



Minnesota Pollution Control Agency

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

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTs)

Parcel number: Lot 2 Blk 2 Tanglewood Add.

System status: [X] Compliant [] Noncompliant
(based on all compliance requirements)

For Local Tracking Purposes: [Empty box]

Summary Form

Property Information

Property owner name(s): Robert Leitz
Property address: 450 Tanglewood Ln Marine on St. Croix
Property owner's address (if different):
County: Washington Property owner phone: 651-433-5218 Permitting authority: Washington
Date system constructed: 7-12-93 Reason for inspection: Property transfer

System Description

Brief system description: two septic tanks & lift station drop box trench system
Local permit number: 4193009 Number of bedrooms: 4 Design flow rate:

Is the system:

- In Shoreland area? [] Yes [X] No
An U.S. Environmental Protection Agency (EPA) Class V Injection Well? [] Yes [X] No
In Wellhead Protection Area? [] Yes [X] No
System serving a Minnesota Department of Health (MDH) licensed facility? [] Yes [X] No

Compliance Status (Based on state requirements - additional local requirements may also apply.)

Based on the information gathered and reported on attached forms, the compliance status of this system is (check one):

- [X] Certificate of Compliance - valid until (3 years from date of report):
[] Notice of Noncompliance - For Noncompliant systems:

The reason for noncompliance is:

This noncompliant system is classified as (check one below):

- [] Imminent threat to public health & safety [] Failing to protect ground water [] Not in compliance with operating permit

Certification (Completed form must be submitted to the local unit of government within 15 days.)

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.

Name: Larry Christiansen Certification number: L-3911
Business license name and number: Scandia Compliance Divs. or
Name of local unit of government: Washington Co.
Signature: Larry Christiansen Date: 7-27-16

Required Attachments

Inspector Complete: This Inspection Report is 4 pages long.

- Check compliance forms attached: [] Hydraulic Performance [X] Tank Integrity [X] Soil Separation [] Operating Permit Form (if applicable) [X] System drawing/As-built drawing [] An assessment of any local requirements that are different from what is required on this form [X] Soil Boring Logs [] Abandonment form (if appropriate) [] Other information (list):

Upgrade Requirements (derived from 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.

Parcel number: Lot 2 Blk 2 Tanglewood Add.

System status: Compliant Noncompliant
(as determined by this form)

Soil Separation Compliance and Other Compliance

Compliance Issue #3 of 4

Date of observation: 7-26-16 Reason for observation: Compliance Insp

This information on this form does not expire.

Compliance questions/criteria: (Required)
(Check the appropriate box)

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:

Does the system have at least a two-foot vertical separation distance from periodically saturated soil or bedrock?

Yes No

For 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:

Does the system have a three-foot vertical separation distance from periodically saturated soil or bedrock?*

Yes No

For reduced separation distance systems (i.e., "performance" systems under old 7080.0179 or Type IV or V system under new 7080. 2350 or 7080.2400):

Does the system meet the designed vertical separation distance from periodically saturated soil or bedrock?*

Yes No

Any "no" answer indicates that the system is failing to protect ground water.

Verification Method:** (Optional)

(Check the appropriate box).

Conducted soil observation(s) (attach boring logs)

Two previous verifications (attach boring logs)

Other: _____

Soil observation does not expire. Previous observations by two independent parties are sufficient, unless site conditions have been altered.

* May be reduced by up to 15 percent if allowed in local ordinance.

** No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.

Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) **Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems**. Observations, interpretations, and conclusions must be completed by an inspector or designer. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Robert Lertz

Property address: 450 Tanglewood Ln. Marine on St. Croix

Property owner's address (if different): _____

County: Washington Phone: 651-433-5218

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Larry Christensen Certification number: L-3911

Business license name and number: Scandia Compliance Insp LLC or

Name of local unit of government: Washington Co

Signature: Larry Christensen Date: 7-27-16

Parcel number:

Lot 2 Blk 2 Tanglewood Add

System status: Compliant Noncompliant
(as determined by this form)

Hydraulic Performance and Other Compliance

Compliance Issue #1 of 4

Date of observation:

7-26-16

Reason for observation:

Compliance Insp.

