

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: 2702920330006 Reason for Inspection Transfer of deed
Local regulatory authority info: Washington County
Property address: 1080 PARIS AVENUE CT N, TOWN OF WEST LAKE LAND
Owner/representative: MOY RALPH H & SHELLY A Owner's phone: 651-270-5725
Brief system description: Two 1500 gallon septic tanks going to gravity fed drain field

System status

System status on date (mm/dd/yyyy): 6/6/2024

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

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: SS Septic Solutions, LLC. Certification number: 9917
Inspector signature: Shelley Schlomka License number: 4137
(This document has been electronically signed) Phone: 651-343-9117

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): _____

Property Address: 1080 PARIS AVENUE CT N, TOWN OF WEST LAKELAND

Business Name: SS Septic Solutions, LLC.

Date: 6/6/2024

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:

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: Meyers
 - License number of maintenance business: _____
 - Date of maintenance: 6/6/2024
- 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:

Homeowner dug up that manholes so the tanks could be properly cleaned and inspected. Tanks water tight at time of inspection. I suggested to the homeowner that they add risers so the tanks can be properly serviced in the future.

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)

Property Address: 1080 PARIS AVENUE CT N, TOWN OF WEST LAKELAND

Business Name: SS Septic Solutions, LLC.

Date: 6/6/2024

5. Soil separation – Compliance component #5 of 5

Date of installation 9/28/1998 Unknown
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging? Yes No

Attached supporting documentation:

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

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.

Indicate depths or elevations

A. Bottom of distribution media	3'
B. Periodically saturated soil/bedrock	6'
C. System separation	3'
D. Required compliance separation*	3'

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

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

Describe verification methods and results:

Upgrade requirements: (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

JOB ROBERT STRAUS
LOT 10, BLK 2, ST. CROIX VISTA
WEST LAKELAND

BORING LOG

DATE 5-20-78

BOREHOLE DIAMETER 4"-3 1/2" HAND AUGER

DEPTH FEET	HOLE #1	HOLE #2	HOLE #3	HOLE #4	HOLE #5	HOLE #6
1	TOP SOIL	TOP SOIL	TOP SOIL	TOP SOIL	TOP SOIL	TOP SOIL
2	BROWN, SANDY LOAM	BROWN LOAM BROWN, SANDY LOAM	BROWN LOAM	BROWN LOAM	BROWN, SANDY LOAM	BROWN LOAM
3			BROWN, SANDY LOAM		BROWN, FINE TO MEDIUM SAND	
4	BROWN, MEDIUM TO COARSE SAND WITH GRAVEL		BROWN, MEDIUM SAND	BROWN, SANDY LOAM		
5		OBSTRUCTION STOP				
6	REDDISH BROWN, SANDY LOAM		BROWN, SANDY LOAM	BROWN, MEDIUM SAND	BROWN, FINE TO MEDIUM SAND WITH LOAM LAYERS	BROWN, SANDY LOAM
7	STOP OKAY 6'6"	OKAY 5'	STOP	STOP	STOP	STOP
8	SOIL CLASSIFICATION					
9	BROWN LOAM - 7.5 YR 1/4		OKAY 7'	OKAY 7'	OKAY 6'	OKAY 6'6"
10	REDDISH BROWN LOAM 3.5 YR 3/4					



STANDARD SYSTEM DESIGN INDIVIDUAL SEWAGE TREATMENT SYSTEM

WASHINGTON COUNTY HEALTH, ENVIRONMENT & LAND MANAGEMENT
14900 N. 61ST STREET, P.O. BOX 3803, STILLWATER, MN 55082-3803
612/430-6708 OR 612/430-6656 FAX 612/430-6730

Owner's Name	ROBERT STRAUS
Job Site Address	LOT 10 BLOCK 2 PARIS AVE. CT. ST. CROIX VISTA
City or Township	WEST LAKE LAND TOWNSHIP
Use of Building	HOME 4-BEDROOMS

Design Flow Rate	600 GAL PER DAY	Perc Rate	20 API	Land Slope	3	Percent
Two Required Tank Sizes	1000 Gallons	1000 Gallons	Lift Station Tank Size		Gallons	
Type of System (standard, at grade or bed)	STANDARD					
System Size:	1200	-Square Feet	400	-Lineal Feet	36"	-Trench Width
Depth of rock below pipe	12"		Depth of Rock Above Pipe	2"		
MINimum Depth of Trench From Existing Grade	30		Inches	MAXimum Depth of Trench From Existing Grade	36	
				Inches		
Recommended Number of Trenches	4		Recommended Length of Trenches	100 FT		
Trench Spacing Measured Center to Center				7		
				Feet		
Any Other Special Conditions						

