

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: 17.030.21.43.0007 Reason for Inspection: property sale
 Local regulatory authority info: Washington County
 Property address: 284 Laurel Rd Mahtomedi, MN 55115
 Owner/representative: Karl Drecktrah Owner's phone: 612-384-0835
 Brief system description: Two precast septic tanks and a precast pump tank pumping to a mound drainfield.

System status

System status on date (mm/dd/yyyy): 8/23/2023

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.

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.

***Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.**

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, inspection, soil 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 (must be attached)

- 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 an imminent 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:

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 8/23/2023
(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 8/14/2002 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.

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

Describe verification methods and results:

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	101.2
B. Periodically saturated soil/bedrock	98.2
C. System separation	3.0
D. Required compliance separation*	3.0

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

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

Project ID: _____ v 03.15.2023

Client: _____ Location / Address: 284 Laurel Rd Mahtomedj, MN 55115

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

Landscape Position: _____ Slope %: _____ Slope shape: _____ Flooding/Run-On potential: _____

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

Date/Time of Day/Weather Conditions: _____ Limiting Layer Elevation: _____

Observation #/Location: B-1 Observation Type: Auger

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Structure	
							Shape	Grade
0-10	loam	<35	10YR 3/2					
10-19	sandy loam	<35	7.5YR 4/3					
19-26	loam	<35	7.5YR 4/4					
26-36	sandy loam	<35	10YR 4/4					
36-40	sandy clay loam	<35	7.5YR 5/4	10YR 7/8	Concentrations	S2		
				5YR 5/2	Depletions	S2		

Comments: Redox at 36"

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 _____ 8/23/23 (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.

(LGU/Designer/Inspector) _____ (Signature) _____ (Cert #) _____ (Date)



Soil Observation Log

Project ID: v.03.15.2023

Client:		Location / Address: 284 Laurel Rd Mahtomedi, MN 55115											
Soil parent material(s): (Check all that apply)		<input type="checkbox"/> Outwash	<input type="checkbox"/> Lacustrine	<input type="checkbox"/> Loess	<input type="checkbox"/> Till	<input type="checkbox"/> Alluvium	<input type="checkbox"/> Bedrock	<input type="checkbox"/> Organic Matter	<input type="checkbox"/> Disturbed/Fill				
Landscape Position:		Slope %:				Slope shape:				Flooding/Run-On potential:			
Vegetation:		Soil survey map units:											
Date/Time of Day/Weather Conditions:		Surface Elevation-Relative to benchmark:											
Observation #/Location:		Limiting Layer Elevation:											
		Observation Type: Auger											
Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Shape	Grade	Structure-----I			Consistence	
0-12	loam	<35	10YR 3/2										
12-17	loam	<35	7.5YR 4/3										
17-30	loam	<35	10YR 4/4										
30-39	sandy loam	<35	7.5YR 4/4										
39-44	sandy clay loam	<35	10YR 4/6	10YR 7/8	Concentrations	S2							
				7.5YR 5/1	Depletions	S2							
Comments: Redox at 39"													
I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.													
		Tom Trooien				Tom Trooien				1568			8/23/23
		(Designer/Inspector)				(Signature)				(License #)			(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.													
		(LGU/Designer/Inspector)				(Signature)				(Cert #)			(Date)

Log Of Soil Borings

Location of Project:		284 Laurel Road, Mahtomedi, MN 55115	
Borings Made By:		Inspect Minnesota	Date: 4/18/11
Auger Used:		Hand/Bucket	Classification System: USDA
Boring Number:		1	Boring Number:
Surface Elevation of Boring	45" below top of mound at upslope edge of rock bed on original contour		Surface Elevation of Boring
Depth In Inches	<u>Soils Encountered</u>	Depth In Inches	<u>Soils Encountered</u>
0-12	7.5YR 2.5/2 Loam		
12-18	7.5YR 3/4 Loamy Sand		
18-27	7.5YR 4/4 Loamy Sand, Trace Gravel		
27-42	7.5YR 4/4 Loamy Sand, Trace Gravel With 5YR 4/8 & 7.5YR 5/3 Redox		
27"	Depth To End Of Boring Or Redox		Depth To End Of Boring Or Redox
+45"	Elevation Of Boring Relative To System		Elevation Of Boring Relative To System
-31"	Depth To Bottom Of System		Depth To Bottom Of System
=41"	Of Separation		Of Separation
End Of Boring At:	42"	End Of Boring At:	
Redox Present At:	27"	Redox Present At:	
Standing Water Present At:	None	Standing Water Present At:	

