



# Compliance inspection report form

## Existing Subsurface Sewage Treatment System (SSTS)

Doc Type: Compliance and Enforcement

**Instructions:** Inspectors must complete this report form to report to Governmental Unit (GU) and State in a period of 15 days of final determination of compliance or non-compliance. 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>.

### Property information

Local tracking number: \_\_\_\_\_

Parcel ID# or Sec/Twp/Range: 27.029.20.22.0011 Reason for Inspection: property sale

Local regulatory authority info: Washington County

Property address: 1996 Paris Alcove West Lakeland Twp, MN 55082

Owner/representative: Jacqueline Hocovski Owner's phone: 612-290-3474

Brief system description: Two septic tanks and a pump tank lifting to a chamber drainfield.

### System status

System status on date (mm/dd/yyyy): 6/21/2023

**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 a shorter time frame exists in Local Ordinance.)*

*Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the 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.**

*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 applicable)

- Impact on public health (Compliance component #1) – *Imminent threat to public health and safety*
- Tank integrity (Compliance component #2) – *Failing to protect groundwater*
- Other Compliance Conditions (Compliance component #3) – *Imminent threat to public health and safety*
- Other Compliance Conditions (Compliance component #3) – *Failing to protect groundwater*
- System not abandoned according to Minn. R. 7080.2500 (Compliance component #3) – *Failing to protect groundwater*
- Soil separation (Compliance component #5) – *Failing to protect groundwater*
- Operating permit/monitoring plan requirements (Compliance component #4) – *Noncompliant - local ordinance applies*

#### Comments or recommendations

Reviewed design, permit, soil, inspection and pumping records on file at Washington County.

### Certification

*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.*

**By typing 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 purpose of processing this form.**

Business name: All State Septic Services LLC Certification number: 323

Inspector signature: Tom Trooien License number: 1568

*(This document has been electronically signed)* Phone: 612-594-4496

### Necessary or locally required supporting documentation

- Soil observation logs
- System/As-Built
- Locally required forms
- Tank Integrity Assessment
- Operating Permit
- Other information (list): \_\_\_\_\_

### 1. Impact on public health – Compliance component #1 of 5

**Compliance criteria:**

System discharges sewage to the ground surface	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

*Any "yes" answer above indicates the system is a potential threat to public health and safety.*

**Describe verification methods and results:**

None of the above observed.

**Attached supporting documentation:**

- Other: \_\_\_\_\_
- Not applicable

### 2. Tank integrity – Compliance component #2 of 5

**Compliance criteria:**

System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, which sewage tank(s) leaks:	

*Any "yes" answer above indicates the system is failing to protect groundwater.*

**Describe verification methods and results:**

The tanks were at normal operating level, then were pumped & back-flushed through the maintenance holes. Lowered a light & camera into the empty tanks - bottoms, walls, covers, baffles, risers & maintenance hole covers ok.

**Attached supporting documentation:**

- Empty tank(s) viewed by inspector
  - Name of maintenance business: Pinky's
  - License number of maintenance business: 1613
  - Date of maintenance: 6/21/2023
- Existing tank integrity assessment (Attach)
  - Date of maintenance (mm/dd/yyyy): \_\_\_\_\_ (must be within three years)
  - (See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))*
- Tank is Noncompliant (pumping not necessary – explain below)
- Other: \_\_\_\_\_

3. Other compliance conditions – Compliance component #3 of 5

3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?

Yes  No  Unknown

3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety?  Yes  No  Unknown

*\*Yes to 3a or 3b - System is an imminent threat to public health and safety*

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 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 5  Not applicable

Is the system operated under an Operating Permit?  Yes  No **If "yes", A below is required**

Is the system required to employ a Nitrogen BMP specified in the system design?  Yes  No **If "yes", B below is required**

*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 "no" answer indicates noncompliance.*

Describe verification methods and results:

Attached supporting documentation:  Operating permit (Attach)

### 5. Soil separation – Compliance component #5 of 5

Date of installation 5/15/2008  Unknown  
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging?  Yes  No

**Compliance criteria (select one):**

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  
 Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.

5b. 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:  Yes  No  
 Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.\*

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  
 Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

**Attached supporting documentation:**

- Soil observation logs completed for the report
- Two previous verifications of required vertical separation
- Not applicable (No soil treatment area)
- \_\_\_\_\_

**Indicate depths or elevations**

A. Bottom of distribution media	3.1
B. Periodically saturated soil/bedrock	6.5
C. System separation	3.4
D. Required compliance separation*	3.0

\*May be reduced up to 15 percent if allowed by Local Ordinance.

