

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 https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf.

Parcol ID# or Sac/Tup/Dance: 07.007.00.00.00.00	Local tracking number:
Parcel ID# or Sec/Twp/Range: <u>27.027.20.</u> 33.0015	Reason for Inspection property sale
ocal regulatory authority info: Washington County	
Property address: 10909 Paris Ave S Denmark Twp, MN 55	5033
Owner/representative: George Miller	Owner's phone: 651-208-3739
Brief system description: 2 septic tanks and a gravity rock tre	
System status	
System status on date (mm/dd/yyyy): 9/21/2022	
☐ Compliant – Certificate of compliance*	☐ Noncompliant – Notice of noncompliance
Valid for 3 years from report date unless evidence of an number threat to public health or safety requiring removal and batement under section 145A.04, subdivision 8 is discovered or	Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.
shorter time frame exists in Local Ordinance.)	An imminent threat to public health and safety (ITPHS) must be
Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not juarantee future performance.	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 applic	able)
☐ Impact on public health (Compliance component #	#1) – Imminent threat to public health and safety
☐ Tank integrity (Compliance component #2) – Failii	ing to protect groundwater
☐ Other Compliance Conditions (Compliance compo	onent #3) – Imminent threat to public health and safety
☐ Other Compliance Conditions (Compliance compo	onent #3) – Failing to protect groundwater
	30.2500 (Compliance component #3) – Failing to protect groundwater
	30.2500 (Compliance component #3) – Failing to protect groundwater illing to protect groundwater
Soil separation (Compliance component #5) – Fai	
Soil separation (Compliance component #5) – Fai	iling to protect groundwater
☐ Soil separation (Compliance component #5) – Fai☐ Operating permit/monitoring plan requirements (C	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
 ☐ Soil separation (Compliance component #5) – Fai ☐ Operating permit/monitoring plan requirements (Comments or recommendations 	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
 ☐ Soil separation (Compliance component #5) – Fai ☐ Operating permit/monitoring plan requirements (Comments or recommendations 	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
 ☐ Soil separation (Compliance component #5) – Fai ☐ Operating permit/monitoring plan requirements (Comments or recommendations 	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
 ☐ Soil separation (Compliance component #5) – Fai ☐ Operating permit/monitoring plan requirements (Comments or recommendations 	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
☐ Soil separation (Compliance component #5) – Fai ☐ Operating permit/monitoring plan requirements (C Comments or recommendations Reviewed design, permit, soil, inspection and pumping	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
 ☐ Soil separation (Compliance component #5) – Fai ☐ Operating permit/monitoring plan requirements (Comments or recommendations 	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (C Comments or recommendations Reviewed design, permit, soil, inspection and pumping Certification thereby certify that all the necessary information has been gathered uture system performance has been nor can be made due to unknown.	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (C Comments or recommendations Reviewed design, permit, soil, inspection and pumping fertification thereby certify that all the necessary information has been gathered ture system performance has been nor can be made due to unknown adequate maintenance, or future water usage. By typing my name below. I certify the above statements to be treed to the property of the statements.	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County. ed to determine the compliance status of this system. No determination of nown conditions during system construction, possible abuse of the system,
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (Comments or recommendations Reviewed design, permit, soil, inspection and pumping ertification thereby certify that all the necessary information has been gathered ture system performance has been nor can be made due to unknown adequate maintenance, or future water usage. by typing my name below. I certify the above statements to be treated for the purpose of processing this form.	iling to protect groundwater Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County.
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (Comments or recommendations Reviewed design, permit, soil, inspection and pumping thereby certify that all the necessary information has been gathered attree system performance has been nor can be made due to unknown adequate maintenance, or future water usage. The system performance below. I certify the above statements to be treed for the purpose of processing this form. Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (Comments of Comments of Processing the Processing	Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County. The definition of the determine the compliance status of this system. No determination of the nown conditions during system construction, possible abuse of the system, rue and correct, to the best of my knowledge, and that this information can be
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (Comments or recommendations Reviewed design, permit, soil, inspection and pumping ertification hereby certify that all the necessary information has been gathered ture system performance has been nor can be made due to unknown adequate maintenance, or future water usage. y typing my name below. I certify the above statements to be treated for the purpose of processing this form. usiness name: All State Septic Services LLC	Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County. ed to determine the compliance status of this system. No determination of nown conditions during system construction, possible abuse of the system, rue and correct, to the best of my knowledge, and that this information can be Certification number: 323 License number: 1568
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (Comments or recommendations Reviewed design, permit, soil, inspection and pumping thereby certify that all the necessary information has been gathered turne system performance has been nor can be made due to unknown adequate maintenance, or future water usage. By typing my name below, I certify the above statements to be trusted for the purpose of processing this form. See the purpose of processing this form.	Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County. ed to determine the compliance status of this system. No determination of nown conditions during system construction, possible abuse of the system, rue and correct, to the best of my knowledge, and that this information can be Certification number: 323 License number: 1568 Signed)
Soil separation (Compliance component #5) – Fail Operating permit/monitoring plan requirements (C Comments or recommendations Reviewed design, permit, soil, inspection and pumping hereby certify that all the necessary information has been gathered uture system performance has been nor can be made due to unknowned under the performance, or future water usage. By typing my name below. I certify the above statements to be transfer for the purpose of processing this form. Business name: All State Septic Services LLC inspector signature: Tom Trooien (This document has been electronically states.) Ilecessary or locally required supporting desired.	Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County. ed to determine the compliance status of this system. No determination of nown conditions during system construction, possible abuse of the system, rue and correct, to the best of my knowledge, and that this information can be Certification number: 323 License number: 1568 signed) Phone: 612-594-4496
□ Soil separation (Compliance component #5) – Fail □ Operating permit/monitoring plan requirements (Comments or recommendations Reviewed design, permit, soil, inspection and pumping Certification thereby certify that all the necessary information has been gathered uture system performance has been nor can be made due to unknown adequate maintenance, or future water usage. By typing my name below, I certify the above statements to be trusted for the purpose of processing this form. Susiness name: All State Septic Services LLC Inspector signature: Tom Troolen (This document has been electronically solutions) Necessary or locally required supporting decessory. Soil observation logs System/As-Built □ Locally.	Compliance component #4) – Noncompliant - local ordinance applies records on file at Washington County. ed to determine the compliance status of this system. No determination of nown conditions during system construction, possible abuse of the system, rue and correct, to the best of my knowledge, and that this information can be Certification number: 323 License number: 1568 Signed)

