

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS)

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

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.

Property information	Local tracking number:
Parcel ID# or Sec/Twp/Range: 2503021210004	Reason for Inspection Property Sale
Local regulatory authority info:	
Property address: 7895 Leeward Ave N, Stillwater, MN	
Owner/representative:	Owner's phone:
Brief system description: Septic Tank - Drainfield Trenches. S	ystem installed in 1987.
System status	
System status	
System status on date (mm/dd/yyyy): 8/2/2023	□ Namasanaliant Nation of managements
☑ 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	Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.
abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.)	An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt
*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.	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 applica	ible)
☐ Impact on public health (Compliance component #1	•
☐ Tank integrity (Compliance component #2) – Failing	g to protect groundwater
☐ Other Compliance Conditions (Compliance compor	nent #3) – Imminent threat to public health and safety
☐ Other Compliance Conditions (Compliance compor	nent #3) – Failing to protect groundwater
☐ System not abandoned according to Minn. R. 7080	0.2500 (Compliance component #3) – Failing to protect groundwater
☐ Soil separation (Compliance component #5) – Faili	ing to protect groundwater
☐ Operating permit/monitoring plan requirements (Co	ompliance component #4) – Noncompliant - local ordinance applies
Comments or recommendations	
Please continue to manage water useage in the house a	and pump tank regularily. The system was installed in 1987.
3	
Certification	
	d to determine the compliance status of this system. No determination of own conditions during system construction, possible abuse of the system,
,	ue and correct, to the best of my knowledge, and that this information can be
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: EDG, Inc	Certification number: C2487
Inspector signature: Chris Bosshart	License number: L1955
(This document has been electronically sig	gned) Phone:
Necessary or locally required supporting do	ocumentation (must be attached)
☐ Soil observation logs ☐ System/As-Built ☐ Locally	required forms
Other information (list):	, and a remaining to small
<u> </u>	

ess Name: EDG, Inc		Date: 8/2/2023
pact on public health – C	ompliance comp	oonent #1 of 5
Compliance criteria:		Attached supporting documentation:
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 indicates imminent threat to public health a		
Describe verification methods and	d results:	
nk integrity – Compliance	e component #2	of 5
nk integrity – Compliance	e component #2	
Compliance criteria:	-	Attached supporting documentation:
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit,	e component #2	Attached supporting documentation: ☐ Empty tank(s) viewed by inspector
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	-	Attached supporting documentation: Empty tank(s) viewed by inspector Name of maintenance business:
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit,	☐ Yes* ☑ No	Attached supporting documentation: ☐ Empty tank(s) viewed by inspector
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 documentation: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business:
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 documentation: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance:
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 documentation: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance: Existing tank integrity assessment (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: Any "yes" answer above indicates.	☐ Yes* ☒ No ☐ Yes* ☒ No ☐ Yes* ☒ No	Attached supporting documentation: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance: Existing tank integrity assessment (Attach) Date of maintenance (mm/dd/yyyy): (See form instructions to ensure assessment complete
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 documentation: Empty tank(s) viewed by inspector Name of maintenance business: License number of maintenance business: Date of maintenance: Existing tank integrity assessment (Attach) Date of maintenance (mm/dd/yyyy): (See form instructions to ensure assessment complement. R. 7082.0700 subp. 4 B (1))
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	Property Address: 7895 Leeward Ave N, Stillwater, MN	Date: 8/2/2023
Ь	Business Name: EDG, Inc	Date. <u>6/2/2023</u>
2	Other compliance conditions. Compliance company #2 of F	
<u>3.</u>	Other compliance conditions – Compliance component #3 of 5	
	3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unser	cured?
	☐ Yes* ☐ No ☐ Unknown	007 + 07 000
	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.	DV DN-
	3c. System is non-protective of ground water for other conditions as determined by inspector?3d. System not abandoned in accordance with Minn. R. 7080.2500?	☐ Yes* ☒ No ☐ Yes* ☒ No
	*Yes to 3c or 3d - System is failing to protect groundwater.	☐ les ☑ No
	Describe verification methods and results:	
	Attached supporting documentation: Not applicable	
4.	Operating permit and nitrogen BMP* – Compliance component #4 of	f 5 ⊠ Not applicable
<u>4.</u>	Operating permit and nitrogen BMP* – Compliance component #4 of	•
<u>4.</u>	Operating permit and nitrogen BMP* – Compliance component #4 of Is the system operated under an Operating Permit?	f "yes", A below is required
<u>4.</u>	Operating permit and nitrogen BMP* – Compliance component #4 of Is the system operated under an Operating Permit?	f "yes", A below is required
<u>4.</u>	Operating permit and nitrogen BMP* – Compliance component #4 of Is the system operated under an Operating Permit?	f "yes", A below is required f "yes", B below is required
4.	Operating permit and nitrogen BMP* — Compliance component #4 of 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	f "yes", A below is required f "yes", B below is required
4.	Operating permit and nitrogen BMP* – Compliance component #4 of 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 to be completed.	f "yes", A below is required f "yes", B below is required
4.	Operating permit and nitrogen BMP* — Compliance component #4 of 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 to be completed Compliance criteria:	f "yes", A below is required f "yes", B below is required
4.	Operating permit and nitrogen BMP* — Compliance component #4 of Is the system operated under an Operating Permit?	f "yes", A below is required f "yes", B below is required
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https://www.pca.state.mn.us wq-wwists4-31b • 4/28/2021

