

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 (LGL) 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>.

Property information	Local tracking number:
Parcel ID# or Sec/Twp/Range: 35.030.21.21.0006	Reason for Inspection property sale
Local regulatory authority info: Washington County	<b>1 A - - - - - - - - - -</b>
Property address: 10204 67th Ln N Grant, MN 55082	
Owner/representative: Sharon Fitzenberger	Owner's phone: 651-278-2872
Brief system description: A septic tank and a rock trench drainf original drainfield failed.	field in two sections. Additional drainfield was added in 1989 after the
System status	
System status on date (mm/dd/yyyy): _6/8/2023	
☐ Compliant – Certificate of compliance*	Noncompliant − Notice of noncompliance
(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	Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.
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.	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 applical	ble)
☐ Impact on public health (Compliance component #1	) – Imminent threat to public health and safety
☐ Tank integrity (Compliance component #2) – Failing	
☐ Other Compliance Conditions (Compliance compon	nent #3) – Imminent threat to public health and safety
☐ Other Compliance Conditions (Compliance compon	
<u> </u>	.2500 (Compliance component #3) – Failing to protect groundwater
Soil separation (Compliance component #5) – Failir	
	mpliance component #4) – Noncompliant - local ordinance applies
	mphanice component #+1) = Noncomphant - Todar ordinance applies
Comments or recommendations	
Reviewed design, permit, soil, inspection and pumping re	ecords on file at vivashington County.
Contification	
Certification	
	I to determine the compliance status of this system. No determination of own conditions during system construction, possible abuse of the system.
By typing my name below. I certify the above statements to be true 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 sig	gned) Phone: 612-594-4496
Necessary or locally required supporting do	ocumentation (must be affached)
	required forms
,	owing this site is not in a wellhead protection area.
https://www.pca.state.mn.us • 651-296-6300 • 800-657-380 wg-wwists4-31b • 4/28/2021	<ul> <li>64 • Use your preferred relay service • Available in alternative formats         Page 1 of 4     </li> </ul>

System discharges sewage to the ground surface  System discharges sewage to drain tile or surface waters.  System causes sewage backup into dwelling or establishment.  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.	Compliance criteria:			Attached supporting documentation	on.
System discharges sewage to drain title or surface waters.  System causes sewage backup into dwelling or establishment.  Any yes" answer above indicates the system is an imminent threat to public health and sustain.  Describe verification methods and results:  None of the above observed.   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:  If yes is answer above indicates the system is an imminenance management of maintenance (mixed) yyy).  Describe verification methods and results:  Describe verification methods and results:  Describe verification methods and results:  There is no riser or maintenance hole on this very old and deep tank, so it was pumped and back-flushed through the inspection pipe. Performed a visual inspection & lowered a light & camera into the empty tank - no baffle on the inlet, he inspection pipe. Performed a visual inspection & lowered a light & camera into the empty tank - no baffle on the inlet, he	System discharges sewage to the	☐ Yes	⊠ No	Other:	
## Any 'yes' answer above indicates the system is an immunent integrity — Compliance component #2 of 5  ### Compliance criteria:  System consists of a seepage pit, crespool, drywell, leaching pit, or other pit?  Sewage tank(s) leak below their designed operating depth?  **Sewage tank(s) leak below their designed operating depth?  **Any 'yes' answer above indicates the system is an impection pipe, of each groundwater.  **Describe verification methods and results:*  **Describe verification methods and results:*  **Describe verification methods and results:*  **There is no riser or maintenance hole on this very old and deep tank, so it was pumped and back-flushed through the integrity assessing to the integrity tank. The integrity tank is no baffle on the integrity tank. The integrity tank is no baffle on the integrity tank.  **Describe verification methods and results:*  **There is no riser or maintenance hole on this very old and deep tank, so it was pumped and back-flushed through the inspection pipe. Performed a visual inspection & lowered a light & camera into the empty tank - no baffle on the integrity.		☐ Yes <sup>2</sup>	<b>⊠</b> No	<u> Постаррисавле</u>	
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	roperty Address: 10204 67 <sup>th</sup> Ln N Grant, MN 55082 usiness Name: All State Septic Services LLC	Date: 6/8/2023
3.	Other compliance conditions – Compliance component #3 of 5	
	<ul> <li>3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unset</li> <li>□ Yes ⋈ No □ Unknown</li> <li>3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety</li> </ul>	
	*Yes to 3a or 3h - System is an imminent threat to public health was safety.	
	3c. System is non-protective of ground water for other conditions as determined by inspector?	☐ Yes
	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	f 5 🛛 Not applicable
	Is the system required to employ a Nitrogen BMP specified in the system design?   No If 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 "na" answer indicates nancompliance	
	Describe verification methods and results:	
	Attached supporting documentation: ☐ Operating permit (Attach) ☐	
	s://www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • Use your preferred relay service • wwists4-31b • 4/28/2021	Available in alternative formats Page 3 of 4