Compliance criteria:		Attached supporting documental	tion:
System discharges sewage to the ground surface	☐ Yes No	☐ Other: ☐ Not applicable	
System discharges sewage to drain tile or surface waters.	☐ Yes No		
System causes sewage backup into dwelling or establishment.	☐ Yes No		
Any "yes" answer above indicares imminent threat to public health as			
Describe verification methods and	results:		
ank integrity – Compliance Compliance criteria:	component #2		ion:
Compliance criteria:		Attached supporting documental	ion:
			i ion: 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 documental ☑ Empty tank(s) viewed by inspector	Pinky's S Service
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	☐ Yes¹ 🛛 No	Attached supporting documentat ☑ Empty tank(s) viewed by inspector Name of maintenance business:	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	☐ Yes¹ 🛛 No	Attached supporting documental	Pinky's S Service siness: 9755 9/21/2022
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit? Sewage tank(s) leak below their	☐ Yes¹ 🛛 No	Attached supporting documental	Pinky's S Service siness: 9755 9/21/2022
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit? Sewage tank(s) leak below their designed operating depth?	☐ Yes' ☒ No ☐ Yes' ☒ No ☐ Yes' ☒ No	Attached supporting documental	Pinky's S Service siness: 9755 9/21/2022 Attach)
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 ☐ Yes' ☒ No ☐ Yes' ☒ No	Attached supporting documental	Pinky's S Service siness: 9755 9/21/2022 Attach) within three years
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 ☐ Yes' ☒ No ☐ Yes' ☒ No ☐ dias the System	Attached supporting documental Image: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance: Image: Existing tank integrity assessment (A pate of maintenance (mm/dd/yyyy): (See form instructions to ensure assing Minn. R. 7082.0700 subp. 4 B (1)) Image: Tank is Noncompliant (pumping not not pate of maintenance (pumping not not pate of maintenance) Tank is Noncompliant (pumping not not pate of maintenance)	Pinky's S Service siness: 9755 9/21/2022 Attach) within three years
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 indic is failing to protect groundwaf. Describe verification methods and The maintenance hole covers are but	☐ Yes ☑ No ☐ Yes ☑ No ☐ Yes ☑ No ☐ dresults: Uried 1.5' below grade	Attached supporting documental Image: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance: Image: Existing tank integrity assessment (A pate of maintenance (mm/dd/yyyy): (See form instructions to ensure assing Minn. R. 7082.0700 subp. 4 B (1)) Image: Tank is Noncompliant (pumping not not pate of maintenance (pumping not not pate of maintenance) Tank is Noncompliant (pumping not not pate of maintenance)	Pinky's S Service siness: 9755 9/21/2022 Attach) within three years ressment complied ecessary – 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 indic is failing to protect groundwat. Describe verification methods and The maintenance hole covers are be statement by the owner refusing to a The tanks were at normal operating.	Yes No Yes No Yes No Atos the systemer. dresults: uried 1.5' below grade allow the removal of solevel, then were pump	Attached supporting documental Image: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance: Image: Existing tank integrity assessment (and business) Date of maintenance (must be with the form instructions to ensure assing Minn. R. 7082.0700 subp. 4 B (1)) Image: Tank is Noncompliant (pumping not not not other: Other:	Pinky's S Service siness: 9755 9/21/2022 Attach) within three years ressment complie ecessary – explain s. See attached sile.

