

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

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS)

Doc Type: Compliance and Enforcement

Instructions: Inspector must submit completed form to Local Governmental Unit (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.

Parcel ID# or Sec/Twp/Range: 0502920340009 ocal regulatory authority info: Washington County Property address: 13330 51st St Court N Baytown, Mn Dwner/representative: Jesse Wilcox Brief system description: 2 Septic tanks to drainfield System status System status on date (mm/dd/yyyy): 5/27/2024	Local tracking Reason for Inspection	Property Transfer Owner's phone: 612-363-2280							
Property address: 13330 51st St Court N Baytown, Mn Dwner/representative: Jesse Wilcox Brief system description: 2 Septic tanks to drainfield System status System status on date (mm/dd/yyyy): 5/27/2024		Owner's phone: 612-363-2280							
roperty address: 13330 51st St Court N Baytown, Mn wner/representative: Jesse Wilcox rief system description: 2 Septic tanks to drainfield ystem status ystem status on date (mm/dd/yyyy): 5/27/2024		Owner's phone: 612-363-2280							
wner/representative: Jesse Wilcox rief system description: 2 Septic tanks to drainfield ystem status ystem status on date (mm/dd/yyyy): _5/27/2024		Owner's phone: 612-363-2280							
ystem status ystem status on date (mm/dd/yyyy): _5/27/2024									
ystem status ystem status on date (mm/dd/yyyy): _5/27/2024									
system status on date (mm/dd/yyyy): _5/27/2024									
system status on date (mm/dd/yyyy): 5/27/2024									
□ Compliant – Certificate of compliance*	☐ Noncompliant – Notice	ce of noncompliance							
Valid for 3 years from report date unless evidence of an mminent threat to public health or safety requiring removal and	use discontinued within the t	ound water must be upgraded, replaced, or ime required by local ordinance.							
abatement under section 145A.04, subdivision 8 is discovered of a shorter time frame exists in Local Ordinance.)	An imminent threat to public	health and safety (ITPHS) must be							
Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not	of this notice or within a short	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.							
guarantee future performance.	abla)								
Reason(s) for noncompliance (check all applic		and potenty							
Impact on public health (Compliance component #1) – Imp		inu saiety							
Tank integrity (Compliance component #2) – Failing to pro		oolth and safaty							
Other Compliance Conditions (Compliance component #3									
Other Compliance Conditions (Compliance component #3									
System not abandoned according to Minn. R. 7080.2500		railing to protect groundwater							
Soil separation (Compliance component #5) – Failing to p									
Operating permit/monitoring plan requirements (Complian	ice component #4) – Noncomp	liarit - local ordinarice applies							
Comments or recommendations									
Certification									
	and to determine the compliance of	totus of this system. No determination of							
hereby certify that all the necessary information has been gather future system performance has been nor can be made due to unk nadequate maintenance, or future water usage.	rnown conditions during system co	onstruction, possible abuse of the system,							
By typing my name below, I certify the above statements to be to used for the purpose of processing this form.	rue and correct, to the best of my								
		Certification number: 9370							
Business name: David R Brown nspector signature: DRB		License number: 3649							
Business name: David R Brown	signed)								
Business name: David R Brown nspector signature: DRB		Phone: 651-788-3296							
Business name: David R Brown Inspector signature: DRB (This document has been electronically seconds and provided supporting of the control		Phone: 651-788-3296 be attached)							
Business name: David R Brown Inspector signature: DRB (This document has been electronically seconds or locally required supporting of the control of the	documentation (must b	Phone: 651-788-3296 be attached)							

System discharges sewage to the ground surface System discharges sewage to drain tile or surface waters. System causes sewage backup into dwelling or establishment. Any "yes" answer above indicates the system is an imminent threat to public health and safety.	☐ Other: ☐ Not applicable
tile or surface waters. System causes sewage backup into dwelling or establishment. Any "yes" answer above indicates the system is an	
dwelling or establishment. Any "yes" answer above indicates the system is an	
Compliance criteria: System consists of a seepage pit. □ Yes* ⋈ No	of 5 Attached supporting documentation: ⊠ Empty tank(s) viewed by inspector
System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	Name of maintenance business: Meyers
Sewage tank(s) leak below their designed operating depth? ☐ Yes* ☑ No	License number of maintenance business: 915 Date of maintenance: 5/9/2024
	Existing tank integrity assessment (Attach)
If yes, which sewage tank(s) leaks:	Date of maintenance (mm/dd/yyyy): (must be within three years)
Any "yes" answer above indicates the system is failing to protect groundwater.	(See form instructions to ensure assessment complies wit Minn. R. 7082.0700 subp. 4 B (1))
	☐ Tank is Noncompliant (pumping not necessary – explain below ☐ Other:
Describe verification methods and results:	

