

# ZIERKE SOIL TESTING

Jamie Cole  
21158 Newberry Ct N  
Scandia, MN 55073

8/19/2023

Dear Jamie Cole,

At your agent's request, I have conducted a septic inspection to determine the compliance status of your septic system pursuant to Minnesota Rules Chapter 7080.1500.

The compliance test set out in 7080.1500 has three main inquiries: 1). Is the system functioning hydraulically (disposing of effluent in a manner that prevents it from coming in contact with people)? 2). Are the septic tanks water tight? 3). Does the system have sufficient vertical separation between the bottom of the septic system and restrictive layers (bedrock, standing water, seasonally wet layers, etc) to provide full treatment of effluent?

Based off of these criteria, your septic system is compliant. A certification of compliance is in effect for three years from the date it is issued. To be clear, this should not be construed as a guarantee of future system function – there are too many factors that influence the lifespan of a septic system for an inspector to predict or even guess how long a septic system will last. A copy of this report will be filed with your local unit of government for their records.

Sincerely,

*Benjamin Zierke*

Benjamin Zierke  
MPCA Lic 119, Cert 9594

ADDRESS:  
28587 Jeffrey Ave  
Chisago City, MN 55013

PHONE 651-249-1346  
EMAIL benzierke@gmail.com

# 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 (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: 1603220440004 Reason for Inspection Sale

Local regulatory authority info: Washington County

Property address: 21153 Newberry Ct N Scandia, MN 55073

Owner/representative: Jamie Cole Owner's phone: 612-701-3357

Brief system description: (2) 1000 gallon septic tanks, 1000 gallon lift tank, drop box rock trench drainfield

### System status

System status on date (mm/dd/yyyy): 8/19/2023

**Compliant – Certificate of compliance\***

*(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.)*

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

**Noncompliant – Notice of noncompliance**

*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.*

#### 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

Tanks were overfull during site visit 8/18/2023. After pumping the tanks down and re-filling the lift station, the float and pump were functioning normally. The alarm was tested and also worked as it should. I would recommend checking the tank periodically for the next month or two to ensure that the floats continue working - if the tanks are overfull again I would recommend replacing the float tree.

### 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: Zierke Soil Testing Certification number: 9594

Inspector signature: Benjamin Zierke License number: 119

*(This document has been electronically signed)* Phone: 651-249-1346

### 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 |

**Attached supporting documentation:**

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

**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 during site visit 8/18/2023. Checked inspection caps on drainfield - no ponding observed.

## 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:  |  |

**Attached supporting documentation:**

Empty tank(s) viewed by inspector

Name of maintenance business: Smilies

License number of maintenance business: 2428

Date of maintenance: 8/18/2023

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: \_\_\_\_\_

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

**Describe verification methods and results:**

Present for pumping by Smilies Sewer 8/18/2023. Tanks water tight and baffles in place. There is a small hairline crack in the lift tank that was visible below the cover. At present time the crack has not separated, lifted, or otherwise cracked through the bottom of the tank.

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 5/26/2006  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        | 24" |
| B. Periodically saturated soil/bedrock | 75" |
| C. System separation                   | 51" |
| D. Required compliance separation*     | 36" |

\*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:**

See attached design borings and boring from previous compliance inspection.

**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.

|                   |                 |
|-------------------|-----------------|
| Review Fee:       | \$225.00        |
| Permit Fee:       | \$360.00        |
| <b>Total Fee:</b> | <b>\$585.00</b> |
| Previous Payment  | \$585.00        |
| Balance Due       | \$0.00          |

Community: New Scandia Township  
 Permit Number: 0010-05-52  
 Owner: Avalon Homes Inc  
 855 Broadway W  
 Forest Lake MN 55025-  
 Applicant: Avalon Homes Inc

*Mailed  
11/9/05*



*Scanned 8/20/08  
DM*

**0010-05-52**

**PERMISSION IS HEREBY GRANTED**

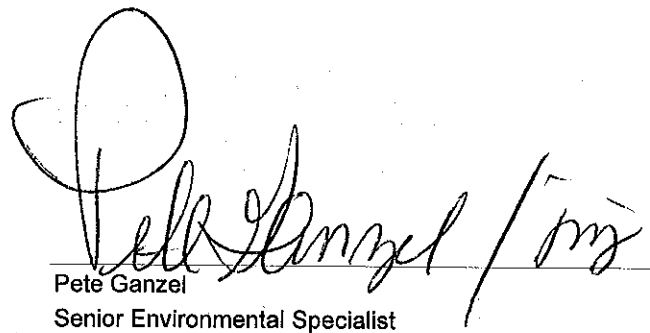
To execute the work specified in this permit on the following identified property upon express condition that said persons and their agents, and employees shall conform in all respects to the provisions of Ordinance #128, Washington County Development Code, Chapter Four, Individual Sewage Treatment System Regulations. This permit may be revoked at any time upon violation of any of the provisions of said ordinance.