siness Name: EDG, Inc		Date: <u>{</u>	3/2/2023
Soil separation – Compliance o	component #5 o	f 5	
Date of installation 6/1/1987 (mm/dd/yyyy)	Unknown		
Shoreland/Wellhead protection/Food	☐ Yes ☐ No	Attached supporting documentation:	
beverage lodging?		$oxed{\boxtimes}$ 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, a	and ☐ Yes ☐ No*	☐ Not applicable (No soil treatment area	a)
not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:			
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.			
5b. <i>Non-performance systems built</i>	⊠ Yes □ No*	Indicate depths or elevations	
April 1, 1996, or later or for non- performance systems located in Shorela	and	A. Bottom of distribution media	25"
or Wellhead Protection Areas or serving	а	B. Periodically saturated soil/bedrock	56"
food, beverage, or lodging establishmen	t:	C. System separation	31
Drainfield has a three-foot vertical separation distance from periodically		D. Required compliance separation*	30.6 w 15% var
saturated soil or bedrock.*		*May be reduced up to 15 percent if allo	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 Inspec License required > 2,500 gallons per da			
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.			

Soil boring performed and attached is previous boring log from Earth Sciences from original design.

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.

800-657-3864

Property address: 7895 Leeward	State: Mand Northparcel ID:
	State: WAM Zing
	Zip code: 55082
Optional section: Sewago Taul o	
Optional section: Sewage Tank Compliance of This form does not represent a complete system inspection this form, completed, may serve as a tank integrity asset.	Certification (Tank integrity assessment)
Instructions. The	Certifies sewage tank
When this section of the form is signed by a section	gned by a Designated Certified Individual (DCI) of a licensed SSTS rocedures to assess the compliance status of each sewage tank in
The information at https://www.pca.state.mn.us/watas	ection form - Existing system (we specified documentation to an
component compliance and is allowable under the submits an inspection	hen existing septic tank compliance status is date.
R. 7082.0700, subp. 4 Items B. C. and D. 7082.0700	o, subp. 4 Item (B) subitem (1). This form is valid for a period of valuation is requested by the owner or owner's agent or in
Certificate of sewage tout	this activity can be found at Minn.
Alliff all three statement	Notice of sewage tank non come
The SSTS does not contain a seepage pit, cesspool, drywell, leaching pit, or other pit.	
to be watertight but a sewage tank that was designed	The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit – "Failure to Protect"
It does not represent the leaks below the	Lithas a sawaga tantu
reason of unsecured, damaged, or weak maintenance hole cover(s) or other unsafe condition.	operating depth - "Failure to Protect Groundwater."
Company information	unsecured, damaged, or weak maintenance hole cover(s) or other unsafe condition – "Imminent Threat to Public Health or Safety."
Company name:	Designated Certified Indiana
personally cond	Print name: NCI CIVING
Business. I personally conducted the pages	Certification number: C25 L
I personally conducted the work described above as a Designated Ce Business. I personally conducted the necessary procedures to assess this information can be used for the purpose of processing this form. Designated Certified Individual's signature:	s the compliance status of each sewage tank in this SSTS.
signature:	stronge, and that
	Date (mm/dd/yyyy): 8/2/23



Soil Observation Log

Project ID: v 03.15.2023

Client:		Jon 8	t Kristin	Sommer			Locati	on / Address:	7895	Leeward Ave N Sti	llwater, MN 55082	•
Soil parent n	naterial(s): (CI	neck all th	nat apply)	☑ Outv	vash 🗌 La	acustrine	_ ☑ Loess □ Till □	Alluvium 🗌 Be	drock 🗌 Orgar	nic Matter 🔲 Disturbe	ed/Fill	
Landscape P	osition:	Shoulder			Slope %:	1.0	Slope shape:	Linear,	Linear	Flooding/Run-C	n potential:	No
Vegetation:		Lawn		Soil su	irvey map	units:	498	3	Surface Ele	evation-Relative to	benchmark:	n/a
Date/Time o	of Day/Weathe	r Conditio	ns:	8/2/	2023		9am	Sur	iny	Limiting Layer	Elevation: 56	,"
Observatio	n #/Location:	SB	-1	a	fter 4th t	rench in	drainfield	Observat	ion Type:		Auger	
Depth (in)	Texture	Rock Frag. %	Matrix	Color(s)	Mottle	Color(s)	Redox Kind(s)	Indicator(s)	Shape	I Structur Grade	el Consistenc	e
0-18"	Loam		10YR	3/2					Granular	Moderate	Friable	
18-36"	Silt Loam		10YR	4/4					Blocky	Moderate	Friable	
36-56"	Silt Loam		10YR	4/6					Blocky	Moderate	Friable	
56"+	Silt Loam		10YR	4/6	2.5YR	7/2	Concentrations	S2	Blocky	Moderate	Friable	
Comments:	Redox @ 56"											
I hereby cert	ify that I have	completed	this work	in accor	dance wit	h all appl	icable ordinances	, rules and law	S.			
С	hris Bosshart				7/	N			L1955		8/2/2023	
	igner/Inspecto		that this s	oil observ	ation was v	verified ac	cording to Minn R	7082 0500 subr	(License #)	nature below represe	(Date)	ration of
	lly saturated soi						_	. 302.0300 300	57 1110 3151	.a.a. a setom represe	an innext verific	
(LGU/D	esigner/Inspe	ctor)	1		(:	Signature	•)		(Cert #)		(Date)	

