Ed Eklin Septic System Design

2303 County Road F East · White Bear Lake, MN 55110
651-485-2300
zeklins@gmail.com

September 22, 2024

Paul Yokanovich
4872 Pinecroft Ave. N
Stillwater, MN 55082

Dear Paul:

At your request, a sewage treatment system compliance inspection was performed at the property located at 4872 Pinecroft Ave. N, Stillwater, MN. (Baytown Township), for your existing subsurface sewage treatment system.

I was hired by you to design a new sewage treatment system because it failed an inspection performed by another party due to soil separation. I had performed two soil borings, one on each end of the drain field and found no signs of a seasonal water table.

The inspecting party and I met onsite to review the soils together. We disagreed on the soil conditions and status of the drain field.

If you have any questions or concerns, please feel free to call me. I would be glad to help.

Sincerely,

Ed Eklin

MINNESOTA POLLUTION CONTROL AGENCY
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.

Property information

Local tracking number:

Parcel ID# or Sec/Twp/Range: 1002920220021 Reason for Inspection Home sale

Local regulatory authority info: Washington County

Property address: 4872 Pinecroft Ave. N, Stillwater, MN 55082

Owner/representative: Paul Yokanovich Owner's phone: 651-204-3416

Brief system description: Two septic tanks, a pump tank and drainfield trenches

System status

System status on date (mm/dd/yyyy): 9/22/2024

☒ **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: Ed Eklin septic system design Certification number: 3268

Inspector signature: Ed Eklin License number: 3321

(This document has been electronically signed) Phone: 651-485-2300

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: 4872 Pinecroft Ave. N, Stillwater, MN 55082

Business Name: Ed Eklin septic system design Date: 9/22/2024

1. Impact on public health – Compliance component #1 of 5

Compliance criteria:	
System discharges sewage to the ground surface	☐ Yes* ☒ No
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 the system is an imminent threat to public health and safety.

Describe verification methods and results:

Attached supporting documentation:

☐ Other:

☐ Not applicable

2. Tank integrity – Compliance component #2 of 5

Compliance criteria:	
System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	☐ Yes* ☒ No
Sewage tank(s) leak below their designed operating depth?	☐ Yes* ☐ No
If yes, which sewage tank(s) leaks:	

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

Describe verification methods and results:

Attached supporting documentation:

☐ Empty tank(s) viewed by inspector

Name of maintenance business:

License number of maintenance business:

Date of maintenance:

☐ Existing tank integrity assessment (Attach)

Date of maintenance (mm/dd/yyyy): (must be within three years)

(See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))

☐ Tank is Noncompliant (pumping not necessary – explain below)

☐ Other:

3. Other compliance conditions – Compliance component #3 of 5

3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?
☐ Yes* ☒ No ☐ Unknown

3b. Other issues *(electrical hazards, etc.)* to immediately and adversely impact public health or safety? ☐ Yes* ☒ No ☐ Unknown

Yes to 3a or 3b - System is an imminent threat to public health and safety.

3c. System is non-protective of ground water for other conditions as determined by inspector? ☐ Yes* ☒ No

3d. System not abandoned in accordance with Minn. R. 7080.2500? ☐ Yes* ☒ No

***Yes to 3c or 3d - System is failing to protect groundwater**.*

Describe verification methods and results:

Attached supporting documentation: ☒ Not applicable ☐ _____

4. Operating permit and nitrogen BMP* – Compliance component #4 of 5 ☐ Not applicable

Is the system operated under an Operating Permit? ☐ Yes ☐ No **If "yes", A below is required**

Is the system required to employ a Nitrogen BMP specified in the system design? ☐ Yes ☐ No **If "yes", B below is required**

BMP = Best Management Practice(s) specified in the system design

If the answer to both questions is "no", this section does not need to be completed.

Compliance criteria:

a. Have the operating permit requirements been met? ☐ Yes ☐ No

b. Is the required nitrogen BMP in place and properly functioning? ☐ Yes ☐ No

Any "no" answer indicates noncompliance.

