applicable

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:	

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

Describe verification methods and results:

The tanks were at normal operating level, then were pumped for the inspection. Lowered a camera into the empty tanks - bottoms, walls, covers, baffles, risers and maintenance hole covers ok.

While not a compliance criteria, the control box post at the pump tank should be backfilled.

The high water alarm was functional at the time of inspection.

Attached supporting documentation:

- Empty tank(s) viewed by inspector
- Name of maintenance business: Pinky's Sewer Service
- License number of maintenance business: 9755
- Date of maintenance: 8/15/2022
- Existing tank integrity assessment (Attach)
- Date of maintenance (mm/dd/yyyy): _____ (must be within three years)
- (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: _____

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)

5. Soil separation – Compliance component #5 of 5

Date of installation 7/14/2004 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	102.0
B. Periodically saturated soil/bedrock	98.7
C. System separation	3.3
D. Required compliance separation*	3.0

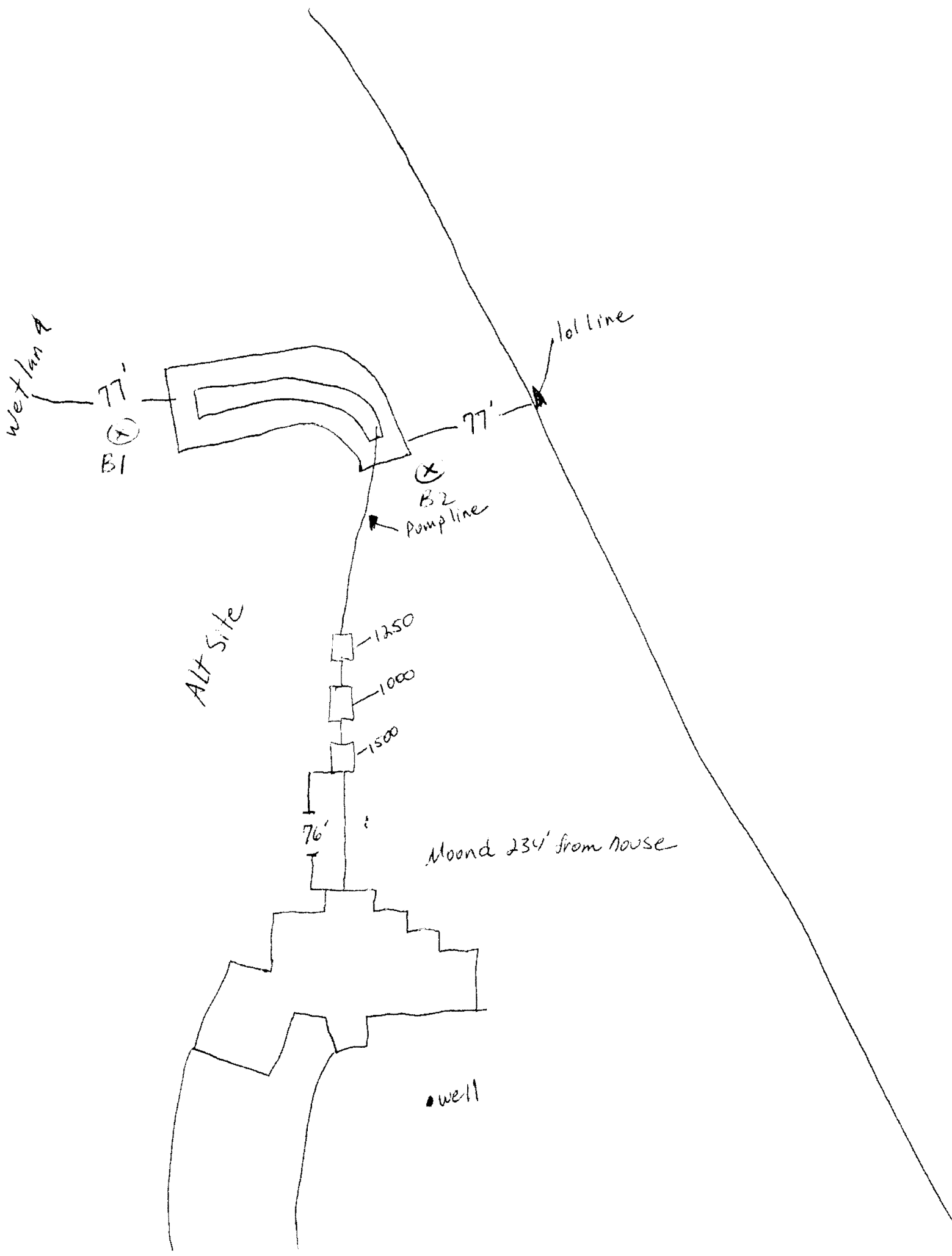
*May be reduced up to 15 percent if allowed by Local Ordinance.