Project Address: 21158 Newberry CT  
 Geo Code: 16-032-20-44-0004  
 Designer: Zierke Soil Testing

| Type of System: Standard Drainfield                                       |                       | Pressure Distribution |                 |
|---|-----------------------|-----------------------|-----------------|
|   |                       | N / A                 |                 |
| Design Criteria   | Drainfield Sizing     |                       |                 |
| Percolation Rate: 22  | Square Feet:          | 1000                  |                 |
| Depth To Restriction: 66  | Lineal:               | 333                   | Feet            |
| Land Slope: 1.00%   | Depth Of Rock Below:  | 12                    | Inches          |
| Flow Rate: 600  | Maximum Trench Depth: | 30                    | Inches          |
| Number of Bedrooms: 4   | Number Of Trenches:   | 5                     |                 |
| <input type="checkbox"/> Gravelless<br><input type="checkbox"/> Chambered | Length Of Trenches:   | 67                    | Feet            |
|   | Spacing Of Trenches:  | 7                     | Feet            |
| Tank Sizes  |                       |                       |                 |
| Tank 1: 1000  | Tank 2: 1000          | Tank 3: 0             | Lift Station: 0 |

**Authorized Work/Special Conditions**

1. Install individual sewage treatment system as per approved design in area tested and shown on the site plan.
2. Maximum trench depth 30 inches into natural soil.
3. System cannot be installed if frozen at trench depth.
4. This system must be installed by a certified/licensed sewage treatment system installer holding a current license with the Minnesota Pollution Control Agency. (A list of installers is available at your request.)

  
 Pete Ganzel  
 Senior Environmental Specialist

Permit Issue Date: 11/8/2005  
 Permit Expiration Date: 11/8/2006

## Individual Sewage Treatment System Inspection Form

|                                    |  |                                     |  |
|------------------------------------|--|-------------------------------------|--|
| Project Address: 21158 Newberry CT |  | Application ID: 0010-05-52          |  |
| Community: New Scandia Township    |  | Geo Code: 16-032-20-44-0004         |  |
| Owner: Avalon Homes Inc            |  | Type of System: Standard Drainfield |  |
| Applicant: Avalon Homes Inc        |  | Designer: Zierke Soil Testing       |  |

|   |   |   |
|---|---|---|
| Type of Installation: <input type="checkbox"/> New<br><input type="checkbox"/> Repair<br><input type="checkbox"/> Replacement<br><input type="checkbox"/> Other | Type of Inspection: <input type="checkbox"/> Site Review<br><input type="checkbox"/> Tank<br><input type="checkbox"/> Rough-Up<br><input type="checkbox"/> Treatment Area<br><input type="checkbox"/> Final | Inspector: <input type="checkbox"/> Pete Ganzel<br><input type="checkbox"/> Chris LeClair<br><input type="checkbox"/> Other |
| Number of Bedrooms: _____   | Inspection Dates: _____   |   |

| Site Review   | Mounds / At-Grade  |
|---|--|
| Date: _____ Conclusions: <input type="checkbox"/> Site Suitable<br><input type="checkbox"/> Site Unsuitable<br><input type="checkbox"/> Additional Tests Required<br><input type="checkbox"/> Soil Boring<br><input type="checkbox"/> Soil Pit<br>Depth of Pit/Boring: _____<br>Comments: _____ | <input type="checkbox"/> Mound <input type="checkbox"/> At-Grade Absorption Area _____<br>Percent Slope _____ Sand Below Bed _____<br>Upslope Width _____ Rock Below Pipe _____<br>Downslope Width _____ Perf Size/Spacing _____<br>Sideslope Width _____ Pipe Size/Spacing _____<br>Pressure Bed Dimensions: Length _____ Width _____ |

| Sewage / Holding Tanks   | Pump Information   |
|--|--|
| Tank 1 <input type="checkbox"/> New <input type="checkbox"/> Existing<br>Tank 2 <input type="checkbox"/> New <input type="checkbox"/> Existing<br>Baffle Type <input type="checkbox"/> Plastic<br><input type="checkbox"/> Fiberglass<br><input type="checkbox"/> San-T<br><input type="checkbox"/> Concrete | Lift Station Capacity _____ Feet of Head _____<br>Horsepower/GPM _____ Size of Discharge _____<br>Gallons Per Cycle _____ Line:<br>Gallons Per Minute _____ Type/Location or Alarm _____ |

