

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

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS)

Doc Type: Compliance and Enforcement

Control Agency (MPCA) website at https://www.pca.state.mn.us		
Property information	Local tracking	
Parcel ID# or Sec/Twp/Range: 26.031.20.24.0027	Reason for Inspection	property sale
Local regulatory authority info: Washington County		
Property address: 28 Moonlight Bay May Twp, MN 55082		
Owner/representative: <u>Jen Morgan, owner's niece</u> Brief system description: 1988 "201" system with a precast sep		Owner's phone: 515-210-2434
	<i>,</i>	
System status System status on date (mm/dd/yyyy): 05/02/2023		
	□ Noncompliant Nati	as of nancompliance
☑ Compliant – Certificate of compliance*	Noncompliant – Noti	·
(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		ound water must be upgraded. replaced. or time required by local ordinance.
*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.	upgraded, replaced, or its us	health and safety (ITPHS) must be se discontinued within ten months of receipt rter period if required by local ordinance or livision 8.
☐ Other Compliance Conditions (Compliance compon☐ System not abandoned according to Minn. R. 7080.☐ Soil separation (Compliance component #5) — Failin☐ Operating permit/monitoring plan requirements (Concomments or recommendations Reviewed design, permit, soil, pumping and inspection recommendations.	2500 (Compliance componeing to protect groundwaterimpliance component #4) – N	ent #3) – Failing to protect groundwater Noncompliant - local ordinance applies
Certification I hereby certify that all the necessary information has been gathered	I to determine the compliance s	etatus of this system. No determination of
future system performance has been nor can be made due to unkno inadequate maintenance, or future water usage.	own conditions during system c	onstruction, possible abuse of the system.
By typing my name below. I certify the above statements to be tru- used for the purpose of processing this form.	e and correct, to the best of my	knowledge, and that this information can be
Business name: All State Septic Services LLC		Certification number: 323
Inspector signature: Tom Trooien		License number: 1568
(This document has been electronically sign		Phone: 612-594-4496
Necessary or locally required supporting do	ocumentation (Ballet)	ie stuusi)
☐ Soil observation logs ☐ System/As-Built ☐ Locally ☐ Other information (list):	required forms	egrity Assessment
https://www.pca.state.mn.us • 651-296-6300 • 800-657-38	.64 • Use your preferred rel	ay service • Available in alternative formal Page 1 of

System discharges sewage to ground surface System discharges sewage to tile or surface waters. System causes sewage backup dwelling or establishment. Any "yes" imswer above indimunional tireat to public hos. Describe verification method. None of the above observed.	drain Yes No into Yes No icates the system is an atth and safety.	☐ Other: ☐ Not applicable	
System causes sewage backup dwelling or establishment. Any Types Tanswer above indimminent threat to public her Describe verification method	o into Yes No		
dwelling or establishment. Any 'yes' answer above indinminent threat to public her Describe verification method	icoles the system is an alth and safety.		
Immunent treeat to public ho. Describe verification method	aith and safety.		
	ls and results:		
None of the above observed.			
ank integrity – Compli	ance component #2	of 5	
	•		
Compliance criteria:		Attached supporting documentation	:
System consists of a seepage	pit. ☐ Yes 🖾 No		
cesspool, drywell, leaching pit or other pit?		Name of maintenance business:	Pinky's
Sewage tank(s) leak below the	eir □ Yes ☑ No	License number of maintenance busines	ss: 1613
designed operating depth?		Date of maintenance:	5/2/2023
		☐ Existing tank integrity assessment (Attac	ch)
		·	,
		Date of maintenance	n thron wooms
If yes, which sewage tank(s) le	eaks:	(mm/dd/yyyy): (must be within	n three years
Any "yes Inswer above is ruling to protect grown		(See form instructions to ensure assess Minn. R. 7082.0700 subp. 4 B (1))	ment complies v
		☐ Tank is Noncompliant (pumping not neces	sary – explain be
			•
		Other:	
Describe verification metho	de and reculte:		
Un-covered and removed the	maintenance hole cover for	pumping and inspecting. The tank was at norma	I operating leve
then was pumped and back-fl			
• •			affles riser an
Performed a visual inspection maintenance hole cover ok.	and lowered a light and can	nera into the empty tank - bottom, walls, cover, b	ames, user and
Mile net a compliance criteri	a, recommend extending the	e tank riser to grade for future maintenance acce	SS.
While not a compliance criteri			
vynile not a compliance chien			
while not a compliance chief			

Property Address: _28 Moonlight Bay May Twp, MN 55082 Business Name: All State Septic Services LLC	Date: 05/02/2023
7.11 Claid Copillo Col 11000 EEC	DOWN OWNERDED
3. Other compliance conditions – Compliance component #3	of 5
3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, ☐ Yes ☑ No ☐ Unknown	etc.), or unsecured?
3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public has so 3a or 3b - Systom is an imminent intent so public has into each sense.	•
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 in White in proud a groundwater.	
Describe verification methods and results:	
Attached supporting documentation: ⊠ Not applicable □	
4. Operating permit and nitrogen BMP* – Compliance compo	nent #4 of 5 🛛 Not applicable
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siness Name: All State	Septic Services LLC		Date: (05/02/2023
Soil separation –	- Compliance cor	mponent #5	of 5	
	9/28/1988 (mm/dd/yyyy)	_⊠ Unknown		
Shoreland/Wellhead p	rotection/Food	⊠ Yes □ No	Attached supporting documentation:	
beverage lodging?			Soil observation logs completed for the	ne report
Compliance criteria	(select one):		☐ Two previous verifications of required	vertical separatio
5a. For systems built pri not located in Shorel Protection Area or no beverage or lodging	land or Wellhead ot serving a food.	Yes No	☐ Not applicable (No soil treatment area	3)
Drainfield has at leas separation distance saturated soil or bed	from periodically			
5b. Non-performance sy		⊠ Yes □ No	Indicate depths or elevations	
April 1, 1996, or later performance system	r or for non- s located in Shoreland		A. Bottom of distribution media	3.8
or Wellhead Protecti	on Areas or serving a odging establishment:		B. Periodically saturated soil/bedrock	7.0
Drainfield has a three			C. System separation	3.2
separation distance	from periodically		D. Required compliance separation*	3.0
saturated soil or bed	rock.*		*May be reduced up to 15 percent if allo Ordinance.	owed by Local
2,500 gallons per da	ore-2008 Rules; s built under 2008 7080.2400 stor License required ≤ y: Advanced Inspector 1.500 gallons per day) designed vertical	Yes No		