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

Describe verification methods and results:

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.



Soil Observation Log

Project ID: _____ v 04.01.2021

Client: Melanie Brown

Location / Address: 4781 Stimson Trl Woodbury, MN 55129

Soil parent material(s): (Check all that apply)

Outwash Lacustrine Loess Till Alluvium Bedrock Organic Matter

Landscape Position: (select one)

Slope %: _____ Slope shape _____

Elevation relative to benchmark: _____

Vegetation: _____

Soil survey map units: _____

Limiting Layer Elevation: _____

Weather Conditions/Time of Day: _____

Date 08/15/22

Observation #/Location: _____ **Observation Type:** _____ **Auger**

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Shape	Grade	Consistence
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0-12	topsoil	<35%	10YR 3/3						
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12-24	sandy clay loam	<35%	10YR 4/4	10YR 5/8 10YR 5/2	Concentrations Depletions	S1 S1			
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Comments Redox at 20"

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

Tom Trooien _____
(Designer/Inspector)

Tom Trooien _____
(Signature)

1568 _____
(License #)

8/15/22 _____
(Date)



Soil Observation Log

Project ID: _____ v 04.01.2021

Client: <u>Melanie Brown</u>				Location / Address: <u>4781 Stimson Trl Woodbury, MN 55129</u>									
Soil parent material(s): (Check all that apply)				Slope shape:									
<input type="checkbox"/> Outwash <input type="checkbox"/> Lacustrine <input type="checkbox"/> Loess <input type="checkbox"/> Till <input type="checkbox"/> Alluvium <input type="checkbox"/> Bedrock <input type="checkbox"/> Organic Matter				<input type="checkbox"/> Elevation-relative to benchmark:									
Landscape Position: (select one)				Limiting Layer Elevation:									
<input type="checkbox"/> Slope %:				<input type="checkbox"/> Soil survey map units:									
Vegetation:				Date: <u>08/15/22</u>									
Weather Conditions/Time of Day:				Observation Type: <u>Auger</u>									
Observation #/Location:		<u>B-2</u>		Indicator(s)		Shape		Structure		Grade		Consistence	
Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)								
0-8	topsoil	<35%	10YR 3/3										
8-24	sandy clay loam	<35%	10YR 5/4	10YR 6/8 10YR 5/1	Concentrations Depletions	S1 S1							
Comments <u>Redox at 16"</u>													
I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.													
<u>Tom Trooien</u>				<u>Tom Trooien</u>				<u>1568</u>		<u>8/15/22</u>			
(Designer/Inspector)				(Signature)				(License #)		(Date)			



SITE REVIEW and/or SEPTIC PERMIT APPLICATION

Washington County Public Health & Environment

14949 62nd Street N, PO Box 6, Stillwater, MN 55082-0006

651/430-6688 FAX 651/430-6730

Paid \$ _____

Make checks payable to WASHINGTON COUNTY

Receipt # _____

- \$215 - Drainfield System Permit
- \$350 - Mound System Permit
- \$350 - Alternative/Experimental System
- \$ 85 - Additional Review Fee (1 hour minimum)
- \$205 - Individual Lot
- \$140 - Subdivision Soil/Site Review - Base fee Plus \$65/lot
- \$105 - Renewal of an Expired Permit