| Trenches, Bed or Gravelless Drainfield   | Setbacks   |                    |                    |                                      |                              |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
|--|--|--------------------|--------------------|--------------------------------------|------------------------------|-----------------|--|----------|--|----------|------------------------------|-----------------------------|--|----------|--|----------|------------------------------|------------------------------|--|----------|--|----------|--------------------------------------|------------------------------|--|----------|--|----------|----------------------|------------------------------|--|
| <input type="checkbox"/> Drop Box <input type="checkbox"/> Distribution Box <input type="checkbox"/> Gravity <input type="checkbox"/> Pump Trench <input type="checkbox"/> Pressure Bed<br><input type="checkbox"/> Serial <input type="checkbox"/> Parallel <input type="checkbox"/> Chambers <input type="checkbox"/> Gravelless <input type="checkbox"/> 8" <input type="checkbox"/> 10"  | Building(s) to tanks _____<br>Building(s) to drainfield _____<br>Surface Water _____<br>Property Lines _____<br>Wells <input type="checkbox"/> 50' <input type="checkbox"/> 100' |                    |                    |                                      |                              |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Trench Depth (in)</td> <td style="width: 20%;">T1 _____</td> <td style="width: 20%;">Trench Length (ft)</td> <td style="width: 20%;">T1 _____</td> <td style="width: 20%;">Trench Width</td> <td style="width: 20%;">Rock Below Pipe</td> </tr> <tr> <td></td> <td>T2 _____</td> <td></td> <td>T2 _____</td> <td><input type="checkbox"/> 24"</td> <td><input type="checkbox"/> 6"</td> </tr> <tr> <td></td> <td>T3 _____</td> <td></td> <td>T3 _____</td> <td><input type="checkbox"/> 36"</td> <td><input type="checkbox"/> 12"</td> </tr> <tr> <td></td> <td>T4 _____</td> <td></td> <td>T4 _____</td> <td><input type="checkbox"/> Other _____</td> <td><input type="checkbox"/> 18"</td> </tr> <tr> <td></td> <td>T5 _____</td> <td></td> <td>T5 _____</td> <td>Trench Spacing _____</td> <td><input type="checkbox"/> 24"</td> </tr> </table> | Trench Depth (in)  | T1 _____           | Trench Length (ft) | T1 _____                             | Trench Width                 | Rock Below Pipe |  | T2 _____ |  | T2 _____ | <input type="checkbox"/> 24" | <input type="checkbox"/> 6" |  | T3 _____ |  | T3 _____ | <input type="checkbox"/> 36" | <input type="checkbox"/> 12" |  | T4 _____ |  | T4 _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> 18" |  | T5 _____ |  | T5 _____ | Trench Spacing _____ | <input type="checkbox"/> 24" | <b>Pressure Test</b><br>Time _____ Time _____<br>PSI _____ PSI _____ |
| Trench Depth (in)  | T1 _____   | Trench Length (ft) | T1 _____           | Trench Width                         | Rock Below Pipe              |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
|  | T2 _____   |                    | T2 _____           | <input type="checkbox"/> 24"         | <input type="checkbox"/> 6"  |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
|  | T3 _____   |                    | T3 _____           | <input type="checkbox"/> 36"         | <input type="checkbox"/> 12" |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
|  | T4 _____   |                    | T4 _____           | <input type="checkbox"/> Other _____ | <input type="checkbox"/> 18" |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
|  | T5 _____   |                    | T5 _____           | Trench Spacing _____                 | <input type="checkbox"/> 24" |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |
| Pressure Bed Dimensions: Length _____ Width _____ Absorption Area _____  |  |                    |                    |                                      |                              |                 |  |          |  |          |                              |                             |  |          |  |          |                              |                              |  |          |  |          |                                      |                              |  |          |  |          |                      |                              |  |

Comments: 3/8/04 2-1000  
5/25/06 1000 lift  
Drainfield - 1000 ft  
Envald 1000 gal tank  
R. G. G.

Inspector



# SITE REVIEW and/or SEPTIC PERMIT APPLICATION

## Washington County Public Health & Environment

14949 62nd Street N, PO Box 3803  
Stillwater, MN 55082-3803  
651/430-6688 FAX 651/430-6730

RECEIVED  
NOV 01 2005

Paid \$ 585<sup>00</sup>

Receipt # 678

Make checks payable to **WASHINGTON COUNTY**

- \$180 - New Home Drainfield
- \$ 80 - Replace Existing System with a Drainfield System
- \$300 - New Home Mound
- \$200 - Replace Existing System with a Mound System
- \$300 - Alternative/Experimental System
- \$175 - Individual Lot
- \$125 - Subdivision Soil/Site Review - Base fee Plus \$50/lot
- \$ 25 - Additional Review Fee (1 hour minimum)
- \$ 25 - Renewal of Previous Permit Fee

0010-05-52

Legal Description and Parcel Identification Number (especially if this is for a NEW SUBDIVISION OR MINOR SUBDIVISION)

LSBH Nature's Walk

|                                     |   |                               |                       |                            |                              |
|-------------------------------------|---|-------------------------------|-----------------------|----------------------------|------------------------------|
| Applicant<br><u>Avalon Homes</u>    | Address<br><u>555 W. Broadway, Ste. A</u> | City<br><u>Forest Lake MN</u> | State<br><u>55025</u> | Zip<br><u>651-464-9080</u> | Phone<br><u>651-464-9080</u> |
| Owner (if different from applicant) | Address                                   | City                          | State                 | Zip                        | Phone                        |

New Home  Existing Home  New Business  Existing Business

Number Of Bedrooms: 3 Gallons Per Day: 600

Check the following fixture(s) which are or will be installed: Garbage Disposal  Recreational Bathing Facility: (jacuzzi, hot tub, etc.)

New Home ⇒ Drainfield System  Mound System  Alternate/Experimental System  Existing Permit Renewal  Tank Replacement Only

Existing Home Replacement System ⇒ Drainfield System  Mound System

Site Approval Only  If this site has been previously approved, attach copy of approval letter  Additional Soil Test Data for Previously Approved Site

The following exhibits are required as part of this application and shall be attached hereto: Percolation Test Reports; Soil Boring Logs; Site Plan drawn to scale showing location of buildings, lot lines, percolation test holes, soil boring holes, proposed location of system and well; one (1) copy of the System Design; and one (1) copy of the Final Building Plan. The house and the drainfield areas must be staked. Inaccurate or incomplete information will result in delays in processing.

**AGREEMENT:** The undersigned hereby makes Application for Permit to Install or Extend Sewage Treatment System herein specified, agreeing that all such work shall be done in strict accordance with ordinances and regulations of the County of Washington, Minnesota. Applicant agrees that the Site Plan, Sketches and Design submitted herewith, and which are reviewed by Washington County, together with any requirement and/or restriction made necessary by conditions peculiar to a particular location, shall become a part of the permit. Applicant further agrees to provide access, at reasonable times, to Washington County for the purpose of performing inspections required by the permit. **APPLICATION IS FOR AN INSTALLATION AT A SPECIFIC LOCATION; ANY DEVIATION FROM THE APPROVED LOCATION WILL VOID THE PERMIT.** It shall be the responsibility of the applicant for the permit to notify the Office of the Washington County Dept. of Public Health & Environment that the installation is ready for inspection.