•	ess Name: _ All State Septic Services LLC	Date: 9/21/2022
		Date. 3/21/2022
Ot	ther compliance conditions – Compliance component #3 of 5	
	. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unse	cured?
	☐ Yes ☐ Unknown	curcu:
3b	. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety	y? ☐ Yes ⊠ No ☐ Unknowr
	"Yes to 3a or 3b - System is an imminent threat to public header and safety.	
30	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 1c or 3d - System is failing to protect groundwater	
	Describe verification methods and results:	
	Attached supporting documentation: Not applicable	
. O	perating permit and nitrogen BMP* - Compliance component #4 o	f 5 🛛 Not applicable
ls t	he system operated under an Operating Permit?	f "yes", A below is required
ls t	he system operated under an Operating Permit? He system required to employ a Nitrogen BMP specified in the system design? Yes No I	f "yes", A below is required
ls t	he system operated under an Operating Permit? Yes No No	if "yes", A below is required
ls t	he system operated under an Operating Permit? He system required to employ a Nitrogen BMP specified in the system design? Yes No I	f "yes", A below is required
ls t	he system operated under an Operating Permit? Yes No No	f "yes", A below is required
Is to	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed.	if "yes", A below is required
Is t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed ampliance criteria:	if "yes", A below is required
ls t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? \[\text{Yes} \] No \[\text{No} \] No \[\text{BMP} = Best Management Practice(s) specified in the system design} \] the answer to both questions is "no", this section does not need to be completed ampliance criteria: a. Have the operating permit requirements been met? \[\text{Yes} \] No	if "yes", A below is required
ls t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
Is t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed ampliance criteria: a. Have the operating permit requirements been met? Yes No b. Is the required nitrogen BMP in place and properly functioning? Yes No	if "yes", A below is required
Is t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	f "yes", A below is require
ls t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
Is t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t <i>If t</i>	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t <i>If t</i>	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t <i>If t</i>	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t <i>If t</i>	he system operated under an Operating Permit? he system required to employ a Nitrogen BMP specified in the system design? Yes No I BMP = Best Management Practice(s) specified in the system design he answer to both questions is "no", this section does not need to be completed empliance 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.	if "yes", A below is required
ls t ls t <i>If t</i>	the system operated under an Operating Permit? Yes No No No No No No No N	f "yes", A below is required