Bottom Of Distribution Medium At: 31 Inches

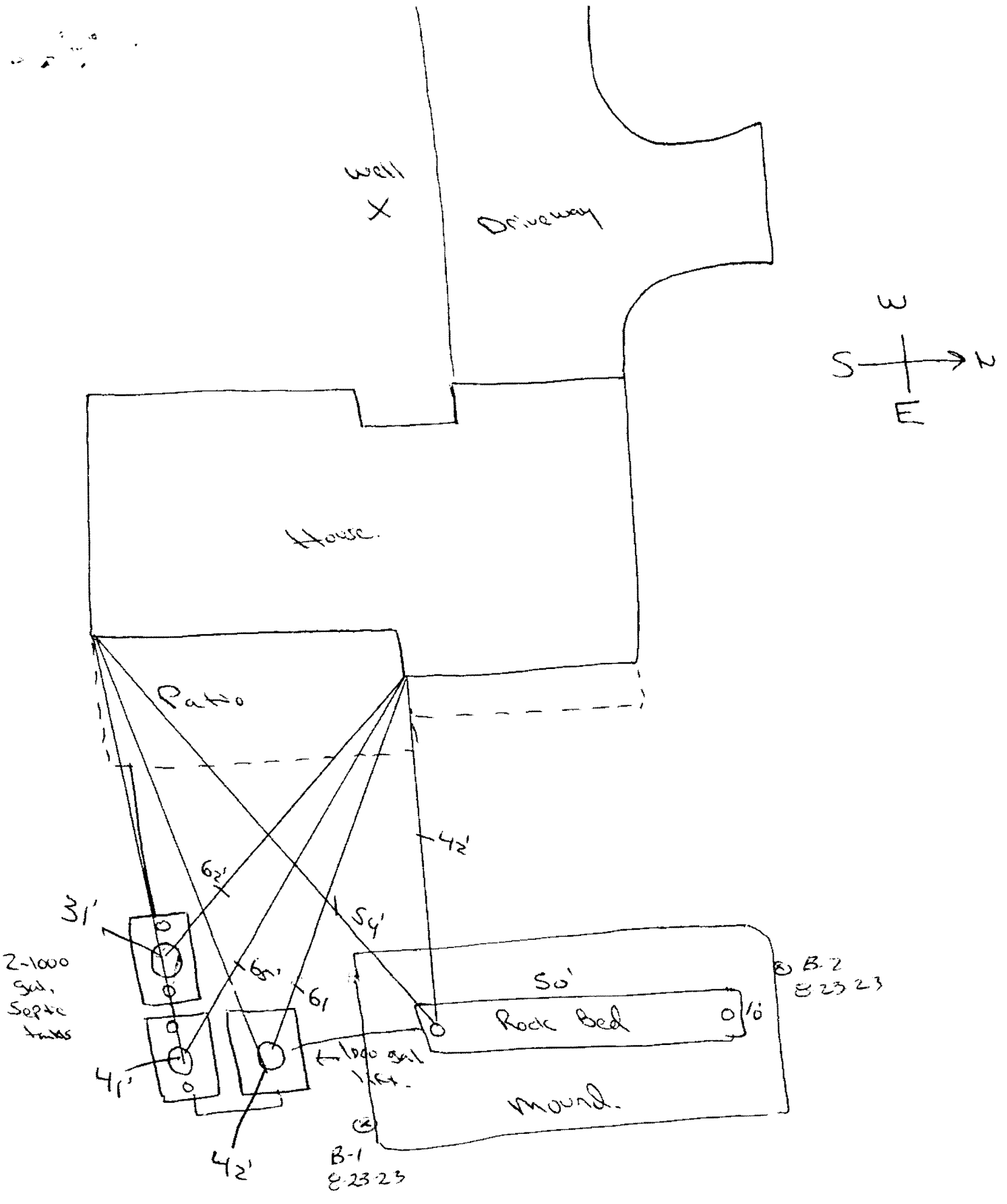
JOB LOO HEISESOO
284 LAUREL ROAD
MAHARAJA