I hereby certify the above to be true and correct. In connection with your request for a soil review/septic permit, I hereby give Washington County Department of Public Health and Environment permission to enter upon my property during normal business hours for the purpose of determining the suitability of the location, design, and construction, which may include minor excavation or soil borings by the Department.

Veronica C. Ward - Avalon Signature of Applicant (Owner or Contractor) 10/24/05 Date

THE AREA BELOW IS FOR COUNTY USE ONLY

SITE EVALUATION: BY INSPECTOR \_\_\_\_\_ DATE \_\_\_\_\_

SETBACKS:

|  | REQUIRED [CIRCLE APPROPRIATE ITEM(S)] |     |      |      | ACTUAL |
|--|---------------------------------------|-----|------|------|--------|
| Well (including adjacent property)               | 50'                                   | 75' | 100' | 150' |        |
| Wetland, Pond, Lake, Stream, River, or Bluffline | 20'                                   | 40' | 75'  | 100' | 150'   |

CONCLUSIONS: Site Suitable:  Site Unsuitable:  Additional Tests Required:  Verify Use: \_\_\_\_\_ Bedrooms

NOTES: Lot Size \_\_\_\_\_ Year Built \_\_\_\_\_

21158 Newberry Ct  
1603220440004  
1.50



**STANDARD SYSTEM DESIGN  
INDIVIDUAL SEWAGE TREATMENT SYSTEM**

WASHINGTON COUNTY HEALTH, ENVIRONMENT & LAND MANAGEMENT  
14900 N. 61<sup>ST</sup> STREET, P.O. BOX 3803, STILLWATER, MN 55082-3803  
651/430-6708 OR 651/430-6656 FAX 651/430-6730

Owner's Name Avalon Homes  
Job Site Address XXXX Newberry Court N., Scandia, MN. 55073  
City or Township Sec. 16, New Scandia Twp.  
Use of Building single family-residential

|   |                 |                                    |
|---|-----------------|------------------------------------|
| Design Flow Rate 600 gpd                            | Land Slope 1-2% | Percent                            |
| Required Tank Sizes 1000 Gallons                    | and             | 1000 Gallons                       |
| Type of System (standard, at grade or bed) standard |                 |                                    |
| System Size: 1000 Square Feet                       | 333 Lineal Feet | 36" Trench Width                   |
| Depth of rock below pipe: 12"                       |                 | Depth of Rock Above Pipe: 2"       |
| MINimum Depth of Trench                             |                 | MAXimum Depth of Trench            |
| From Existing Grade 24 Inches                       |                 | From Existing Grade 30 Inches      |
| Recommended Number of Trenches 5                    |                 | Recommended Length of Trenches 67' |
| Trench Spacing Measured Center to Center 6-8 feet   |                 |                                    |
| Any Other Special Conditions none                   |                 |                                    |

IF PRESSURE DISTRIBUTION IS USED, COMPLETE THE PRESSURE DISTRIBUTION WORK SHEET ATTACHED.

This design must be accompanied by a site plan that clearly shows the location of the area tested and approved by the following:

1. Use an appropriate scale and indicate direction by use of a north arrow.
2. Show ALL property boundaries, rights-of-way, easements, wetlands. If necessary, an enlarged detail of the house site may also be required.
3. Show location of house, garage, driveway and all other improvements existing or proposed.
4. Show location and layout of sewage treatment system.
5. Show location of water supply (well and/or community supply line).
6. Dimension all setbacks and separation distances.

This system has been designed by a Pollution Control Agency (PCA) Certified Professional.

Designer Name: Chris Zierke

PCA Certification # 00998 (Lic. 119)

Address: 27072 Flintwood Circle Wyoming, MN 55092

Phone # (651) 462-2294

Signature 

Date 10/04/05

An Equal Employment Opportunity/Affirmative Action Employer  
If You Need Assistance Due to Disability or Language Barrier, Please Call 430-6656 OR 430-6708 (TDD 439-3220)

## LOGS OF SOIL BORINGS

Location of Project Lot 5, Block 4, Nature's Walk, Sec. 16, New Scandia Twp., Washington Co.  
 Borings Made by Chris Zierke Date: 10/3/05

Hand bucket auger used for borings; USDA – SCS Soil Classification used.

| Depth,<br>In<br>Feet | <b>Boring Number #59</b>                  |
|----------------------|---|
| 0-----               |   |
| 0-12"                | Dark-brown sandy loam(10YR-3/3)           |
| 12-20"               | Dark yellowish-brown sandy loam(10YR-4/4) |
| 20-36"               | Dark yellowish-brown loam(10YR-4/4)       |
| 36-66"               | Yellowish-brown loamy sand(10YR-5/6)      |

End of boring at 5.5 feet.

**Standing water table:**

Present at \_\_\_\_\_ feet of depth, \_\_\_\_\_ hours after boring.

Standing water not present in hole .

**Mottled Soil:**

Observed at \_\_\_\_\_ feet of depth.

Mottled soil not present in bore hole .