siness Name:David R Brown	
	Date: 5/27/2024
Other compliance conditions – Compliance component #3 of	5
3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.	c.), or unsecured?
☐ Yes* ☑ No ☐ Unknown	
3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public healt	th or safety? ☐ Yes* 🗵 No ☐ Unknow
*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 insp	pector? ☐ 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	
Operating permit and nitrogen BMP* - Compliance component	nt #4 of 5 ⊠ Not applicable
Is the system operated under an Operating Permit?	
	⊠ 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", A below is required
Is the system required to employ a Nitrogen BMP specified in the system design? Yes BMP = Best Management Practice(s) specified in the system design	No If "yes", A below is requiredNo If "yes", B below is required
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 continued to be	No If "yes", A below is requiredNo If "yes", B below is required
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 co Compliance criteria:	No If "yes", A below is requiredNo If "yes", B below is required
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 co Compliance criteria: a. Have the operating permit requirements been met? Yes No	No If "yes", A below is requiredNo If "yes", B below is required
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 co Compliance criteria: a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 co Compliance criteria: a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. a. Have the operating permit requirements been met? b. Is the required nitrogen BMP in place and properly functioning? Yes No Any "no" answer indicates noncompliance.	No If "yes", A below is requiredNo If "yes", B below is required
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 concentrated. 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:	No If "yes", A below is required No If "yes", B below is required completed.

Date of installation 2001 (mm/dd/yyyy)	Unknown		
Shoreland/Wellhead protection/Food beverage lodging? 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: Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.	☐ Yes ☐ No	Attached supporting documentation: ☐ Soil observation logs completed for th ☐ Two previous verifications of required ☐ Not applicable (No soil treatment area	vertical separatio
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: Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*	☐ Yes ☐ No*	A. Bottom of distribution media B. Periodically saturated soil/bedrock C. System separation D. Required compliance separation* *May be reduced up to 15 percent if allowed or separation.	36" 72" 36" 36" owed by Local
5c. "Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules 7080. 2350 or 7080.2400 (Intermediate Inspector License required ≤ 2,500 gallons per day; Advanced Inspector License required > 2,500 gallons per day) Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.	☐ Yes ☐ No*		

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.

EKLIN SOIL TESTING AND INSPECTIONS, INC. 1986 Ridgewood Avenue

1986 Ridgewood Avenue White Bear Lake, MN 55110 1-612-429-1090

Owner's Name STEPHEN KRENKEL - SALLY WAUGED -	SANTANNI	HOMES
Job Site Address LOT 3 BULL 51 ST STREET BAYTOUN		
City or Township BAYTOUN TOUNGHUP		
Use of Building HOME - 4- 5 BEDS		

Design Flow Rate PER DAY Perc Rate /8.26 IMPI	Land Slope 3-4	Percent
Two Required Tank Sizes /500 Gallons /000 Gallons	Lift Station Tank Size	Gallons
Type of System (standard, at grade or bed) STANDARD		
	neal Feet 36 "	-Trench Width
Depth of rock below pipe /2"	Depth of Rock Above Pipe	2"
MINimum Depth of Trench From Existing Grade 36 Inches	MAXimum Depth of Trench From Existing Grade	42 Inches
Recommended Number of Trenches 5	Recommended Length of Trenches	75 FT- 100 FT
Trench Spacing Measured Center to Center	7	Feet
Any Other Special Conditions No DRAIN FIELD 3-4-6 FILL SOIL	EAST OF BOR	'N63

DIFFICULT TO DETERMINE THE CONTOURS

BECAUSE OF THE SNOW DEPTH- FNSTALLEN

MOST UBLIFY THIS- INSULATE THE PIPE

UNDER THE DRIVE WAY

This system has been designed by a Pollution Control A	Agency (PCA) Certified Profession	onal,
Designer Name DALE EKLIN	WHITE BEAL LAKE	PCA Certification # 695
Address 1986 RIDGEWOOD AUB	MAINA 55110	Phone # 429-1090
Signature Rall Olm		Date 3-1-2001

MPCA Certification No. 0695 • Soil Borings • Percolation Tests • Site Evaluations • Designs • Inspections • Serving The Northeast Suburban Area Since 1952 •



SITE REVIEW and/or SEPTIC PERMIT APPLICATION

Washington County Public Health & Environment

14949 62nd Street N. PO Box 3803 Stillwater, MN 5508253805 1VED 651/430-6688 HAX 651/430-6730

		00
Paid \$_	355	X

Make	checks	payable t	to	WASHINGTON COUNTY	
m1 nn					

\$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

MAR 0 2 2001 \$175 - Individual Los

HELM \$125 - Subdivision Soil/Site R Plus \$50/lot \$ 25 - Additional Review Fee (1 hour minimum) Receipt #_