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	DALE EKLIN	PCA Certification #	695
Address	1986 RIDGEWOOD AVE WHITE BEAR LAKE MN 55110	Phone #	429-1090
Signature		Date	5-22-1998

2

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



SOIL REVIEW/SEPTIC PERMIT APPLICATION

RECEIVED

MAY 26 1998

HELM

Washington County Health, Environment & Land Management
14900 61st Street N., P.O. Box 3803
Stillwater, MN 55082-3803

612/430-6708 or 612/430-6656 FAX 612/430-6730

1080 Paris Ave Ct N

FEE _____

Receipt # _____

Make checks payable to WASHINGTON COUNTY TREASURER

\$150 - Application Fee (site review)

\$25 - Additional Review Fee (1 hour minimum)

\$100 base fee, plus \$50 per lot - Subdivision Fee

\$150 - New Drainfield System Permit Fee

\$70 - Replacement Drainfield System Permit Fee

\$250 - New Mound System Permit Fee

\$170 - Replacement Mound System Permit Fee

10017-98041

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

Geo: 27-029-20-33-0006

LOT 10 BLOCK 2 PARIS AVE. CT. ST. CROIX VISTA WEST LAKELAND TOWNSHIP

Applicant CORNERSTONE HOME BLDG. Address City State Zip Phone
ROBERT STRAUS 3299 139TH LANE. N.W. ANDOVER MN 55304 427-7203

Owner (if different from applicant) Address City State Zip Phone
mobile 701-5595 off 427-7667

New Home Existing Home _____ New Business _____ Existing Business _____ Number Of Bedrooms: 4 Gallons Per Day: 600

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

New Drainfield System New Mound System _____ Replacement Drainfield System _____ Replacement Mound System _____ Permit Renewal _____
Approval Only _____ If this site has been 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 the Washington County Building Official or his agent, 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 the Building Official or his agent for the purpose of performing inspections required and that no part of the system shall be covered until it has been inspected and accepted. 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 Building Official that the installation is ready for inspection.

In connection with your request for a soil review/septic permit, you are hereby giving us permission to enter upon your property during normal business hours for the purpose of determining the suitability of the location, which may include minor excavation or soil borings.

Cornerstone Home Builders Inc.

Robert Straus

Signature of Applicant (Owner or Builder)

5/26/98

Date

THE AREA BELOW IS FOR COUNTY USE ONLY

SITE EVALUATION: BY INSPECTOR RGA DATE _____

Setbacks:	Required (circle appropriate item(s))					Actual
	50'	75'	100'	150'		
Well (including adjacent property)						
Wetland, Pond, Lake, Stream, River, or Bluffing						

CONCLUSIONS: Site Suitable: _____ Site Unsuitable: _____ Additional Tests Required: _____ Verify Use: _____ Bedrooms: _____

NOTES: Lot Size _____ Year Built _____

Loamy sand

#2

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If You Need Assistance Due to Disability or Language Barrier, Please Call 430-6656 OR 430-6708 (TDD 439-3220).



WASHINGTON COUNTY, MINNESOTA

Department of Health, Environment,
and Land Management 612/430-6708

WEST LAKELAND TOWNSHIP

PERMIT NUMBER 001798041 SEWAGE PERMIT

Owner : ROBERT STRAUS CORNERSTONE HOME BLD
5289 139TH LN NW

ANDOVER MN 55304

Applicant : ROBERT STRAUS CORNERSTONE HOME BLD 612-427-7203

NEW DRAINFIELD PERMIT	150.00
SEPTIC APPLICATION/SOIL REVIEW	150.00
Total Fees :	300.00
Total Paid :	.00
Total Due :	300.00

PERMISSION IS HEREBY GRANTED

To execute the work specified in this permit on the following described property upon express condition that said persons and their agents, employees and workmen shall conform in all respects to the provisions of the Building Code, and/or Ordinances.

This permit may be revoked at any time upon the violation of any of the provisions of said code and ordinances.

Project Address : 1080 PARIS AVE CT W STILLWATER MN 55082
 Legal Description: LOT 010 BLOCK 002 ST CROIX VISTA Gao : 27-029-20-33-0006
 Flow Capacity 600 Gal/Day Tank Volume 2000
 Soil Conditions: Depth to Restriction 72 Inches Perc Rate 21 Min/Inch

Soil Treatment Type:

Bottom Area 1200 Rock Depth 12

Authorized Work / Special Conditions

- Install individual sewage treatment system as per approved design in area tested and shown on site plan.