Comments:

| Depth,<br>In<br>Feet | <b>Boring Number #60</b>                    |
|----------------------|---|
| 0-----               |   |
| 0-12"                | Dark-brown sandy loam(3/3)                  |
| 12-24"               | Dark y-brown sandy loam(4/4)                |
| 24-36"               | Dark y-brown loam(4/4)                      |
| 36-54"               | Yellowish-brown loamy sand(5/4),<br>pebbles |
|                      | obstruction                                 |

End of boring at 4.5 feet.

**Standing water table:**

Present at \_\_\_\_\_ feet of depth, \_\_\_\_\_ hours after boring.

Standing water not present in hole .

**Mottled Soil:**

Observed at \_\_\_\_\_ feet of depth.

Mottled soil not present in bore hole .

Comments:

| Depth,<br>In<br>Feet | <b>Boring Number #61</b>             |
|----------------------|--------------------------------------|
| 0-----               |                                      |
| 0-8"                 | Dark-brown sandy loam(3/3)           |
| 8-14"                | Dark y-brown sandy loam(4/4)         |
| 14-24"               | Dark y-brown loam(4/4)               |
| 24-36"               | Strong-brown loam(7.5YR-4/6)         |
| 36-66"               | Yellowish-brown loamy sand(10YR-5/4) |

End of boring at 5.5 feet.

**Standing water table:**

Present at \_\_\_\_\_ feet of depth, \_\_\_\_\_ hours after boring.

Standing water not present in hole .

**Mottled Soil:**

Observed at \_\_\_\_\_ feet of depth.

Mottled soil not present in bore hole .

Comments:

| Depth,<br>In<br>Feet | <b>Boring Number #62</b>        |
|----------------------|---------------------------------|
| 0-----               |                                 |
| 0-8"                 | Dark-brown sandy loam(3/3)      |
| 8-14"                | Dark y-brown sandy loam(4/4)    |
| 14-30"               | Dark y-brown loam(4/4)          |
| 30-60"               | Yellowish-brown loamy sand(5/4) |
|                      | obstruction                     |

End of boring at 5 feet.

**Standing water table:**

Present at \_\_\_\_\_ feet of depth, \_\_\_\_\_ hours after boring.

Standing water not present in hole .

**Mottled Soil:**

Observed at \_\_\_\_\_ feet of depth.

Mottled soil not present in bore hole .

Comments:

APR-03-08 06:41

FROM-WASHINGTON CTY

651 430-6730

T-421 P.005/005 F-371



AS-BUILT REPORT  
INDIVIDUAL SEWAGE TREATMENT SYSTEM

1 of 2

Washington County Public Health & Environment  
14949 - 62<sup>ND</sup> ST N, PO BOX 6, STILLWATER, MN 55082-0008  
651/430-6888 OR 651/430-6868 FAX 651/430-6730

|   |  |  |                    |                     |
|---|--|--|--------------------|---------------------|
| Legal Description or Cor. plat or Street Address<br><b>21158 New Berry Ct</b> |  | City of Township<br><b>New Scandinavia</b> |                    |                     |
| Owner Name  | Mail Address                               | City                                       | State              | Zip                 |
| Installer<br><b>Emerald Irrig</b>   | Mail Address<br><b>21820 Types Crk. Dr</b> | City<br><b>Wyoming</b>                     | State<br><b>MN</b> | Zip<br><b>55092</b> |
| Septic Tank Information<br>Tank Manufacturer: <b>Gilbertson</b>               |  | Liquid Capacity<br><b>2-1000 Septic</b>    |                    |                     |

| PUMP CHAMBER (If installed)                        |                                 |                      |  |
|--|---------------------------------|----------------------|--|
| Tank Manufacturer:<br><b>Gilbertson</b>            | Liquid Capacity:<br><b>1000</b> | Horsepower of Pump:  | Type of Warning Device:<br><b>In House Alarm</b> |
| Pump Discharge in Gallons Per Minute:<br><b>30</b> | in                              | Feet of<br><b>15</b> | Number of Gallons Per Cycle:                     |

| RAINFIELD TRENCH  |                                      | BED OR MOUND  |                              |
|---|--------------------------------------|---|------------------------------|
| Width:<br><b>3'</b>   | Length of Each Trench:<br><b>67'</b> | Rock Bed Length:  | Width: Area:                 |
| Depth of Trench Bottom from Finished Grade:<br><b>above 30"</b>   |                                      | Bed Depth from Grade:   |                              |
| Method of Distribution:<br><input checked="" type="checkbox"/> Pressure <input type="checkbox"/> Distribution Box <input type="checkbox"/> Drop Box |                                      | MOUND:<br>Upslope Sand Base Depth: Downslope Sand Base Depth: |                              |
| Depth of Rock Under Distribution Pipe:<br><b>12"</b>  |                                      | Depth of Rock Under Pipe:                                     |                              |
| Square Footage of Tested Area Used:<br><b>1000</b>  |                                      | PRESSURE DISTRIBUTION SYSTEM:                                 |                              |
| Trench Bottom Square Footage Required:<br><b>1000</b>   | Area As Built:                       | Lateral Inside Diameter:                                      | Length: Perforation Size:    |
|   |                                      | Spacing:  | Number: Perforation Spacing: |

Complete site plan on attached sheet. On the site plan, include location of the following items.

structures, septic tank, pump chamber, line from house to tank treatment system, distribution lines, distribution or crop boxes, well, and driveway. Show all distances applicable to the sewage treatment system (distance from structure to tank, tank to treatment system, distance between distribution lines, length of distribution lines, and distance between well and sewage treatment system). Indicate NORTH on the site plan and the scale of the plan.

