ZIERKE SOIL TESTING

Anita Olson 17205 May Ave N Marine on St Croix, MN 55047

7/18/2024

Dear Anita Olson,

At your 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 <u>compliant</u>. 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

MPCA Lic 119, Cert 9594

Berjamin Zierke

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)

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

Doc Type: Compliance and Enforcement

Instructions: Inspector must submit completed form to Local Governmental Unit (LGU) and system owner within 15 days of final determination of compliance or noncompliance. Instructions for filling out this form are located on the Minnesota Pollution Control Agency (MPCA) website at https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf.

Property information	Local tracking number:			
Parcel ID# or Sec/Twp/Range: 0403120330002	Reason for Inspection Sale			
Local regulatory authority info: Washington County				
Property address: 17205 May Ave N Marine on St Croix, MN 5	5047			
Owner/representative: Anita Olson	Owner's phone: 651-433-3904			
Brief system description: (2) pre-cast septic tanks, pre-cast lift ta	ank, mound dispersal system			
System status				
System status on date (mm/dd/yyyy): _7/18/2024				
☐ Compliant – Certificate of compliance*	☐ Noncompliant – Notice of noncompliance			
(Valid for 3 years from report date unless evidence of an imminent threat to public health or safety requiring removal and	Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.			
abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.) *Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.	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 applicab	ole)			
☐ Impact on public health (Compliance component #1)) – Imminent threat to public health and safety			
☐ Tank integrity (Compliance component #2) – Failing	•			
☐ Other Compliance Conditions (Compliance components)	•			
Other Compliance Conditions (Compliance components)				
-	2500 (Compliance component #3) – Failing to protect groundwater			
Soil separation (Compliance component #5) – Failin				
· · · · · · · · · · · · · · · · · · ·	mpliance component #4) – Noncompliant - local ordinance applies			
Comments or recommendations	M. H			
No issues observed with system during site visit 7/17/202	4. Homeowner reported no issues with the system.			
Certification				
	to determine the compliance status of this system. No determination of wn conditions during system construction, possible abuse of the system,			
By typing my name below , I certify the above statements to be true used for the purpose of processing this form.	and correct, to the best of my knowledge, and that this information can be			
Business name: Zierke Soil Testing	Certification number: 9594			
Inspector signature: Bergamin Werker	License number: 119			
(This document has been electronically sign	ned) Phone: 651-249-1346			
Necessary or locally required supporting do	cumentation (must be attached)			
☐ Soil observation logs ☐ System/As-Built ☐ Locally re	equired forms			
Other information (list): Permit				