Describe verification methods and results:

Attached supporting documentation: ☐ Operating permit (Attach) ☐

Property Address: 4872 Pinecroft Ave. N, Stillwater, MN 55082

Business Name: Ed Eklin septic system design Date: 9/22/2024

5. Soil separation – Compliance component #5 of 5

Date of installation 2004 ☐ 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:* Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.	☐ Yes ☐ No*
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*
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*

Indicate depths or elevations

A. Bottom of distribution media	30"
B. Periodically saturated soil/bedrock	>66"
C. System separation	36"
D. Required compliance separation*	66"

*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.*

University of Minnesota Onsite Sewage Treatment Program

Soil Observation Log

Project ID:

v 04.02.2024

Client: Location / Address:

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

Landscape Position:	Back/Side Slope	Slope %:	Slope shape:	Flooding/Run-On potential:	No
Vegetation:	Forest	Soil survey map units:		Surface Elevation-Relative to benchmark:	
Date/Time of Day/Weather Conditions:		8/21/2024	9:20 AM	sunny	Limiting Layer Elevation:
Observation #/Location:	BH1			Observation Type:	Auger

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	I-------- Structure----------I		
							Shape	Grade	Consistence
0-12	Fine Sandy Loam		10YR 3/1				Blocky	Moderate	Friable
			10YR 3/2						
12-24	Fine Sandy Loam		10YR 4/4				Blocky	Moderate	Friable
24-48	Silt Loam		10YR 5/4				Blocky	Moderate	Firm
			10YR 4/4						
48-66	Coarse Sand	20	7.5YR 5/3				Single grain	Structureless	Loose

Comments: Okay 5' 6"

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

Ed Eklin	Ed Eklin	3321	9/22/2024
(Designer/Inspector)	(Signature)	(License #)	(Date)

Optional Verification: I hereby certify that this soil observation was verified according to Minn. R. 7082.0500 subp. 3 A. The signature below represents an infield verification of the periodically saturated soil or bedrock at the proposed soil treatment and dispersal site.

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

Soil Observation Log

Project ID: v 04.02.2024

Client: Location / Address:

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

Landscape Position:	Back/Side Slope	Slope %:		Slope shape:		Flooding/Run-On potential:	No
Vegetation:	Forest	Soil survey map units:				Surface Elevation-Relative to benchmark:	
Date/Time of Day/Weather Conditions:	8/21/2024	9:40 AM	sunny			Limiting Layer Elevation:	
Observation #/Location:	BH2					Observation Type:	Auger

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Structure: Shape	Structure: Grade	Structure: Consistence
0-12	Silt Loam		10YR 3/1				Blocky	Moderate	Firm
12-43	Silt Loam		10YR 4/4				Blocky	Moderate	Firm