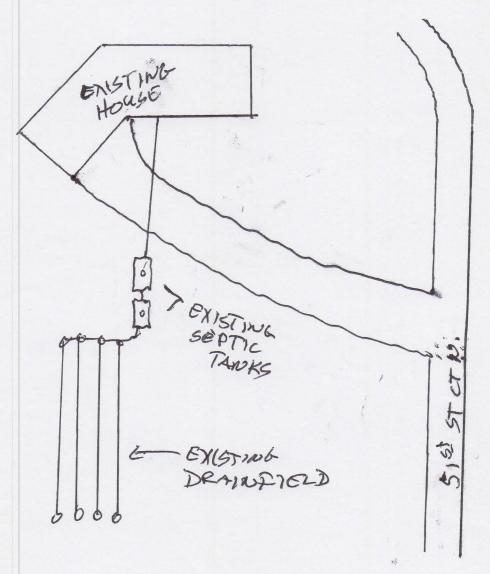
3.23 - Renieway of Previous Pen	mit Fee
Legal Description and Parcel Identification Number (especially if this is for a NEW SUBDI	IVISION OR MINOR SUBDIVISION SEC 5
1 + 2 011 1 0 1	Y TOUM TUSP RA 20W
Applicant Address	11004 1009
Santanni Homes Inc. 662 Sunset Ct.	Shoreview Mn. 55126 483-8256
Owner (if different from applicant) Stephen Krenkel Sally Walker 1188 Ashlund Ave.	City State Zip Phone 651 St. P441 - Mn. 55104 646-5105
New Home K Existing Home New Business Existing Business	Number Of Bedrooms: 4.5 Gallons Per Day: 7.50
Check the following fixture(s) which me or will be installed: Garbage Disposal	Recreational Bathing Facility: (Jacuzzi, hot tub, etc.)
New Home → Drainfield System Mound System Alternate/Experimental System	an
Existing Home Replacement System Drainfield System Mound System	
Site Approval Only A If this afte has been previously approved, attach copy of approval le	
The following exhibits are required as part of this application and shall be attached hereto: Pero location of buildings, lot lines, percolation test holes, soil boring holes, proposed location of sys Final Building Plan. The house and the drainfield areas must be staked. Inaccurate or incomple	them and well one (1) come of the Contem Plenton, and one (1)
AGREEMENT: The undersigned hereby makes Application for Permit to Install or Extend Sec	
w word in the medical will didination and regulations of the County of Washington Min	meents Applicant across that the Cita Dies Cleateles and Paster minutes it
shall become a part of the permit. Applicant further agrees to provide access at resonable time	restriction made necessary by conditions peculiar to a particular location,
with the try part of this system shall be diverted than it has been inspected and accented. APPLI	CATION IS FOR AN INSPALLATION AT A SPECIME
LOCATION; ANY DEVIATION FROM THE APPROVED LOCATION WILL VOID TH notify the Office of the Washington County Dept. of Public Health & Environment that the insta	IF PRIMIT It shall be the responsibility of the applicant for the applicant
of Public Health and Environment permission to enter upon my property during normal by location, design, and construction, which may include minor excavation or soil barings by the second sec	adiness hours for the purpose of determining the suitability of the the Department.
Usignature of Applicant (Owner or Contractor)	Date
	en de la companya de La companya de la co
SITE EVALUATION: BY INSPECTOR // Zording DA	ATE 3-5-01
SETBACKS: 26 MP1 REOU	IRED [CIRCLE APPROPRIATE ITEM(S)] ACTUAL
Well (including adjacent property) 42 ' Legith > K 50'	75' 100' 150'
Wetland, Pond, Lake, Stream, River, or Bluffline 7	40' 75' 100' 150'
CONCLUSIONS: Site Suitable: Site Unsuitable: Additional Tests Requir	red:
NOTES: Lot Size Year Built	PARTOFTHE AREA AS 9
13330 MA-SACAN	/ - / - / - /
05.029 20346009	
05.029 20340009 W ADVSE faire flit gan	ground
	ative Action Employer

1	A SOUTH TOOLS	HOLE #6	MIXTURE -	BLABY DIATI	[1]		-	JE LOWISH BROWN	-4-		1	FINE TO	2		<u></u>	STOP		+ 0 MAY 6+	30" FILL	1				
BOREHOLE DIAMETER 42.2以		HOLE #5	- MIXTURE-	LOAM + ELROX CIRT.	FILE			YELLOWISH BROWN	Woerfd Soll				Jars -		'	- 30" FILL +	-MOTHE 30" -	' -	- Yest Out					
60		HOLE #4		TOP 501L	YELLOWISH BROWN		1	YELLOWISH BROWN			'	'				570F			to	1 1				
BORING LOG		HOLE #3		70 P Soil	YELLOWISH BROWN						1	. 1	•			9072		OKAY 6						
\$0.05 -		HOLE #2	- 70P SOIL	YELLOWISH BROWN		BROWN, SANDY	1 1	. 1	11	+		. 1	1 1	1		STOP	†	- OKAY 6+		. 1			11	11
3, BAK 1, BAYTOWN WOODS BAYTOWN TWSP.		HOLE #1	MATURE	CAND + LOAM	File		11			- SRAY LOAM -	- NOTITED SOIL		1-1	1	S70P	- 42" FILE	1	11 101114 42	Mot in TEST SITE		1 1	++		-+
LOT 3, DATE		PEET			1	7					+	25	1-1		•	1	7		8		6	++	10	++

10

~

NT WO SCALE



SEE ATTACHED BORING LOGS 2 PREVIOUS BORINGS COUNTY APROVAL