Compliance criteria:		Attached supporting documentation:	
System discharges sewage to the ground surface	☐ Yes* ⊠ No	☐ Other: ☐ Not applicable	
System discharges sewage to drain tile or surface waters.	☐ Yes* ⊠ No	-	
System causes sewage backup into dwelling or establishment.	☐ Yes* ⊠ No	_	
Any "yes" answer above indicates imminent threat to public health an		_	
Describe verification methods and	results:		
None of the above observed.			
nk integrity – Compliance	component #2	of 5	
nk integrity – Compliance	component #2		
nk integrity – Compliance Compliance criteria:	component #2	of 5 Attached supporting documentation:	
Compliance criteria: System consists of a seepage pit,	component #2		
Compliance criteria:	·	Attached supporting documentation:	Olson's
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit? Sewage tank(s) leak below their	·	Attached supporting documentation: Empty tank(s) viewed by inspector	Olson's
Compliance criteria: System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	☐ Yes* ☑ No	Attached supporting documentation: Empty tank(s) viewed by inspector Name of maintenance business:	Olson's
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Pı	Property Address: 17205 May Ave N Marine on St Croix, MN 55047	
В	Business Name: Zierke Soil Testing	Date: 7/18/2024
3.	Other compliance conditions – Compliance component #3 of 5	
	3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unse	cured?
	☐ Yes* ☑ No ☐ Unknown	
	3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety	y? ☐ 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*
	3d. System not abandoned in accordance with Minn. R. 7080.2500?	☐ Yes*
	*Yes to 3c or 3d - System is failing to protect groundwater.	
	Describe verification methods and results:	
	Attached supporting documentation: ☐ Not applicable	
	•	
_		65.57
4.	Operating permit and nitrogen BMP* – Compliance component #4 o	f 5 ⊠ Not applicable
<u>4.</u>	Operating permit and nitrogen BMP* – Compliance component #4 o	f 5 Not applicable If "yes", A below is required
<u>4.</u>	Operating permit and nitrogen BMP* – Compliance component #4 o	If "yes", A below is required
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4.	Operating permit and nitrogen BMP* – Compliance component #4 o Is the system operated under an Operating Permit?	If "yes", A below is required If "yes", B below is required
4.	Operating permit and nitrogen BMP* – Compliance component #4 or Is the system operated under an Operating Permit? Is the system required to employ a Nitrogen BMP specified in the system design? BMP = Best Management Practice(s) specified in the system design If the answer to both questions is "no", this section does not need to be completed.	If "yes", A below is required If "yes", B below is required
4.	Operating permit and nitrogen BMP* — Compliance component #4 or Is the system operated under an Operating Permit? Is the system required to employ a Nitrogen BMP specified in the system design? BMP = Best Management Practice(s) specified in the system design If the answer to both questions is "no", this section does not need to be completed Compliance criteria:	If "yes", A below is required If "yes", B below is required
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https://www.pca.state.mn.us wq-wwists4-31b • 4/28/2021

siness Name: Zierke	Soil Testing			Date: _	7/18/2024	
Soil separation	– Compliance cor	mponer	nt #5 o	f 5		
Date of installation	1994 (mm/dd/yyyy)	_ 🗌 Unkno	own			
Shoreland/Wellhead protection/Food beverage lodging?		⊠ Yes	□No	Attached supporting documentation: ☐ Soil observation logs completed for the report		
Compliance criteria	a (select one):			☐ Two previous verifications of required vertical separat		
	rior to April 1, 1996, and	☐ Yes	☐ No*	☐ Not applicable (No soil treatment are	a)	
not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:						
Drainfield has at lea separation distance saturated soil or be						
5b. <i>Non-performance</i> s		⊠ Yes	☐ No*	Indicate depths or elevations		
April 1, 1996, or late	er or for non- ns located in Shoreland			A. Bottom of distribution media	100.7'	
or Wellhead Protec	tion Areas or serving a			B. Periodically saturated soil/bedrock	97.5'	
	lodging establishment:			C. System separation	3.2'	
Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*				D. Required compliance separation*	3.0'	
				*May be reduced up to 15 percent if all Ordinance.	owed by Local	
systems built under Type IV or V syster Rules 7080. 2350 c (Intermediate Inspe 2,500 gallons per d	ns built under 2008	☐ Yes	□ No*			
Drainfield meets the separation distance saturated soil or be	e from periodically					

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

800-657-3864



Logs of Soil Borings

Location of Project: 17205 May Ave N Marine on St Croix, MN 55047

Borings Made by Ben Zierke Date: 7/17/2024

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

Depth, in Inches	Boring Number 1	Depth, in Inches	Boring Number 2
0 0-14"	10YR 3/3 fine sandy loam	0	
14-20"	10YR 4/3 fine sandy loam		
20-30"	10YR 4/4 fine sandy loam		
30-40"	7.5YR 4/6 silt loam, bands of 10YR 4/3 fine sandy loam, 7.5YR 5/8 and 10YR 6/1 redox		
End of boring at Standing water tal Present at Standing water not p Mottled Soil: Observed at Mottled soil not pre Comments:	feet of depth Hours after boring present in hole 2.5 feet of depth	End of boring at Standing water tal Present at Standing water not Mottled Soil: Observed at Mottled soil not pre Comments:	feet of depth Hours after boring present in hole feet of depth
Depth, in Inches	Boring Number 3	Depth, in Inches	Boring Number 4
OEnd of boring at	feet	O End of boring at	feet
Standing water tab Present at Standing water not p Mottled Soil: Observed at Mottled soil not pre Comments:	feet of depth Hours after boring present in hole feet of depth	Standing water tal Present at Standing water not Mottled Soil: Observed at Mottled soil not pre Comments:	feet of depth Hours after boring present in hole feet of depth