usiness Name: All State Septic Services LLC			Date: 6	6/8/2023
Soil separation – Compliance cor	npone	nt #5 c	f 5	
Date of installation 1977 & 1989 (mm/dd/yyyy)	_ 🗌 Unkr	nown		
Shoreland/Wellhead protection/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 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 <sup>∞</sup>	☐ Not applicable (No soil treatment area ☐	a)
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.				
5b. Non-performance systems built	☐ Yes	☐ No <sup>®</sup>	Indicate depths or elevations	
April 1. 1996, or later or for non- performance systems located in Shoreland			A. Bottom of distribution media	34"
or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:			B. Periodically saturated soil/bedrock	30"
Drainfield has a three-foot vertical			C. System separation	0"
separation distance from periodically			D. Required compliance separation*	24"
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)  Drainfield meets the designed vertical	Yes	□ No <sup>*</sup>		
separation distance from periodically saturated soil or bedrock.		<del>-</del>		

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.



## Soil Observation Log

Pierdoaw							)	Project ID:			v 03.15.2023	
Client:		Sha	Sharon Fitzenberger	nberger			Loca	Location / Address:		10204 67th Ln N Grant, MN 55082	ant, MN 55082	
Soil parent ma	Soil parent material(s): (Check all that apply)	sk all that i	apply)	Out	Outwash 🔲 L	Lacustrine [	Loess Till	] Alluvium	Bedrock Organ	Organic Matter Disturbed/Fill	oed/Fill	
Landscape Position:	sition:				Slope %:		Slope shape:			Flooding/Run-On potential:	On potential:	
Vegetation:				Soil st	Soil survey map units:	units:			Surface El	Surface Elevation-Relative to benchmark:	benchmark:	
Date/Time of	Date/Time of Day/Weather Conditions:	onditions:		6/8/23	6/8/23 am clear					Limiting Layer Elevation:	r Elevation:	
Observatio	Observation #/Location:	B-1	-					Observat	Observation Type:		Auger	
14000	1	Rock	16.00 to 10.00 to 10.	Color(e)	100 01+101	(0)00(0)	Dodow Vind(r)	120 to 100 to 1		I Structure	7	
Deptin (iiii)	a Inixa I	Frag. %	ואומרו וא	MALITY COLOT(S)	אוסררוב	CO(O) (S)	vedox niid(s)	IIIUICALOI (S)	Shape	Grade	Consistence	
0.12	loam	<35	10YR	10YR 3/2								
7.0												
, c	4	30,	10YR	3/4								
06-21	SILL TORILL		:									
70.00	1	J.C.	10YR	10YR 4/4	10YR	8/9	Concentrations	52				
30-36	ctay toam	00,			10YR	5/1	Depletions	52				
Comments:	Redox at 30"											
I hereby certi	ify that I have co	ompleted	this work	in accorda	nce with a	all applical	I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.	es and laws.				
	Tom Trooien		-		To	Tom Trooien	U	,	1568		6/8/23	
(Des	(Designer/Inspector)	(.			)	(Signature)	0001	•	(License #)	-	(Date)	
Optional Veril	Optional Verification:  Increby certify that this soil orbedrock at the proposed soil treatment and dispersal site.	y cerriny tha edrock at th	it this soi e propose	l observatio ed soil treat	n was vent ment and c	red accordi dispersal si	according to Minn. K. 7082.0300 subp. 3 A. ersal site.		ine signature be	iow represents an in:	ine signature below represents an infleid verification of the	
1/091)	(LGU/Designer/Inspector)	tor)				(Signature)			(Cert #)		(Date)	
	***************************************	***************************************										1