*Any "no" answer above indicates the system is failing to protect groundwater.*

**Describe verification methods and results:**

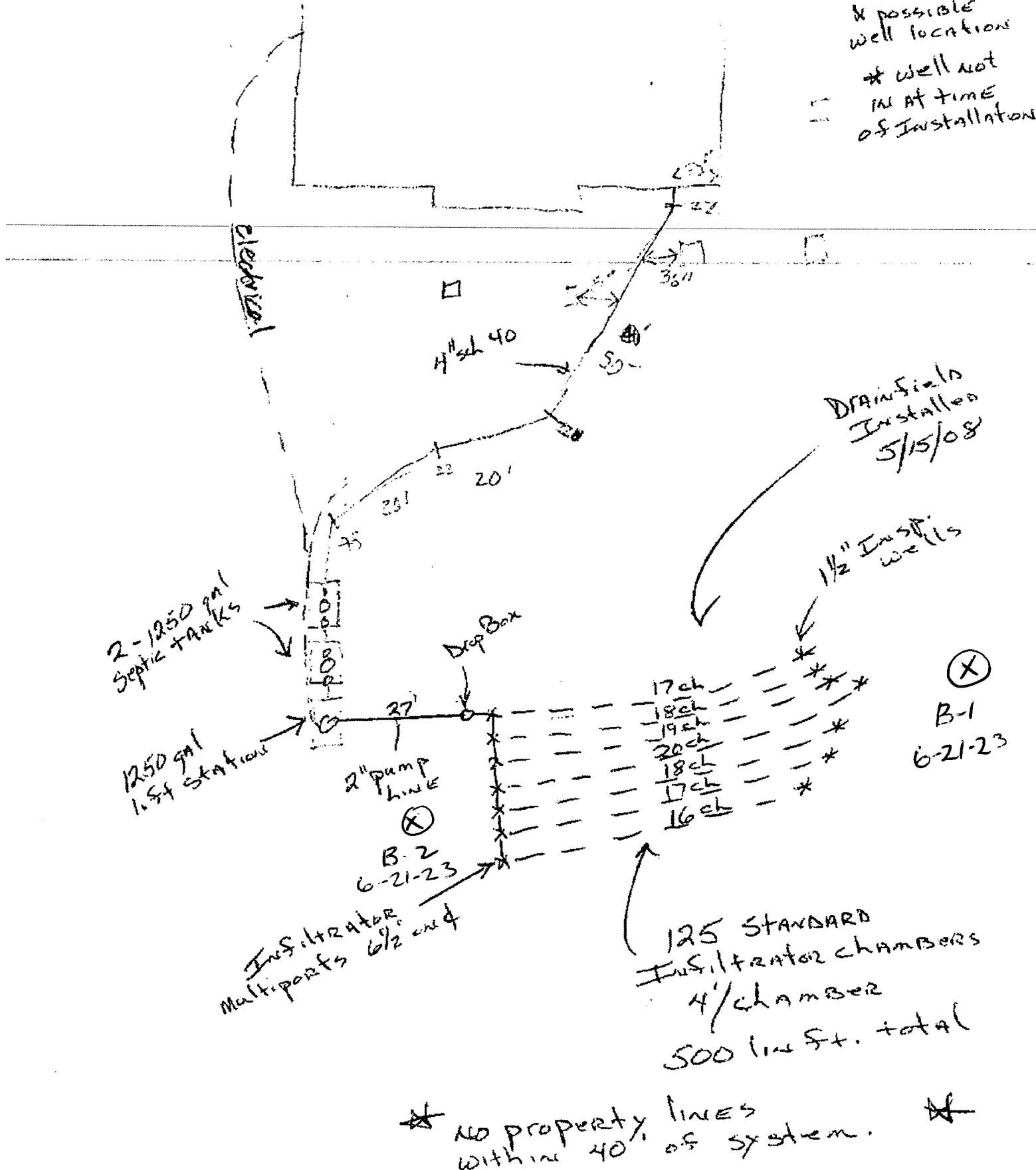
**Upgrade requirements:** (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground 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.

Main Street Builders + Tramm Bldgs.  
1996 Paris Alcove M

Tanks  
Installed  
9-23-05

\* possible  
well locations

\* well not  
in at time  
of installation



Drain Sials  
Installed  
5/15/08

1/2\"/>

(X)  
B-1  
6-21-23

Infiltrator  
Multiparts 6 1/2\"/>

125 STANDARD  
Infiltrator chambers  
4' chamber  
500 line ft. total

\* No property lines  
within 40' of system.



# Soil Observation Log

Project ID: \_\_\_\_\_

Location / Address: \_\_\_\_\_

Client: **Jacqueline Hcovovski**

1996 Paris Alcove West Lakeland Twp, MN 55082

v 03.15.2023

Soil parent material(s): (Check all that apply)  Outwash  Lacustrine  Loess  Till  Alluvium  Bedrock  Organic Matter  Disturbed/Fill

Landscape Position: \_\_\_\_\_ Slope shape: \_\_\_\_\_ Flooding/Run-On potential: \_\_\_\_\_

Vegetation: \_\_\_\_\_ Soil survey map units: \_\_\_\_\_ Surface Elevation-Relative to benchmark: \_\_\_\_\_

6/21/2023 Limiting Layer Elevation: \_\_\_\_\_

Observation #/Location:	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Structure	
							Shape	Grade
0-12	loam	5%	10YR 3/2					
12-32	silt loam	5%	10YR 4/3					
32-50	sandy loam	5%	10YR 4/4					
50-78	loamy sand	5%	10YR 4/4					

Comments: \_\_\_\_\_

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

Tom Trooien (Designer/Inspector) \_\_\_\_\_ Tom Trooien (License #) 1568 \_\_\_\_\_ 6/21/23 (Date)

Optional Verification: I hereby certify that this soil observation was verified according to Minn. R. 7082.0000 subp. 3 A. The signature below represents an infield verification of the periodically saturated soil or bedrock at the proposed soil treatment and dispersal site.

\_\_\_\_\_  
(LGU/Designer/Inspector) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Cert #) \_\_\_\_\_ (Date)



# Soil Observation Log

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Vegetation: \_\_\_\_\_ Soil survey map units: \_\_\_\_\_ Surface Elevation-Relative to benchmark: \_\_\_\_\_  
 Limiting Layer Elevation: \_\_\_\_\_

Observation #/Location:	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Structure	
							Shape	Grade
0-12	loam	5%	10YR 3/2					
12-22	silt loam	5%	10YR 3/4					
22-56	sandy loam	5%	7.5YR 4/4					
56-78	fine sand w/lamellae banding	5%	10YR 4/4					

Auger

Comments:

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

Tom Trooien (Designer/Inspector) \_\_\_\_\_ Tom Trooien (License #) 1568 \_\_\_\_\_ 6/21/23 (Date)

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

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Cert #) \_\_\_\_\_ (Date)