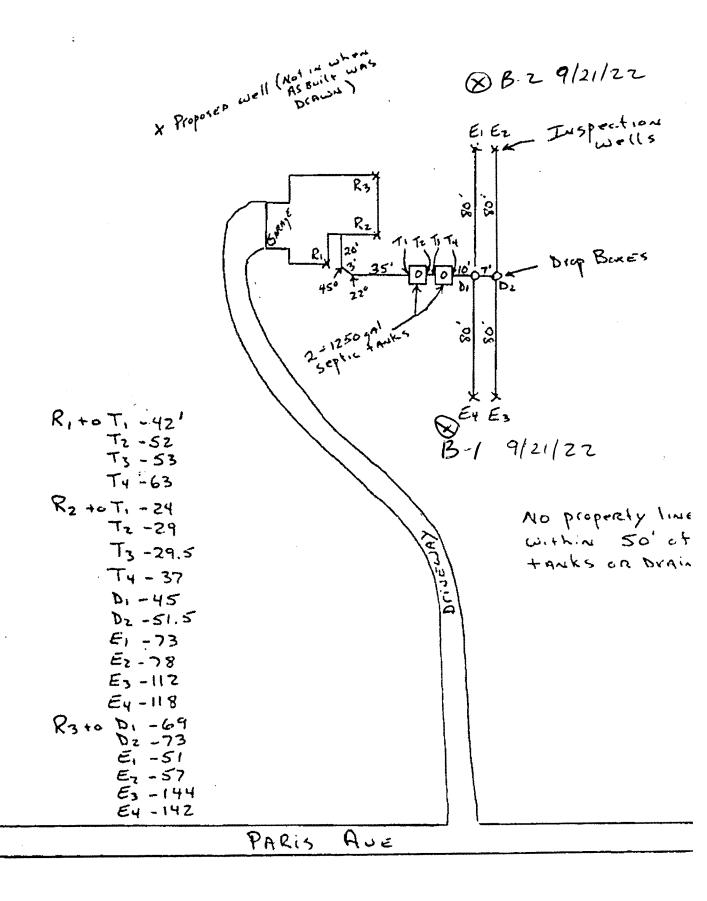
Soil separation – Compliance con	nponent #5 c	of 5
Date of installation 12/10/1993 (mm/dd/yyyy)	Unknown	
Shoreland/Wellhead protection/Food beverage lodging? Compliance criteria (select one):	☐ Yes ☐ No	Attached supporting documentation: ☑ Soil observation logs completed for the report ☐ Two previous verifications of required vertical separati
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)
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.		
b. 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: Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*	Yes No	Indicate depths or elevations A. Bottom of distribution media B. Periodically saturated soil/bedrock C. System separation D. Required compliance separation* *May be reduced up to 15 percent if allowed by Local Ordinance.
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) Drainfield meets the designed vertical	☐ Yes ☐ No	
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.

< N-



			Speed Service
	w/	2	

Soil Observation Log

v 04.01.2021

Project ID:

Client:			George Miller		Locat	Location / Address:	10909 Par	ris Ave S Denmar	10909 Paris Ave S Denmark Twp, MN 55033
Soil parent ma	Soil parent material(s): (Check all that apply)	k all that	apply)	Outwash Dacustrine	Loess Till	Alluvium	n Bedrock		Organic Matter
Landscape Pos	Landscape Position: (select one)	le)		Slope %:	Slope shape			Elevatio	Elevation-relative to benchmark:
Vegetation:		lawn		Soil survey map units:				Limiting Layer Elevation:	Elevation:
Weather Cond	Weather Conditions/Time of Day:	ay:	7)	clear am			Date		09/21/22
Observatio	Observation #/Location:	B	B-1			Obse	Observation Type:		Auger
Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	() Mottle Color(s)	Redox Kind(s)	Indicator(s)	I Shape	Structure- Grade	l Consistence
0-16	loam	<35%	10YR 2/2				e - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -		
)			04,140,404				0.000.000		
Ç	800	/ 3F%	10YR 4/3				intes Edding		······································
74-01	[0 	٥ /٢ ٥							
		,03C	10YR 5/4				206, 600, 0		
47-59	Logi	%C\$>					CC. (\$3)6. V.	2.02.00	
	-	, ,	7.5YR 4/4	10YR 6/8	Concentrations	51	mer 200 5		FVY VV VVVVVVVV
29-69	sandy loam	< 35%		10YR 5/2	Depletions	51	** *** das		
							man has rero		***************************************

							85 *** 566		~************
							, 200 A33		
						**************************************	** *** ***		••••
						, A. X. Z.	/		er e
Comments	Comments Faint redox at 59"	29"							
I hereby cert	ify that I have o	ompleted	this work in acco	hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws	ole ordinances, rule	s and laws.			
	Tom Trooien			Tom Trooien	u	•	1568		9/21/22
(De	(Designer/Inspector)			(Signature)			(License #)		(Date)

, sic		//
		Ś
		36

Soil Observation Log

v 04.01.2021

Project ID:

