

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

### 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 <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>.

procel ID# or Sec/Twp/Range: 35.029.20.32.0019 pocal regulatory authority info: Washington County reporty address: 16039 6th St N Lakeland, MN 55043 wher/representative: Rachael Blomer rief system description: A pre-cast septic tank and a gravity,  ystem status  ystem status on date (mm/dd/yyyy): 9/29/2022  Compliant – Certificate of compliance*	Reason for Inspection	property sale  Owner's phone: 651-491-6625
roperty address: 16039 6th St N Lakeland, MN 55043 wher/representative: Rachael Blomer rief system description: A pre-cast septic tank and a gravity,  ystem status  ystem status on date (mm/dd/yyyy): 9/29/2022	, rock trench drainfield.	Owner's phone: 651-491-6625
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ystem status on date (mm/dd/yyyy): <u>9/29/2022</u>		
□ Compliant – Certificate of compliance*		
	☐ Noncompliant – No	tice of noncompliance
Talid for 3 years from report date unless evidence of an aminent threat to public health or safety requiring removal and patement under section 145A.04, subdivision 8 is discovered or	use discontinued within the	round water must be upgraded, replaced, or time required by local ordinance.
shorter time frame exists in Local Ordinance.)		ic health and safety (ITPHS) must be use discontinued within ten months of receip
lote: Compliance indicates conformance with Minn 7080.1500 as of system status date above and does not uarantee future performance.		orter period if required by local ordinance or
Reason(s) for noncompliance (check all applic	cable)	
Impact on public health (Compliance component		ic health and safety
☐ Tank integrity (Compliance component #2) – Faili		
☐ Other Compliance Conditions (Compliance comp	onent #3) – <i>Imminent threat t</i>	o public health and safety
Other Compliance Conditions (Compliance comp	onent #3) – Failing to protect	groundwater
System not abandoned according to Minn. R. 708	80,2500 (Compliance compor	nent #3) – Failing to protect groundwater
☐ Soil separation (Compliance component #5) – Fa	ailing to protect groundwater	
Operating permit/monitoring plan requirements (C	Compliance component #4) -	Noncompliant - local ordinance applies
Comments or recommendations		
ertification		
hereby certify that all the necessary information has been gather iture system performance has been nor can be made due to unk nadequate maintenance, or future water usage.	red to determine the compliance known conditions during system	status of this system. No determination of construction, possible abuse of the system,
By typing my name below, I certify the above statements to be t sed for the purpose of processing this form.	true and correct, to the best of n	ny knowledge, and that this information can b
Susiness name: All State Septic Services LLC		Certification number: 323
nspector signature:Tom Trooien		License number: 1568
(This document has been electronically	signed)	Phone: 612-594-449
lecessary or locally required supporting of	documentation (mus	(ive attached)
	lly required forms ☐ Tank In	
☐ Soli observation riogs ☐ System As-Built ☐ Ecocar ☐ Sewage tank maintenance rep	·	
ttps://www.pca.state.mn.us • 651-296-6300 • 800-657	7-3864 • Use your preferred r	elay service • Available in alternative forma  Page 1 of