SOIL REVIEW/SEPTIC PERMIT APPLICATION Washington County Health, Environment & Land Management 14900 61st Street N., P.O. Box 3803 Stillwater, MN 55082-3803 FEE 25.00

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

FEE 25.00 Throwall

.HELM

FOR COUNTY USE ONLY

\$100 - Application Fee (site review) \$25 - Additional Review Fee (1 hot \$100 - Drainfield System Permit Fee \$100 base fee, plus \$50 per lot - \$4	RER	72-94-024	
\$100 - Drainfield System Permit Fee \$100 base fee, plus \$50 per lot - St \$150 - Mound System Permit Fee \$35 - Veneual of the	ibdivision Fee		
Level Description and Parcel Identification Number		89004-245	<u>-</u>
NW12-5W14-5W14 54 geo: 04-31 - 20 Applicant Address	City	State Zip Phone	
HARLAN G. OLSON 17205 MAY	AVE. N. MARIN		
Owner (if different from applicant) Address	City	State Zip Phone 433-378	
Use of Building: DWELLING Number of Bedn		Gallons Per Day:	
Check the following fixture(s) which are or will be installed: Garbage Disposal_		hing Facility: (jacuzzi, hot tub, etc.)	
New System Approval Only Previously Approved Denied If this site has been previously approved, please attach a copy			
The following exhibits are required as part of this application and shall be attached showing location of buildings, lot lines, percolation test holes, soil boring holes, pro (1) copy of the Final Building Plan. The house and the drainfield areas must be still	oposed location of system and we	ili; two (2) copies of the System Design; and one	æ
AGREEMENT: The undersigned hereby makes Application for Permit to Install can thall be done in strict accordance with ordinances and regulations of the County of	or Extend Sewage Treatment Syst	em herein specified, agreeing that all such work	
submitted herewith, and which are reviewed by the Washington County Building O	fficial or his agent, together with	any requirement and/or restriction made necessa	ary
by conditions peculiar to a particular location, shall become a part of the permit. A Official or his agent for the purpose of performing inspections required and that no	pplicant further agrees to provide part of the system shall be cover	e access, at reasonable times, to the Building ed until it has been inspected and accepted.	
APPLICATION IS FOR AN INSTALLATION AT A SPECIFIC LOCATION; AN PERMIT. It shall be the responsibility of the applicant for the permit to notify the	Y DEVIATION FROM THE AP	PROVED LOCATION WILL VOID THE	
PERMIT. It shall be the responsibility of the approximation the permit to notify the	Office of the Bullding Official a	/ usualados is icady for appearon.	- 1
$A_0 A_0 A_1 A_2 A_3 A_4 A_4 A_5 A_5 A_5 A_5 A_5 A_5 A_5 A_5 A_5 A_5$	5/5	-/91/	- 11
	~ / /	/_/.7:	
Signature of Applicant (Owner or Builder)		Date	
	USE ONLY	Date	
	**************************************	Date DATE	
REVIEWS: PLANNER INSPE	CTOR		
REVIEWS: PLANNER INSPE	CTOR		
REVIEWS: PLANNER INSPE SITE EVALUATION: Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table	CTOR		
REVIEWS: PLANNER INSPE SITE EVALUATION: Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table Scils Map Data:	CTOR	er or Bedrock:	
REVIEWS: PLANNER INSPE SITE EVALUATION: Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table	e (Motuled Soil), Impervious Laye Feroolation Test Evaluation: Required [circle appro	er or Bedrock:	