Client:			George Miller			Locat	Location / Address:	10909 Par	10909 Paris Ave S Denmark Twp, MN 55033	rk Twp, MN	55033
soil parent ma	soil parent material(s): (Check all that apply)	sk all that	apply)		Outwash 🔲 Lacustrine	Lœss	I Alluvium	um Bedrock	LJ	Organic Matter	
andscape Pos	andscape Position: (select one)	ne)		1S	Slope %:	Slope shape			Elevatí	Elevatíon-relative to benchmark:	÷
Vegetation:		lawn		Soil s	Soil survey map units:				Limiting Layer Elevation:	r Elevation:	
Weather Cond	Weather Conditions/Time of Day:	Day:		clear am	u			Date		09/21/22	
Observatio	Observation #/Location:	8	B-2				Obs	Observation Type:		Auger	
Depth (in)	Texture	Rock Frag. %	Matrix Color(s)		Mottle Color(s)	Redox Kind(s)	Indicator(s)	I Shape	Structurel Grade Con	el Cons	I Consistence
0-12	loam	<35%	10YR 2/2							*****************	
12-32	loam	<35%	10YR 4/3	***************			A SAME CONTRACTOR	***************************************		************	
32-50	loam	<35%	10YR 3/4					, .,,			
20-60	silt loam	<35%	7.5YR 6/4							*************************	
							**************************************	AAA AAA		×	
		yo aasaa aasaa aa aa aa						***************************************			
Comments											
l hereby certi	fy that I have c	completed	this work in acc	cordanc	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		•	1568		2/6	9/21/22
(Des	(Designer/Inspector)	()			(Signature)			(License #)		3	(Date)