Compliance criteria:			Attached supporting d	ocumentation:	
System discharges sewage to the ground surface	☐ Yes	⊠ No	☐ Other:		
System discharges sewage to drain tile or surface waters.	☐ Yes²	<b>⊠</b> No			
System causes sewage backup into dwelling or establishment.	☐ Yes	⊠ No			
Any "yes" answer above indicates inminent threat to public health an		m is on			
Describe verification methods and	results:				
None of the above observed.					
nk integrity – Compliance Compliance criteria:	compo	onent #2	of 5  Attached supporting d	ocumentation:	
		onent #2 ⊠ No	Attached supporting d		
Compliance criteria:				y inspector	Pinky's S Service
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their			Attached supporting d  ☑ Empty tank(s) viewed b	y inspector pusiness:	Service
Compliance criteria:  System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	Yes	⊠ No	Attached supporting d  ☑ Empty tank(s) viewed b  Name of maintenance b	y inspector pusiness:	<u>Service</u> s: <u>1613</u>
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 d  ☑ Empty tank(s) viewed b  Name of maintenance b  License number of main	y inspector ousiness: ntenance business	Service 3: 1613 9/29/202
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 d  Empty tank(s) viewed b  Name of maintenance b  License number of main  Date of maintenance:  Existing tank integrity as  Date of maintenance	y inspector  pusiness:  htenance business  ssessment (Attack	9/29/2022 1)
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:	☐ Yes	⊠ No ⊠ No	Attached supporting d  ⊠ Empty tank(s) viewed b  Name of maintenance b  License number of main  Date of maintenance:  □ Existing tank integrity as	y inspector ousiness: ntenance business	Service s: 1613 9/29/2023
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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:	Yes Yes	⊠ No ⊠ No	Attached supporting d  ☑ Empty tank(s) viewed b  Name of maintenance b  License number of maintenance:  ☐ Existing tank integrity as  Date of maintenance (mm/dd/yyyy):  (See form instructions to Minn. R. 7082.0700 sub	y inspector  pusiness: ntenance business ssessment (Attach  (must be within p ensure assessm op. 4 B (1)) pumping not necess	Service  Service  1613  9/29/202  n)  three years  nent compli
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 indictions failing to protect groundwich	☐ Yes☐ Yes☐ Yes☐ Ates the	⊠ No ⊠ No	Attached supporting d  ☑ Empty tank(s) viewed b  Name of maintenance b  License number of maintenance:  ☐ Existing tank integrity as  Date of maintenance (mm/dd/yyyy):  (See form instructions to Minn. R. 7082.0700 sub	y inspector  business:  Intenance business  ssessment (Attach  (must be within  be ensure assessment, 4 B (1))	Service  Service  1613  9/29/2022  n)  three years  nent complie  ary – explain
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 tyes tanswer above indictions failing to protect groundward.  Describe verification methods and The maintenance hole cover is burie	Yes Yes Yes I results: d below g	No No No System  rade - see th	Attached supporting d  ☑ Empty tank(s) viewed b  Name of maintenance b  License number of maintenance:  ☐ Existing tank integrity as  Date of maintenance (mm/dd/yyyy):  (See form instructions to Minn. R. 7082.0700 sub  ☐ Tank is Noncompliant (p)  ☐ Other:	y inspector  pusiness: ntenance business ssessment (Attach  (must be within puensure assessment), 4 B (1)) pumping not necess	Service  Service  1613  9/29/202  Three years  nent compliance of explain
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 indicates failing to protect groundward.	Yes Yes Yes I results: d below g	No No No System  rade - see the tenance hole	Attached supporting d  Empty tank(s) viewed b  Name of maintenance b License number of maintenance:  Date of maintenance:  Existing tank integrity as Date of maintenance (mm/dd/yyyy):  (See form instructions to Minn. R. 7082.0700 sub Tank is Noncompliant (p Other:	y inspector  pusiness:  Intenance business  ssessment (Attack  (must be within  poensure assessment, 4 B (1))  pumping not necess  y the owner refusi	Service  Service  1613  9/29/2022  Three years  nent complian  ary – explain

Business Name:All State Septic Services LLC	Date: 9/29/2022
	5.00
. Other compliance conditions – Compliance component	#3 of 5
3a. Maintenance hole covers appear to be structurally unsound (damaged, crad	cked, etc.), or unsecured?
3b. Other issues (electrical hazards, etc.) to immediately and adversely impact pu	iblic health or safety? ☐ Ves: M No ☐ Heknow
*Yes to 3a or 3b - System is an anninent threat to public realin and sa	•
3c. System is non-protective of ground water for other conditions as determined	
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	
On anating a small and alternate DRAD* Consultance and	
. Operating permit and nitrogen BMP* – Compliance con	mponent #4 of 5 🛛 Not applicable
Is the system operated under an Operating Permit?	nponent #4 of 5 ⊠ Not applicable  □ Yes □ No If "yes", A below is require
Is the system operated under an Operating Permit?  Is the system required to employ a Nitrogen BMP specified in the system design	☐ Yes ☐ No If "yes", A below is require
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Is the system operated under an Operating Permit?  Is the system required to employ a Nitrogen BMP specified in the system design	☐ Yes ☐ No If "yes", A below is required? ☐ Yes ☐ No If "yes", B below is required.
Is the system operated under an Operating Permit?  Is the system required to employ a Nitrogen BMP specified in the system design  BMP = Best Management Practice(s) specified in the system design	☐ Yes ☐ No If "yes", A below is required? ☐ Yes ☐ No If "yes", B below is required.
Is the system operated under an Operating Permit?  Is the system required to employ a Nitrogen BMP specified in the system design  BMP = Best Management Practice(s) specified in the system design  If the answer to both questions is "no", this section does not need	☐ Yes ☐ No If "yes", A below is required? ☐ Yes ☐ No If "yes", B below is required.
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Is the system operated under an Operating Permit?  Is the system required to employ a Nitrogen BMP specified in the system design  BMP = Best Management Practice(s) specified in the system design  If the answer to both questions is "no", this section does not need  Compliance criteria:  a. Have the operating permit requirements been met?	☐ Yes ☐ No If "yes", A below is require  ? ☐ Yes ☐ No If "yes", B below is require  to be completed.  ☐ No
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Business Name: All State Septic Services LLC			Date: S	9/29/2022	
Soil separation – Compliance cor	nponer	nt #5 o	f 5		
Date of installation 1979 (mm/dd/yyyy)	_ ☑ Unkno	own			
Shoreland/Wellhead protection/Food beverage lodging?	☐ Yes	⊠ No	Attached supporting documentation:  ☑ Soil observation logs completed for the	ne report	
Compliance criteria (select one):			☐ Two previous verifications of required	l vertical separatio	
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	а)	
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.					
5b. Non-performance systems built	☐ Yes	□ No	Indicate depths or elevations		
April 1, 1996, or later or for non- performance systems located in Shoreland			A. Bottom of distribution media	2.9	
or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:			B. Periodically saturated soil/bedrock	5.1	
Drainfield has a three-foot vertical			C. System separation	2.2	
separation distance from periodically			D. Required compliance separation*	2.0	
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-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 <sup>°</sup>			
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.					