I hereby certify that the system at the above referenced address was installed according to the Washington County Individual Sewage Treatment System Ordinance requirements.

Signed:

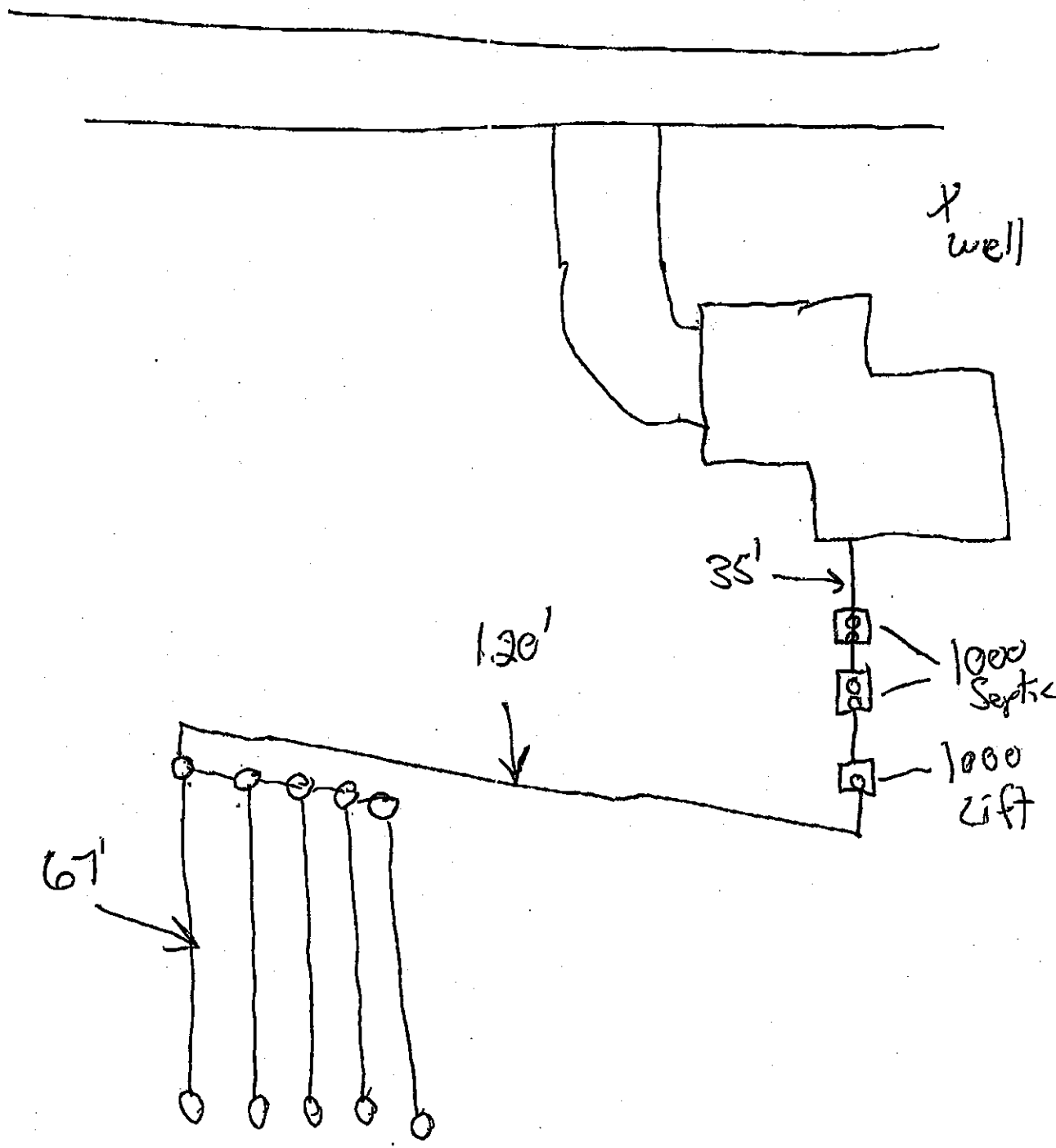
MPCA License #: **1675**

Dated: **5/25/06**

WASHINGTON COUNTY SEPTIC PERMIT NUMBER

**0010-05-52**

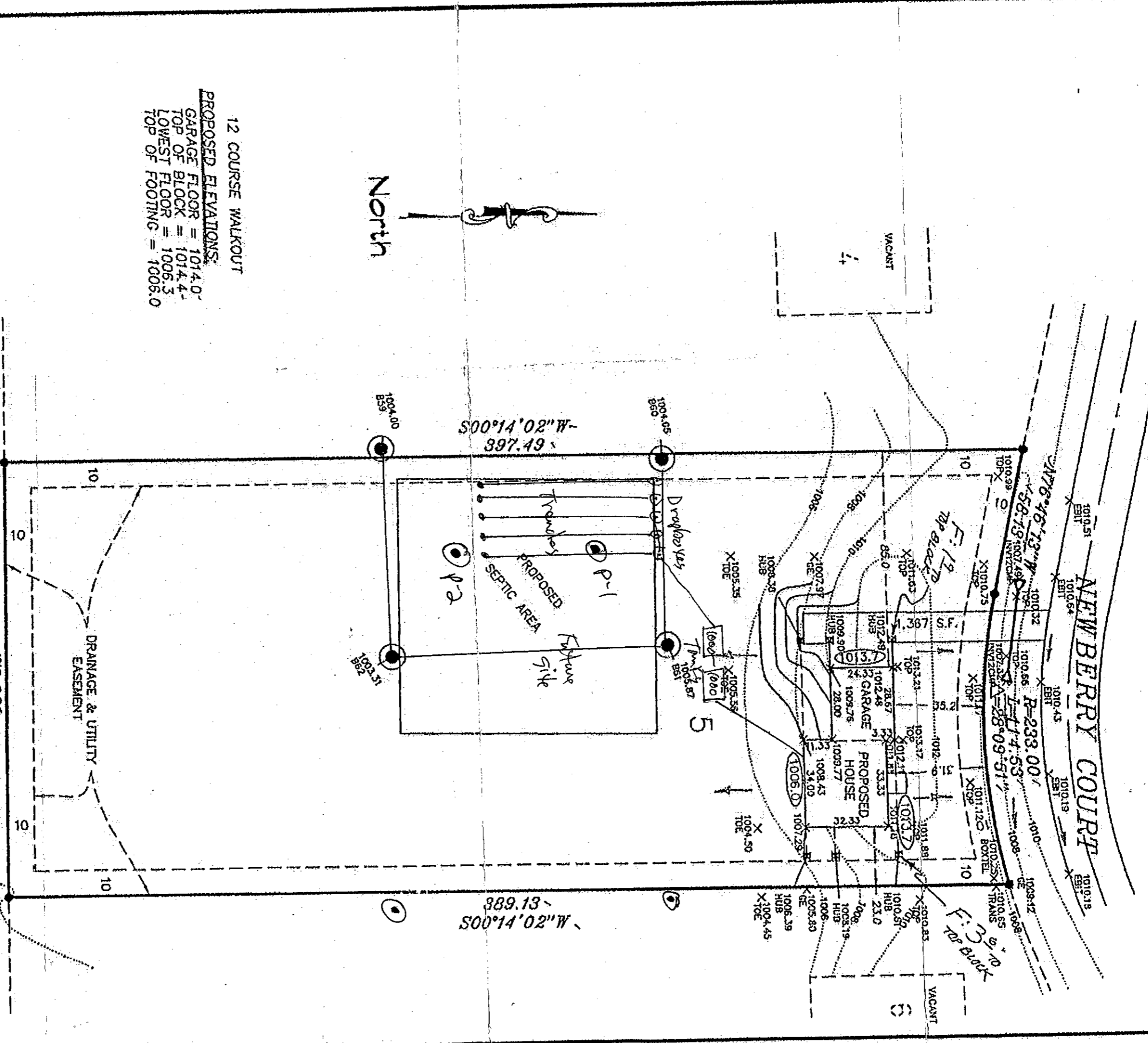
21158 NewBerry ct.



# HOUSE SKETCH

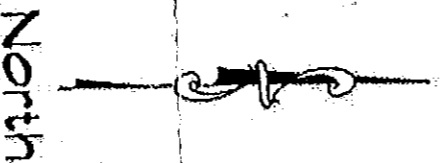
FOR: AVALON HOMES

PKS



12 COURSE WALKOUT

**PROPOSED ELEVATIONS:**  
 GARAGE FLOOR = 1014.0'  
 TOP OF BLOCK = 1014.4'  
 LOWEST FLOOR = 1006.3'  
 TOP OF FOOTING = 1006.0'



- DIAG: 35.67 X 84.00 = 91.26
- ⊙ Denotes Proposed Elevation.
  - ⊙1011.2 Denotes Existing Elevation.
  - ↖ Denotes Direction of Drainage.
  - ⊙ Denotes Wood Hub / Metal Spike of 11 foot offset.
- \*BUILDER TO VERIFY HSE DIMENSIONS, SEWER DEPTH AND FOUNDATION DEPTH.

Lot 5, Block 4, NATURES WALK, Washington County, Minnesota.