BORING LOG

DATE 6-8-94

BOREHOLE DIAMETER 4" - 3/4" HAND AUGER

DEPTH FEET	HOLE #1	HOLE #2	HOLE #3	HOLE #4	HOLE #5	HOLE #6
1	FILL	SANDY LOAM - FILL	SANDY LOAM - FILL	TOP SOIL MIXTURE - LIGHT LOAM + SAND FILL		
2	BROWN, FINE SAND WITH LOAM	BROWN, FINE SAND WITH LIGHT LOAM	BROWN, FINE TO MEDIUM SAND	BROWN, MEDIUM SAND		
3	BROWN, MEDIUM SAND WITH CLAY - MOTTLED	BROWN, SANDY LOAM - 1" TO 2" ROCKS - MOTTLED	IRON STAINING GRAY, MEDIUM SAND - MOTTLED	IRON STAINING BROWN, MEDIUM SAND - MOTTLED		
4	WATER RUNNING IN THE BOREHOLE		OBSTRUCTION STOP	SOIL IS MOIST		
5	STOP	STOP		STOP		
6						
7						
8						
9						
10						



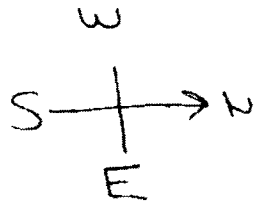
2-1000 gal. Septic tanks

Well X

Driveway

House

Path



42'

62'

54'

61'

41'

42'

50'

Rock Bed

1000 gal. tank

Mound

B-1
E-23-23

B-2
E-23-23



Purpose: This form may be used to certify the compliance status of the sewage tank components of the SSTS. This form is not a complete SSTS inspection report, only a tank integrity assessment, and may only certify sewage tank compliance status when entirely completed and signed by a qualified professional. SSTS compliance inspection report forms can be found at: <https://www.pca.state.mn.us/water/inspections>.

Instructions: This form may be completed, and signed, by a Designated Certified Individual (DCI) of a licensed SSTS inspection, maintenance, installation, or service provider business who personally conducts the necessary procedures to assess the compliance status of each sewage tank in the system. Only a licensed maintenance business is authorized to pump the tank for assessment. A copy of this information should be submitted to the system owner and be maintained by the licensed SSTS business for a period of five (5) years from the assessment date.

When this form is signed by a qualified certified professional, it becomes necessary supporting documentation to an Existing System Compliance Inspection Report: Compliance inspection form - Existing system (wa-wwists4-31b). This form can be found on the MPCA website at <https://www.pca.state.mn.us/water/inspections>.

The information and certified statement on this form is required when existing septic tank compliance status is determined by an individual other than the SSTS Inspector that submits an inspection report. This form represents a third party assessment of SSTS component compliance and is allowable under Minn. R. 7082.0700, subp. 4(B)(1). This form is valid for a period of three years beyond the signature date on this form unless a new evaluation is requested by the owner or owner's agent or is required according to local regulations. Additional Administrative Rule references for this activity can be found at Minn. R. 7082.0700, subp. 4(B),(C), and (D) and; Minn. R. 7083.0730(C).

Owner information

Owner/Representative: Karl Dreck Tah
Property address: 284 Laurel
Local Regulatory Authority: _____

Parcel ID: _____

System status

System status on date (mm/dd/yyyy): 8-23-23

Certificate of sewage tank compliance

Notice of sewage tank non-compliance

Compliance criteria:

The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit - "Failure to Protect Groundwater." Yes* No

The SSTS has a sewage tank that leaks below the designed operating depth - "Failure to Protect Groundwater." Yes* No

The SSTS presents a threat to public safety by reason of structurally unsound (damaged, cracked, or weak) maintenance hole cover(s) or lids or any other unsafe condition - "Imminent Threat to Public Health or Safety." Yes* No

Any "yes" answer above indicates sewage tank non-compliance.

Company information

Company name: Olson's Sewer Service, Inc.
Business license number: _____

Designated Certified Individual (DCI) information

Print name: Joel Hippert
Certification number: 6099

I personally conducted the work described above as a Designated Certified Individual of a Minnesota-licensed SSTS inspection, maintenance, installation, or service provider Business. I personally conducted the necessary procedures to assess the compliance status of each sewage tank in this SSTS.

By typing/signing 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.

Designated Certified Individual's signature: [Signature]
(This document was electronically signed.)

Date (mm/dd/yyyy): 8-23-2023