Describe verification methods and results:

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.

28 MOONLIGHT BAY MAY TWP, MN 55082 5-2-23 & WELL HOUSE ← SEPTIC TANK DECK DRAINFIELD B2 (x)

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Soil Observation Log

v 03.15.2023

Project ID:

Client:			Jen Morgan	gan			Loca	Location / Address:	28	28 Moonlight Bay May Twp, MN 55082	Twp, MN 55082
Soil parent ma	Soil parent material(s): (Check all that apply)	k all that	apply)	Outwash	<u></u>	Lacustrine	Loess Till Malluvium		Bedrock Organ	Organic Matter Disturbed/Fill	ed/Fill
Landscape Position:	sition:				Slope %:		Slope shape:			Flooding/Run-On potential:	n potential:
Vegetation:				Soil su	Soil survey map u	units:			Surface El	Surface Elevation-Relative to benchmark:	enchmark:
Date/Time of	Date/Time of Day/Weather Conditions:	onditions:		5/2/23	5/2/23 am clear					Limiting Layer Elevation:	. Elevation:
Observatio	Observation #/Location:	B	B-1					Observation Type:	on Type:		Auger
		Rock			7 - 144-44	1 2 1 2 1 2	Doday (God(a)	() + ; []		Structure	
Depth (in)	l exture	Frag. %	Matrix	Matrix Color(s)	Mottle L	COIOr(S)	Redox Kind(s)	Indicator(s)	Shape	Grade	Consistence
(30,	10YR 3/2	3/2							
0[-0	toaimy sand	, 33									
	-		10YR	4/4							
10-58	sand	<.33									
0		30	10YR	5/4							
28-84	sand	655									
											The state of the s
Comments:											
I hereby cert	fy that I have c	completed	this work	in accorda	nce with a	l applicat	I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.	es and laws.			

Optional Verification: I hereby certify that this soil observation was verified according to Minn. R. 7082.0500 subp. 3 A. The signature below represents an infield verification of the

(Signature)

Tom Troolen

periodically saturated soil or bedrock at the proposed soil treatment and dispersal site.

Tom Trooien (Designer/Inspector)

5/2/23

(Date)

(Licerse #)

1568

(Date)

(Cert #)

(Signature)

(LGU/Designer/Inspector)

	1	
127	200	

Soil Observation Log

v 03.15.2023	
Project ID:	

Client:			Jen Morgan	; an			Loca	Location / Address:	28	28 Moonlight Bay May Twp, MN 55082	wp, MN 55082	
Soil parent ma	Soil parent material(s): (Check all that apply)	k all that	apply)	Out	Outwash	Lacustrine	Loess Till	Alluvium Be	Bedrock Organ	Organic Matter Disturbed/Fill	d/Fill	
Landscape Position:	ition:	The state of the s			Slope %:		Slope shape:			Flooding/Run-On potential:	n potential:	
Vegetation:				Soil su	Soil survey map unit	o units:			Surface El	Surface Elevation-Relative to benchmark:	enchmark:	
Date/Time of	Date/Time of Day/Weather Conditions:	onditions:		5/2/23 am clear	am clear					Limiting Layer Elevation:	Elevation:	
Observatio	Observation #/Location:	В	B-2					Observat	Observation Type:		Auger	
Depth (in)	Texture	Rock Frag. %	Matrix (Matrix Color(s)	Mottle	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Shape	Structure Grade	l Consistence	
0-12	loamy sand	<35	10YR 3/2	3/2								
												T
10-68	sand	<35	7.5YR 4/3	4/3								
68-84	sand	<35	7.5YR	4/4								
Comments:												
I hereby certi	hereby certify that I have completed this work in accordance with all a	ompleted	this work i	in accorda	ince with	all applica	pplicable ordinances, rules and laws	les and laws.				
	Tom Trooien		•	Tom Troolen	oien				1568		5/2/23	
(Des Optional Verif periodically sa	(Signature) Optional Verification: I hereby certify that this soil observation was verified according periodically saturated soil or bedrock at the proposed soil treatment and dispersal site.	r) vy certify th vedrock at t	at this soil he propose	observatio d soil treat	in was veri iment and	(Signature) ified accordi dispersal si	(Signature) Optional Verification: I hereby certify that this soil observation was verified according to Minn. R. 7082.0500 subp. 3 A. periodically saturated soil or bedrock at the proposed soil treatment and dispersal site.	.0500 subp. 3 A.	(License #) The signature be	(License #) The signature below represents an infield verification of the	(Date) eld verification of the	
1/CBN)	(LGU/Designer/Inspect		,			(Signature)		•	(Cert #)	•	(Date)	Τ