Describe verification methods and results:

failing to protect groundwater.

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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			- 27	-0.

# Soil Observation Log

Page Ass			1			)	Pro	Project ID:				v 04.01.2021
lient:		<b>—</b>	Rachael Blomer				Location	Location / Address:	:5:	16039	16039 6th St N Lakeland, MN 55043	nd, MN 55043
oil parent ma	oil parent material(s): (Check all that apply)	ck all that	apply)	Ŏ	Outwash Dacustrine	ne Dess			Alluvium	Bedrock	k Organic Matter	: Matter
andscape Pos	andscape Position: (select one)	ne)										
Vegetation:												
eather Cond	eather Conditions/Time of Day:	Day:								Date	0	09/29/22
Observatio	Observation #/Location:		B-1					O	Observation Type:	on Type:		Auger
Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	(s)	Mottle Color(s)	Redox Kind(s)		Indicator(s)		I	Grade	l Consistence
		à	10YR 2/2	*****		Ann popular				********		
07-0	loamy sand	<b>√3</b> 2%	**************************************			- 12000 A NOV -				**********		
(		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	10YR 4/3	Marin Marina Comm		ev en ac			es comes	*******		
95-07	toamy sand	%25% %25%	***********						The second section is	v (* * * * * * * * * * * * * * * * * * *		
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Comments												
hereby certif	fy that I have c	completed	this work in acc	ordanc	hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.	able ordinand	ses, rules ar	nd laws.				
	Tom Trooien				Tom Trooien	en			15	1568	•	9/29/22
(Desi	(Designer/Inspector)				(Signature)	(a			(Lice	(License #)		(Date)

⊗ B-1

9/29/22 DRAINFIELD SEPTIC TANK House 16039 GTH STN LAKELAND, MN 55043 NO WELL -CITY WATER



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

## Sewage tank maintenance reporting form

Subsurface Sewage Treatment Systems (SSTS) Program

Purpose: Management and maintenance of Subsurface Sewage Treatment Systems (SSTS) are important to ensure resource protection and long-term and cost-effective sewage treatment. Completion of this form complies with the sewage tank maintenance requirements under Minn. R. 7080.2450 and 7082.0600. This form may be used to certify the compliance status of the sewage tank components of the SSTS. This form is not a complete SSTS inspection report, only a tank integrity assessment, and may only certify sewage tank compliance status when entirely completed and signed on page 3 by a qualified professional.

**Instructions:** A copy of this information must be submitted to the system owner within 30 days of the maintenance date and be maintained by the licensed SSTS maintainer business for a period of five (5) years from the maintenance date. Maintenance reporting to the local unit of government **may be** required by local ordinance. Check with your local SSTS program for maintenance reporting protocol.

#### Secure maintenance hole covers

www.pca.state.mn.us

wa-wwists4-38 • 1/7/21

651-296-6300

800-657-3864

All maintenance hole covers must be returned to service in a sound and durable condition and be capable of withstanding the anticipated load.

Covers must be re-secured in accordance with Minn, R. 7080,2450, subp. 3, Items C or D:

- a) Covers installed under local ordinances adopted after February 4, 2008 must be locked, botted or screwed or must be 95 pounds in weight. They must be made of material suitable for outdoor use, resistant to ultraviolet degradation and leaks, and not susceptible to being slid or flipped. They must have a label warning of hazardous conditions inside the tank. All screw openings must be refastened.
- b) Covers installed under local ordinances adopted before February 4, 2008 must either be buried with at least 12 inches of soil cover or be secured according to the local ordinance in effect before February 4, 2008.
- c) Covers must meet item 'a' above when raised to the ground surface or less than 12 inches from the ground surface.