This form expires upon next inspection or in three years, whichever occurs first:

Compliance questions/criteria: (Required)

(Check the appropriate box)

Does the system discharge sewage to the ground surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the system discharge sewage to drain tile or surface waters?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the system cause sewage backup into dwelling or establishment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Do other situations exist that have the potential to immediately and adversely impact or threaten public health or safety (electrical, unsafe covers, etc.)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<i>Any "yes" answer indicates that the system is an imminent threat to public health and safety.</i>	
Does the system pose a threat to ground water for any conditions deemed non-protective as determined by the inspector?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

"Yes" indicates that the system is failing to protect ground water. If "yes", describe the condition noted:

Verification Method*: (Optional)

(Check the appropriate box)

- Searched for surface outlet
- Performed hydraulic test
- Searched for seeping in yard
- Checked for backup in home
- Excessive ponding in soil system/D-boxes
- Homeowner testimony
- Examined for surging in tank
- "Black soil" above soil dispersal system
- System requires "emergency" pumping
- Performed dye test
- Other: _____

** No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.*

Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Robert Leitz

Property address: 450 Tanglewood Ln. Marine on St. Croix

Property owner's address (if different):

County: Washington

Phone: 651-433-5218

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Larry Christiansen

Certification number: L-3911

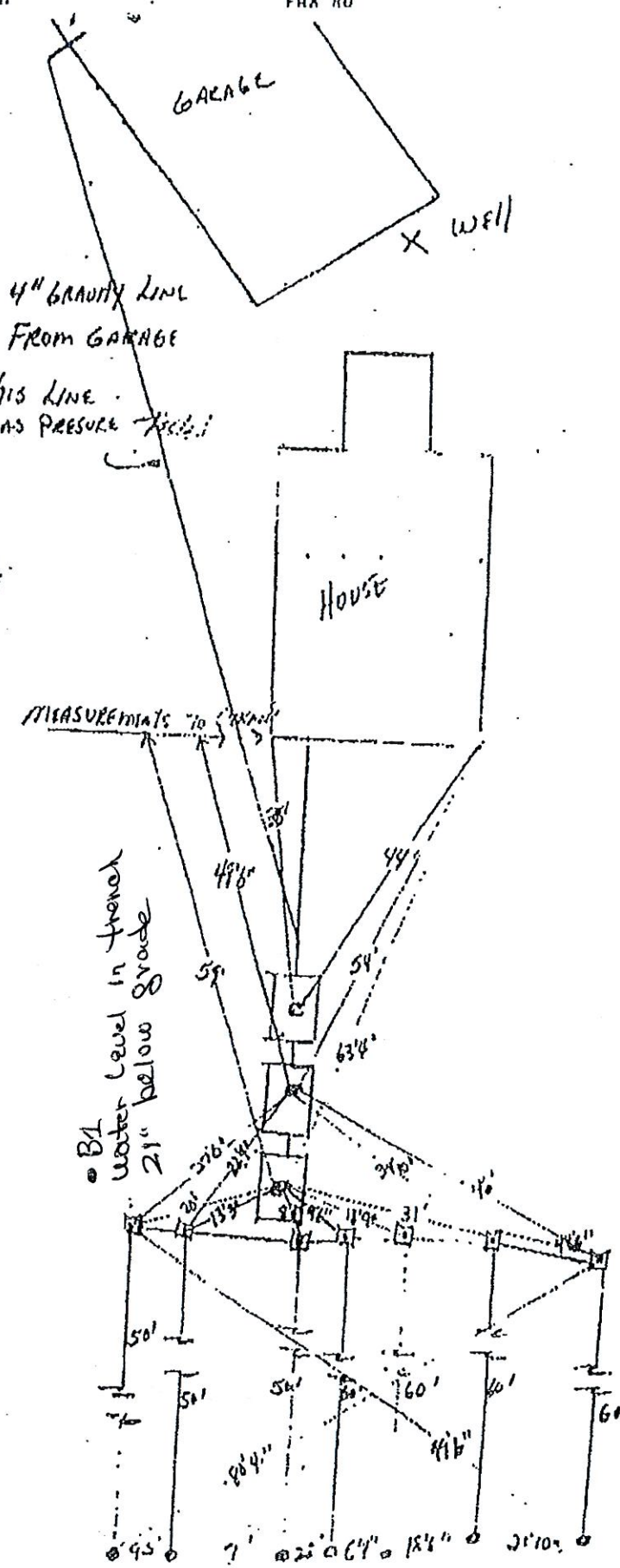
Business license name and number: Scandia Compliance Insp LLC

or

Name of local unit of government: Washington Co

Signature: Larry Christiansen

Date: 7-27-16



4" GRAVITY LINE
FROM GARAGE

THIS LINE
WAS PRESSURE LINE

MEASUREMENTS TO

B1
water level in trench
21" below grade

Lot 2 BIK 2 TANGEL
Wood Add.
MARINE ON ST. CROIX

Scale 1" = 20'

Installed 7-12-93

Permit # 4193009

By PETERSON EXL. INC.
21090 OZARK CT. N.
SCANDIA, MN.
433-2977

B1.

- 0-18" All top soil
- 18-23" Clay loam 10yⁿ/₄
- 23-53" Fine silt clay 10yⁿ/₄
- 53-63" Fine sand 10yⁿ/₄