FOR: OFFICE REVIEWS: PLANNER INSPE SITE EVALUATION: Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table Soils Map Data: Setlacks:	CTOR	er or Bedrock: priste item(s)] Actual	
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		6	2001	761	RECEIVED
	APPLICATION FOR PERMIT TO INSTAL	L SEWAGE	TREATMENT	SYSTEM	JUN 18 1992
100	· "95.00 (Days)				
rap Pat	plication fee - 115.00 Fall		Vashingto	a County Flandin	4 PUBLIO HEALTH
	ittionsi Seviews - 125.00/hr. [hr. min.]		Stillwate	lst Street Horts r, NN 55082	, P. O. Bux 6 (612) 779-5444
i	Legai Description and Farcel Identification Mumber	MINO TE	e Die		(012) 113-3111
•	1		31-20-3		
ž	The N's of the SW's of the SW's, Section 4, May		PID#-89004-	2455	
	1/444 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		lity	Zip	Phone
	HARLAN G. OLEON 17205 MAY AU	E.N.,	MARINE	55047	433~398
3	Owner (if different from Applicant) Hailing Address	ť	icy	Zip	Paone
	Harlan Olson 17205 May Avenue N.	., Marine	-on-St.Croi	x,MN. 55047	433-3984
4	Use of Building: residential Number of	Bedrocus o	r Gallons Per D	3(450)	
	coeca the torioxing flatures union are or will be installed:				
	Garbage Disposal Recreational Bathing Fa	Cility (Jac)	ussi, hot tub, i	etc.)	
5	Type of Work:NewAlteration	х	<u> </u>	Арр	roval Unly
ő	Has site previously been reviewed by Washington County?	No		Tes	
	(if previously approved, attack letter of approval)		Appro		Denied •
The	following exhibits are required as part of this application and	shall be at:	tached harato:	Danadati S	
	me nate: need tran atoad to zoste zoomile location of billuluse	lot lines	Reportation to		
21	have receive or system and Mell: 7 Cobies of Eye 24254 Decision	SAC L CARY	of the Tinal Co	.:13:a4 Bl	
126	drainfield areas aust be stated. Improper or inadequate test or	information	n will result in	delays in proce	ssing.
Agre	elent: The undersigned hereby makes Application for Permit to i	nstall or Ru	rtend Sewage Tre	ataant Suntan L	:-
	retrant egreeting roof sit sach hold egsil be doub in etrict secon	deaca with a	zpdimomma - esi -		
	'enserre manufausa, applicant arres coat the bite bine. States	t sad lineien		and the second court of	
-, -	""" """" I BE TO BE TO THE POLICIES OF THE BEAUTY OF THE REPORT OF THE PROPERTY OF THE PROPERT	IN INT PARIL			
****	itions peculiar to a particular location, shall become a part of ss, at reasonable times, to the Building Official or his agent for the same of the content	tha marmir	Inalianat fun	Man agains t	• •
	kere er ene slater adgit de coheted hutil le bae book lusuev	PAR SAR SARA	tetad laaliaak	: :- P	
	<u></u>	A14)			
2501	some tor one hetare to notify the office of the antiging Official	al that the	installation is	ready for inspe	ction.
	6/13:/92 Harlan	n L	100 in	_	
	Date		e of Applicant		
FOR	OFFICE USE ONLY:			·	
	ews: Planner:Inspector	Cours	<i>[</i>	Date: 7-	1-92
Site	Evaluation:	<u> </u>			
	Soil Boring Evaluation: Depth of Water Table, Seasonal Water Ta	ible (Mottle	d Soil}, Imperv	ious Layer or Be	irock:
	Soils Map Data: Percolation	Test Evalu	ation:		
	perdacks:		ed (circle)		Actual
	Wellad Band table 50)' 75'	100' 150		7
C 1	Vetland, Pond, Lake, Stream, River, or Bluffline 20)' (0'	75' 100	' 150'	

Additional Tests Eequired:

7.50 acres suit 1960

Open pustin - notth soil at about 432"

Min 18" soul buse munt

Verily Use:

Conclusions:

Site Juitable: Site Unsuitable: William Site Unsuitable: Duil