Property address: 60 39 6 5	Jat	of maintenance (mm/dd/yyy	y): 912017	2 Reason for mail	ntenance: Kouthou	AA.
Property owner's name:	oro	perty address: 16030	16151			
Property owner's name:	- 2				MM Zip code:	55043
State   Zip code   Phone number:   Email address:	ro	perty owner's name: <u>VCCC</u>	101 R10	mer_		
Phone number:    Email address:	,to	perty-owner's address if differe	ent:			
Did you measure the accumulation of scum and sludge?   Yes   No (tank(s) pumped without measuring)   Tank (check if present)   Scum   Sludge   Operating depth   Percent full   Septic/holding tank #1   Septic/holding tank #2   Pretreatment tank   Pump tank   Access used to remove septage:   Maintenance hole   Other (Unless a holding tank, go to #4 below)   If the maintenance hole was used, were all covers secured in place?   Yes   No If no, please explain below.   If the owner refuses to allow a Subsurface Sewage Treatment System (SSTS) to be pumped through the maintenar hole, have them complete and sign the following statement.   Pumper is name; hole. I understand that removal of solids and liquids through other access points is not considered a compliant method of solids removal and does not fulfill the solids removal requirements of Min R. 7080 2450 and 7082.0600.   By typing/signing 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 pumper of processing this form.	City	PARTITION AND AND AND AND AND AND AND AND AND AN	9979977	State:	Zip code:	
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□ Septic/holding tank #2 □ Pretreatment tank □ Pump tank  2. Access used to remove septage: □ Maintenance hole □ Other (Unless a holding tank, go to #4 below)  3. If the maintenance hole was used, were all covers secured in place? □ Yes □ No If no, please explain below.  4. If the owner refuses to allow a Subsurface Sewage Treatment System (SSTS) to be pumped through the maintenar hole, have them complete and sign the following statement.  1. □ Pumpers is name; □ No If no, please explain below.  2. If the owner refuses to allow a Subsurface Sewage Treatment System (SSTS) to be pumped through the maintenar hole, have them complete and sign the following statement.  2. □ Pretreatment tank □ Pump tank □ Pum						
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Use your preferred relay service

Available in alternative formats

Page 1 of 3

ov: Larucnet	1 6" St Du	State: WM	Parcel ID: Zip code: 550H3
Walliam Construction of the Construction of th	- Anna Carlo		
Is the tank designed aş∕a lea	ky tank? (Example: seepag	e pit, cesspool, drywell, lead	thing pit)
Tank #1: ☐ Yes ☑ No	Verification method used:	VISNOT	
Tank #2: ☐ Yes ☐ No	Verification method used:		
Is there evidence of the follo	wina?		
is there evidence of the folio	wing		Maintenance hole cover is
	Tank leaks below the	Tank leaks above the	damaged, cracked, unsecured, or
Tank (check if present)	designed operating depth	designed operating depth	appears to be structurally unsound
Septic/holding Tank #1	☐ Yes ☐ No	☐ Yes ☐ No	Yes No
Septic/holding Tank #2	☐ Yes ☐ No☐ Yes ☐ Yes ☐ No☐ Yes ☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ Yes	☐ Yes ☐ No☐ Yes ☐ No	☐ Yes ☐ No
Pretreatment Tank	☐ Yes ☐ No	☐ Yes ☐ No	Yes No
Pump Tank	Lites Livo	LI 169 LI NO	
Describe detail for any "Yes"			
	<u> </u>		The second different devices and the second different devices and the second devices and th
How many gallons of septage Tank #1: \250 Tank	-	Pretreatment Tank:	Pump Tank:
Where was the septage take			24
Explanation (Facility name/Sit			
Did you identify any onerati	onal issues or uncafe con	ditions while assessing the	e sewage tanks in this system?
	itify tank and explain:	amona mino aaaaaanig tir	a aunuga mimo ni mio ogawini.
*****	stic waste Baffle(s) cond	tition	ndition
			integrity of tank or lid, electrical hazard, etc.)
	evensions condition. [] Of	ina zamanans (e.g. siinziildi	magary or torre of the theoretical nazaris, etc.)
Explanation:	A ALICENSE CONTRACTOR STATES		
. List any troubleshooting an			
☐ Troubleshooting and repai	rs conducted:	☐ Repairs declined by ow	ner:
None		,	
		A	
union. No describação de Proposição, se de proprio de como de consensador de como en acuado en entre de consensador de consens	184 A. AN MANAGON MANAGON PARA A A A A A A A A A A A A A A A A A	grane of the state	
Additional comments or sugg	estions for owner's consider	ation:	
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personally conducted the work d		a Minnesota-licensed SSTS	Maintenance Business, in compliance
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