Scale 1" = 40' Drawn By: RLO

o Denotes Iron Set • Denotes Iron Found

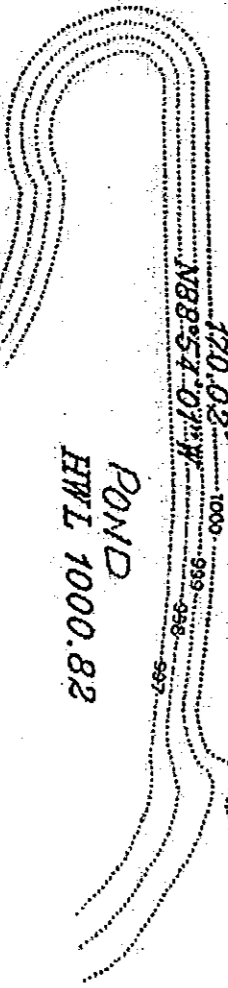
Project Manager: RLO Job No.: 056226HS

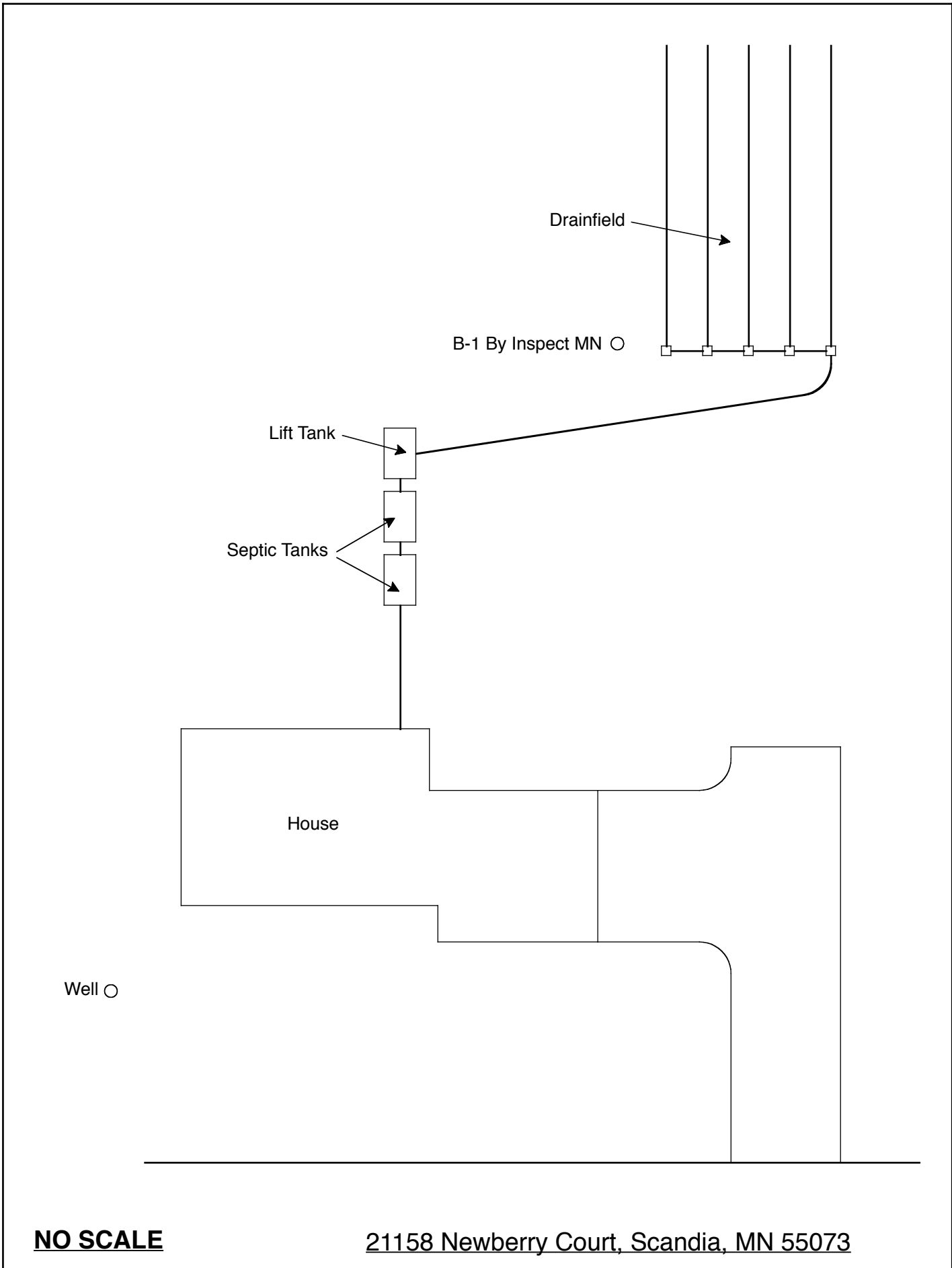
Bearings shown are on an assumed datum.

I hereby certify that this plan, survey or report was prepared by me or under my direct supervision and that I am a duly Registered Land Surveyor under the laws of the State of Minnesota. Dated this 22<sup>nd</sup> day of September, 2005.

**EGGRUD & SONS, INC.**  
 LAND SURVEYORS  
 9180 LEXINGTON AVE. NO.  
 CIRCLE PINES, MINNESOTA 55014-3625  
 TEL 763-786-5556 FAX 763-786-6007

License No. 85344





**NO SCALE**

**21158 Newberry Court, Scandia, MN 55073**

## Log Of Soil Borings

|                               |   |   |  |
|-------------------------------|---|---|--|
| Location of Project:          |   | 21158 Newberry Court, Scandia, MN 55073 |  |
| Borings Made By:              |   | Inspect Minnesota                       | Date: 3/25/15                          |
| Auger Used:                   |   | Hand/Bucket                             | Classification System: USDA            |
| Boring Number:                |   | 1                                       | Boring Number:                         |
| Surface Elevation of Boring   | Same ground surface as last drainfield trench   |   | Surface Elevation of Boring            |
| Depth In Inches               | <u>Soils Encountered</u>  |   | Depth In Inches                        |
| 0-8<br>8-31<br>31-56<br>56-75 | 7.5YR 2.5/3 Fine Sandy Loam<br>10YR 3/6 Silt Loam<br>7.5YR 4/4 Loamy Sand<br>7.5YR 5/6 Medium Sand With<br>7.5YR 3/4 Loamy Sand Bands |   |  |
| 75"                           | Depth To End Of Boring Or Redox   |   | Depth To End Of Boring Or Redox        |
| Same                          | Elevation Of Boring Relative To System  |   | Elevation Of Boring Relative To System |
| -23"                          | Depth To Bottom Of System   |   | Depth To Bottom Of System              |
| ≥52"                          | Of Separation   |   | Of Separation                          |
| End Of Boring At:             |   | 75"                                     | End Of Boring At:                      |
| Redox Present At:             |   | None                                    | Redox Present At:                      |
| Standing Water Present At:    |   | None                                    | Standing Water Present At:             |

Bottom Of Distribution Medium At: 23 Inches

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