** Permit Expiration Date : Sewage Treatment : 1998-06-02

A CERTIFICATE OF OCCUPANCY MUST BE REQUESTED AND ISSUED PRIOR TO USE OR OCCUPANCY OF WORK PERMITTED BY A BUILDING PERMIT.

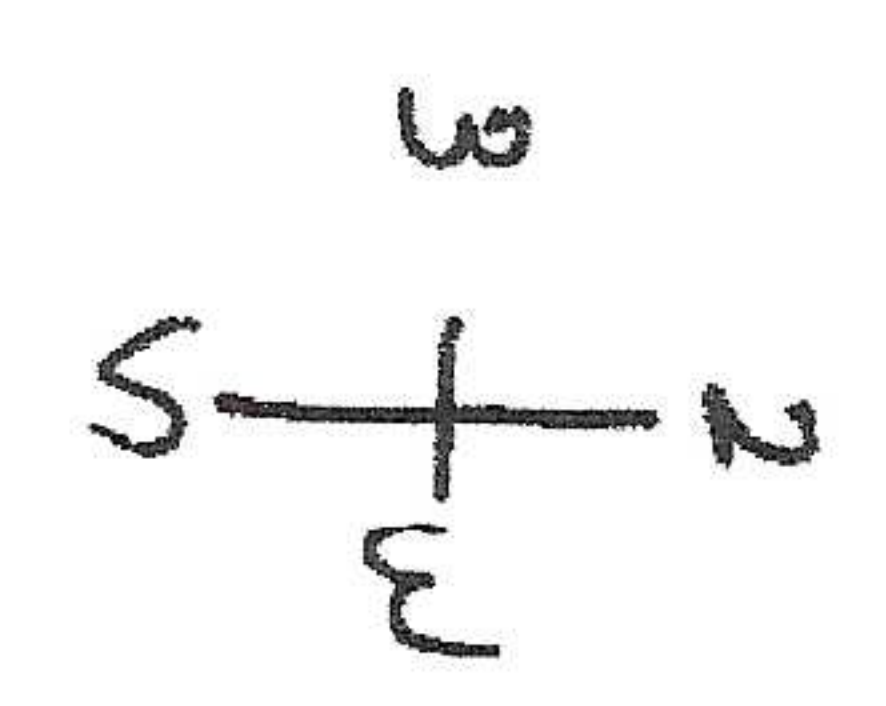
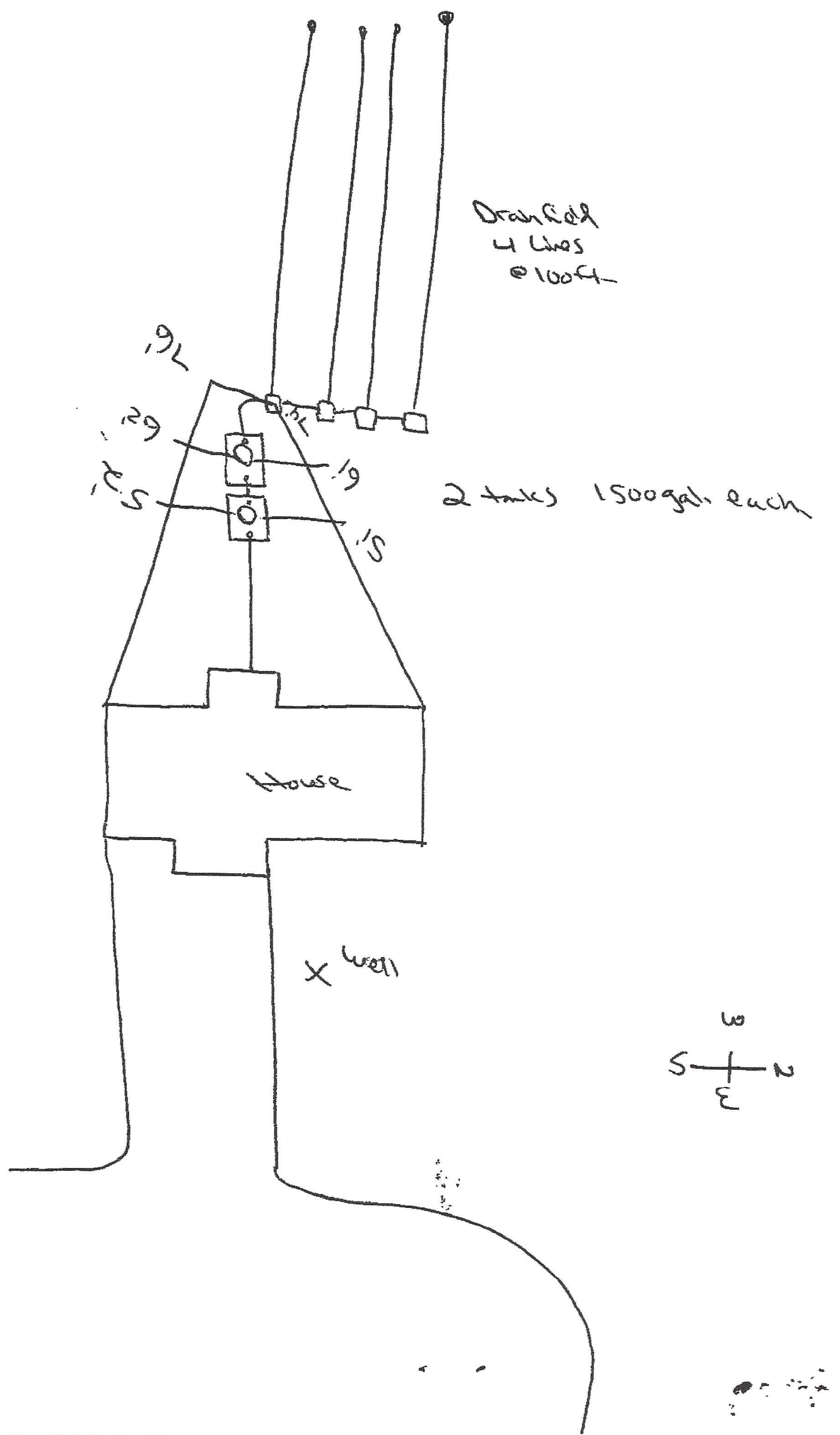
** This permit shall expire and be null and void if the work authorized by the Building Permit is not commenced within 60 days of the date of issuance or if work is abandoned or suspended for a period of 120 days. Term of the Building Permit is 12 months from date of issue. Term of sewage treatment permit is 12 months from date of issue.