Sewage tank maintenance reporting form

Date	of maintenance (mm/dd/yyyy):	9/21122 Rea	son for maintenance: \sqrt{Q}	CUTIVE
	erty address: 1000			Parcel ID:
City:		**************************************	State: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Zip code: 554533
Prop	erty owner's name: 1600	Dick Miller	11 1 4 1 2 1 1 5 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
o rop	erty-owner's address if different	· J		
City:			State:	Zip code.
Phor	ne number	Ema	ni address:	•
1,	Did you measure the accumu	lation of scum and sludge	7 [] Yes [7] No (tankis) n	umped without measuring)
	Tank (check if present)	-	idge Operatin	
	☐ Septic/holding tank #1			
	☐ Septic/holding tank #2			
	☐ Pretreatment tank			
	☐ Pump tank			
2.	Access used to remove septa	age: Maintenance hole	☑ Other (Unless a holding I	tank, gč to #4 below)
3.	If the maintenance hole was i	used, were all covers secu	red in place? Yes	☐ No. If no. please explain below:
4.	If the owner refuses to allow hoje, have them complete an	a Subsurface Sewage Trea	atment System (SSTS) to be	pumped through the maintenance
				d liquids through the maintenance
		of solids and liquids through	n other access points is not c ements of Minn. R. 7080,245	onsidered a compliant method of 0 and 7082,0500.
	By typing/signing my name to that this information can be use	pelow. I certify the above staged for the purpose of process	sing this form	ct, to the best of my knowledge, and
	Owner's signature:		Date (mm/dd/yyy	9) 9/27/2020
5.	Is the tank designed as a leal	ky tank? (Example: seepag		7
	Tank #1: ☐ Yes Ø No.	Verification method used:	VISMAL	
	Tank #2: ☐ Yes ☐ No	Verification method used:	VSMal	
6.	Is there evidence of the follow	wing?		
		Tank leaks below the designed operating depth	Tank leaks above the designed operating depth	Maintenance hole cover is damaged, cracked, unsecured, or appears to be structurally unsound
	Tank (check if present)		CT Van CTVA:	☐ Yes ☐ No.
	図 Septic/holding Tank #1	☐ Yes ☐ No	☐ Yes ☐ No	the state of the s
	Septic/holding Tank #1 Septic/holding Tank #2	☐ Yes ☐ No	☐ Yes ☐No	☐ Yes ☐ No
	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No
	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank	☐ Yes ☐ No	☐ Yes ☐No	☐ Yes ☐ No
	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No
7.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☑ No	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☑ No
7.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes"	Yes No Yes No Yes No Yes No	☐ Yes ☐ No ☐ Yes ☐ No	☐ Yes ☐ No ☐ Yes ☐ No
7.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1	Yes No Yes No Yes No Yes No	☐ Yes ☐ No☐ Yes ☐ Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☑ Ño Pump Tank (\\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(
_	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes"	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ were removed? ik #2: ↓ ↓ ↓ ↓ ↓ ← P	☐ Yes ☐ No☐ Yes ☐ Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No Pump Tank (\\\(\)(\\\(\)(\)(\\(\)(\)(\)(\)(\)(\)(\
_	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage taken Explanation (Facility name/Site	Yes No Yes No Yes No Yes No We were removed?	☐ Yes ☐ No☐ Yes ☐	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No Pump Tank (\(\)(\(\)(\)(\)(\)(\)(\)(\)(\)(\)(\)(\)
8.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation	Yes No Yes No Yes No Yes No We were removed?	☐ Yes ☐ No☐ Yes ☐	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☑ No ☐ Yes ☑ No Pump Tank (\\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(\(
8.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Yes No If yes, ident	Yes No Yes No Yes No Yes No We were removed? No Per Wastewater treatment He will No	☐ Yes ☐ No☐ Yes ☐	☐ Yes ☐ No ☐ Other ☐ Other ☐ Other ☐ Sewage tanks in this system?
8.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Septiment of No If yes, ident Evidence of non-domes	Yes No Yes No Yes No Yes No Wastewater treatment ###################################	Yes No Yes No Yes No Yes No Yes No Yes No I facility □ Land application Yes No Itions while assessing the	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Other ☐ Other ☐ Other ☐ Sewage tanks in this system?
8.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Septiment of No If yes, ident Evidence of non-domes	Yes No Yes No Yes No Yes No Wastewater treatment ###################################	Yes No Yes No Yes No Yes No Yes No Yes No I facility □ Land application Yes No Itions while assessing the	☐ Yes ☐ No ☐ Other ☐ Other ☐ Other ☐ Sewage tanks in this system?
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septage Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Yes No If yes, ident Evidence of non-domes Maintenance hole and e	☐ Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ Yes ☐ Y	Yes No Yes No Yes No Yes No Yes No Italian Series No Italian Series N	Pump Tank (V) () () () () () () () () () () () () ()
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septage Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Septiment of non-domes Maintenance hole and explanation:	☐ Yes ☐ No ☐ Yes ☐ Y	Yes No Yes No Yes No Yes No Yes No Yes No It facility Land application It facility Standard applica	Pump Tank (V) () () () () () () () () () () () () ()
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septage Tank #1 Tank Where was the septage taked Explanation (Facility name/Site Did you identify any operation Press No If yes, ident Evidence of non-domes Maintenance hole and explanation: List any troubleshooting and repair Nov Pressor P	☐ Yes ☐ No ☐ Yes ☐ Y	Yes No Yes No Yes No Yes No Yes No Yes No It facility Land application It facility Standard applica	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septage Tank #1 Tank Where was the septage taked Explanation (Facility name/Site Did you identify any operation Press No If yes, ident Evidence of non-domes Maintenance hole and explanation: List any troubleshooting and repair Nov Pressor P	☐ Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ Y	Yes No Yes No Yes No Yes No Yes No Yes No It facility Land application It facility Standard applica	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operatio Yes No If yes, ident Evidence of non-domes Maintenance hole and e Explanation: List any troubleshooting and	Yes No Yes Ye	Yes No Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septage Tank #1 Tank Where was the septage taked Explanation (Facility name/Site Did you identify any operation Press No If yes, ident Evidence of non-domes Maintenance hole and explanation: List any troubleshooting and repair Nov Pressor P	Yes No Yes Ye	Yes No Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Yes No If yes, ident Evidence of non-domes Maintenance hole and e Explanation: List any troubleshooting and Troubleshooting and repair Additional comments or sugges	Yes No Yes Ye	Yes No Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operatio Yes No If yes, ident Evidence of non-domes Maintenance hole and e Explanation: List any troubleshooting and	Yes No Yes Ye	Yes No Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage taker Explanation (Facility name/Site Did you identify any operation Series No If yes, ident Evidence of non-domes Maintenance hole and explanation: List any troubleshooting and repair Additional comments or sugges	Yes No Yes Ye	Yes No Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)
8. 9. 10.	Septic/holding Tank #1 Septic/holding Tank #2 Pretreatment Tank Pump Tank Describe detail for any "Yes" How many gallons of septag Tank #1 Tan Where was the septage take Explanation (Facility name/Site Did you identify any operation Yes No If yes, ident Evidence of non-domes Maintenance hole and e Explanation: List any troubleshooting and Troubleshooting and repair Additional comments or sugges	Yes No Yes Ye	Yes No Y	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Other ☐ Other Sewage tanks in this system? dition tegrity of lank or lid. electrical hazard.etc.)

651-439-4867 4-77 MN License 1673 WI License 2118

Employee's signature: Editic Chrun