LOG OF SOIL BORINGS

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LOG OF SOIL BORINGS

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SHED 7895 LEEWARD AVE. N. STILLWATER, MN 55082 DEOPOSINES VI 4" CAPS 1 box reg TANL .S. Prof My House Lean Pro Due 1

WASHINGTON COUNTY, MINNESOTA

Sewage Treatment Permit No. 4469

nspection of Installation Must Be Made By the Building Offical Before Any Portion of System is Covered
Contact Planning Department, 779-5444, 24 Hour Notice Required

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vnerJOHN HEINLINE		CDANT	
operty DescriptionLOT_7_BLK_1_STI	LLWATER RANCHES	GRANI	
ZOOF IERWADD AVE	NO	PID# 63733 2	
TOME Flow Rate:	450 GPD	Percolation Re	ale mp
e of Building:HOME Gal. Liquid Cap	 Pacity Lift Statio⊓	(if needed)1000	J Ga
ptic Tank 1200 Gal. Liquid Cap	CCHALLOW)	· 	
pe of System: TANK AND DRAINFI	ELD (SHADDON)	Mildth	36!!
pe of System:TANK_AND DISTRICT Dispution Trench — Square Feet 900	Lineal Feet30	10 Width	
12 lnc	hes, Above Lines	<u> </u>	i
Evisting Grade - Minimu	ım <u>18</u> inches	s, waxiiidii	
ecommended Number of Lines 40751	(Note: Maximum	Length of Individual L	_ine is 100 Fee
ecommended Number of Lines	enter to Center		
Ninimum Spacing of Lines7½ Ft. C	ADDDOVED AND	NINDICATED ON A	TTACHED
Special Conditions <u>SYSTEM TO GO IN</u>	AREA APPROVED AND		
SITE PLAN.			
PERMIT: Permission is hereby granted to the above to the minimum specifications shown above and dition that the person to whom it is granted, and to ordinances of Washington County, Minneso said ordinance, and permit shall be void if wor INSTALLER MUST HOLD CURBENT SE	his agents, employees a ta. This permit may be re	nd workmen shall confidence worked at any time upo	on violation of N COUNTY.
Comments			
	and the second s	and the second s	
		Date	
Installation Approved	Inspector		/
White Applicant Canary-File Pink-Inspector	Goldenrod — Municipality		-1

As Built Individual Sewage Treatment System Report

Washington County Planning Departme	CCIII
14900 - 61st Street North Stillwater, MN 55082	ent

	Legal Description Lot #7 Bck / Stillwats Ranches
	John Heinlien 7895 1000001 AM Stillet M. CENSON
2	John HeiNLIEN 7895 Cowand Ave No. Stillaute MN 55082 Owner Mail Address City State Zip
	Installer Exc. 13147 M. Kusick R.J. No Stillwate MN. 55082
3	Riverton Exc. 13147 M. Kusick R.J. No. Stillwete. M.N. 55082 Installer Mail Address City State Zip
4	Septic Tank
	Manufacturer: $A-1$; Liquid Capacity: 1250
<u> </u>	Pump Chambon / i.c.
•	Pump Chamber (if installed)
	Manufacturer of Tank:; Liquid Capacity:
	Horse Power of Pump: ; Pump Discharge in Gallons Per
	Minute: feet of Head; Type
	of Warning Device:; Number of Gallons Pumped Per
	Cycle:
5	Drainfield Trench
	Width: 3'; Length of Each Trench: 270' Trencher 2-80' Trencher 3;
	Method of Distribution: Drop Bux; Depth of Trench Bottom
	from Finish Grade: 18"
j	bepth of Rock under Distribution
	Pipe: 12; Area Required: 900 \$ f.t.; Area as Built: 900 Se f.t.
_	Area as Built: 700 Se F.Z.
	Complete site plan on attached sheet. On site plan include location of:
	from tank treatment system distribution line
-	system, distance between distribution lines learnty to treatment
	lines and distance between well and sewage treatment system. Indicate on the site plan north and the scale of the site plan.
†-	
1	Septic Permit No. 4469