Penalty for violation of any of the provisions of building code: Fine not to exceed five hundred dollars (\$500.00) or imprisonment for not more than ninety (90) days, or both.

Permit Issue Date 1995-06-02 Code Enforcement Officer

Phanuel

0017-98041



SS Septic Solutions, LLC additional terms and information.

1. SS Septic Solutions, LLC has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period beyond the inspection date. Due to numerous factors (usage, maintenance, tank pumping, soil characteristics, previous failures, etc.) which may affect the proper operation of a septic system. The report shall not be construed as a warranty that the system will properly function for any period.
2. Minimum compliance inspection requirements relative to this inspection and this report include only verification that the septic system has a watertight septic tank(s) and lift tank, the required separation from the bottom of the drain field/mound distribution medium and saturated soils, no backup of sewage into the dwelling and no discharge of sewage onto the ground surface or surface water. SS Septic Solutions, LLC does not inspect basement sewage ejector pumps or exterior lift pumps as they are a maintenance item. Sewage backup verification is limited to the information supplied by the last occupants/owner if available. I cannot guarantee that the information given to me is accurate. Some people may attempt to hide or conceal signs of previous backups.
3. Certification of this system does not warranty any future use beyond the date of inspection. Any system, new or old, can be hydraulically overloaded because of more people moving into the house than were previously occupying it, improper maintenance, heavy usage, tree roots, freezing conditions, or surface drainage problems. The system could simply stop working due to age.
4. A compliance inspection is not meant to be a test of the longevity of the septic system. The inspection is strictly for the purpose of determining if the septic is polluting the environment at the date and time the inspection is performed. The inspection is not intended to determine if the system was originally designed or installed to past or present MPCA or local unit of government code requirements.
5. Winter Work – Client understands that inspections conducted in winter weather conditions are more difficult to perform due to snow cover and frost. Septic system components like tanks, tank covers, drop boxes and soil treatment areas are more difficult to locate in these conditions. Soil borings and drain field locations are also more difficult to perform due to ground frost. The client needs to understand that due to the weather conditions, the same level of standards may not be possible compared to an inspection during the spring/summer/fall months.
6. If hired to perform the compliance inspection, the client hereby agrees that SS Septic Solutions, LLC will not be responsible for any monetary damages, claims or causes of action including attorney fees arising from the performance of this inspection.
7. Nothing other than gray water (laundry, showers, etc.) human waste and toilet tissue should be disposed of into the septic tanks. Garbage disposals are not recommended. Smaller amounts of laundry, soaps, dish soap, cleaning agents, etc. are better for the system. Antibacterial soaps and chlorine agents may kill the bacteria needed to treat effluent properly. Additives are not recommended and may be harmful to your system. Recommend to pump and clean your tanks by a certified pumper every other year if you have 1 tank and every 2-3 years if you have a 2-tank system to ensure proper maintenance.