2500-0400 *3*

Legal Description and Parcel Identification Number (especially if this is for a NEW SUBDIVISION OR MINOR SUBDIVISION)
 LOT 4, BLK 2, STIMSON MEADOWS, 66XX MILITARY ROAD, WOODBURY

Applicant McDONALD CONSTRUCTION CO.	Address 7601 145 TH ST. W.	City APPLE VALLEY	State MN	Zip 55124	Phone 952-432-7601
Owner (if different from applicant) GARY & DIANE KIERKHOFER	Address	City	State	Zip	Phone

New Home Existing Home New Business Existing Business Number Of Bedrooms: 5 Gallons Per Day: 750

Check the following fixture(s) which are or will be installed: Garbage Disposal: POSS Recreational Bathing Facility: (jacuzzi, hot tub, etc.): POSS

New Home ⇒ Drainfield System Mound System Alternate/Experimental System Existing Permit Renewal
 Existing Home Replacement System ⇒ Drainfield System Mound System Tank Replacement Only

Site Approval Only If this site has been previously 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 Washington County, 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 Washington County 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 Washington County Dept. of Public Health & Environment that the installation is ready for inspection.

I hereby certify the above to be true and correct. In connection with your request for a soil review/septic permit, I hereby give Washington County Department of Public Health and Environment permission to enter upon my property during normal business hours for the purpose of determining the suitability of the location, design, and construction, which may include minor excavation or soil borings by the Department.

Signature of Applicant (Owner or Contractor) Date

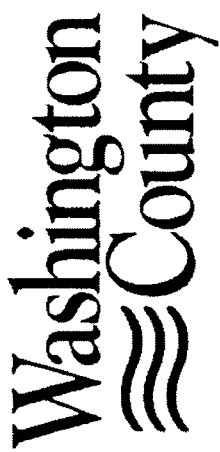
THE AREA BELOW IS FOR COUNTY USE ONLY

SITE EVALUATION: BY INSPECTOR CWL DATE 10 FEB 2004

SETBACKS:	REQUIRED [CIRCLE APPROPRIATE ITEM(S)]					ACTUAL
	50'	75'	100'	150'		
Well (including adjacent property)						
Wetland, Pond, Lake, Stream, River, or Bluffline						

CONCLUSIONS: Site Suitable: Site Unsuitable: Additional Tests Required: Verify Use: _____ Bedrooms

NOTES Lot Size _____ Year Built _____
30028 21430014 SOIL PIT MOTTLED @ 19"



Department of Public Health and Environment

14949 62nd Street North PO Box 6
Stillwater MN 55082-0006
Office: 651-430-6655 – TTY: 651-430-6246 – Fax: 651-430-6730

Individual Sewage Treatment System Certificate of Compliance

Type of System: Standard Mound
Permit Number: 2500-04-002
Property ID Number: 30-028-21-43-0014
Property Address: 4781 Stimson TR S
Community: Woodbury
Date of Installation: July 14, 2004

This certifies that the individual sewage treatment system installed at the aforementioned address was inspected during installation and found to be in compliance with requirements of the Washington County Development Code, Chapter Four, Individual Sewage Treatment System Regulations (Washington County Ordinance No. 128). This Certificate of Compliance is valid for five (5) years from the date of issuance unless Washington County finds evidence of an imminent threat to public health and safety. Supporting documentation with detailed information on the system can be found on the attached as-built.

A handwritten signature in black ink, appearing to read "Chris LeClair", written over a horizontal line.

Christopher W. LeClair, REHS
Senior Environmental Specialist