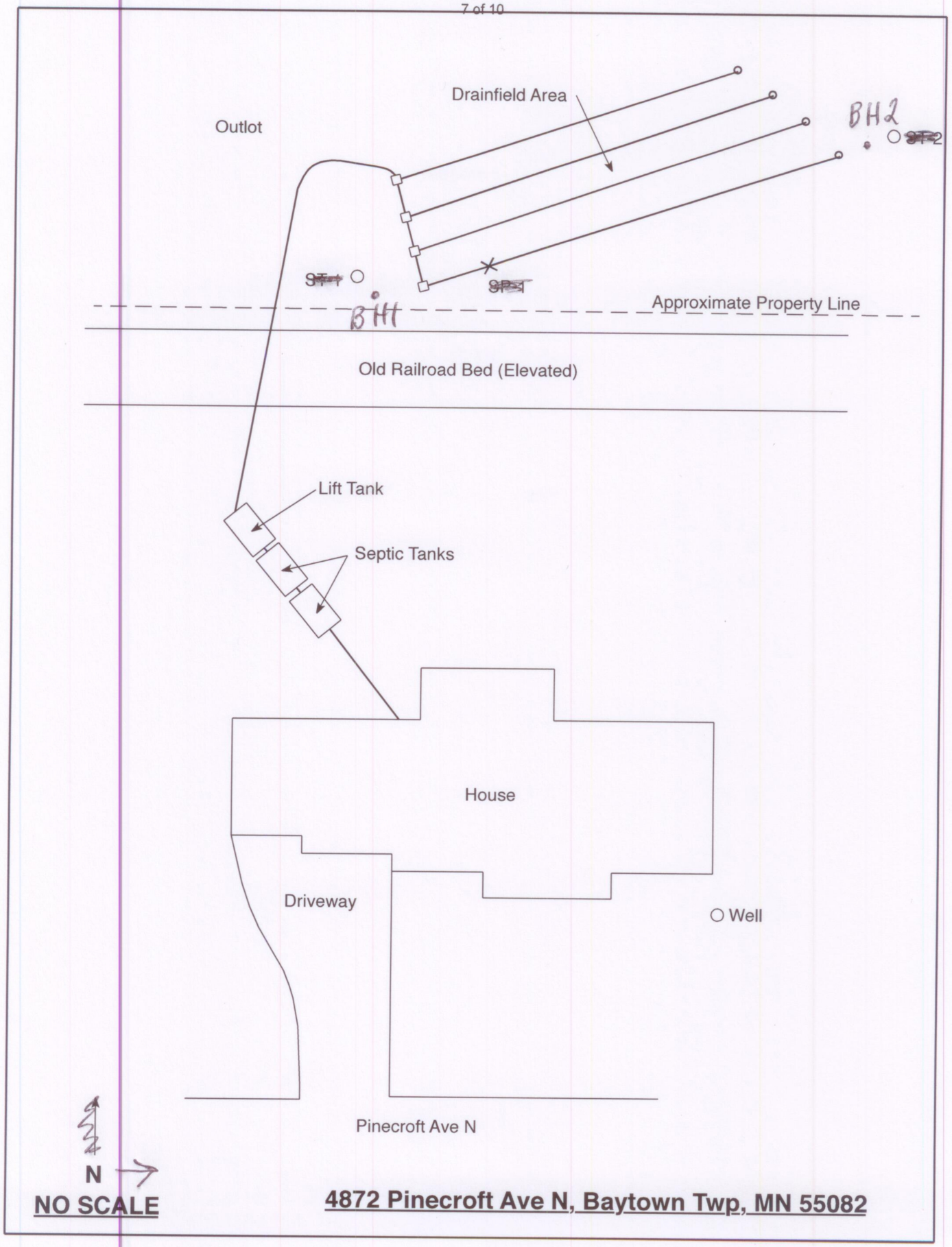
Comments: Okay 43"--obstruction

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

Ed Eklin	Ed Eklin	3321	9/22/2024
(Designer/Inspector)	(Signature)	(License #)	(Date)

Optional Verification: I hereby certify that this soil observation was verified according to Minn. R. 7082.0500 subp. 3 A. The signature below represents an infield verification of the periodically saturated soil or bedrock at the proposed soil treatment and dispersal site.

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



4872 Pinecroft Ave N, Baytown Twp, MN 55082

Washington County

Department of Public Health and Environment
14949 62nd Street North PO Box 6
Stillwater MN 55082-0006
Office: 651-430-6655 TTY: 651-430-6246 Fax: 651-430-6730

Review Fee:	$205.00
Permit Fee:	$215.00
Total Fee:	**$420.00**
Previous Payment	$420.00
Balance Due	$0.00

Scanned 8/11/08 BM

0002-04-20

Community: Baytown Township
Permit Number: 0002-04-20
Owner: Paul Yokanovich
1781 CNTY RD B
Roseville MN 55113-
Applicant: Paul Yokanovich

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: 4872 Pinecroft AVE N
Geo Code: 10-029-20-22-0021
Designer: Eklin Soil Testing & Inspections, Inc.

Type of System: Standard Drainfield					Pressure Distribution
					N / A
Design Criteria		**Drainfield Sizing**			
Percolation Rate:	34	Square Feet:	1200		
Depth To Restriction:	66	Lineal:	400	Feet	
Land Slope:	15.00%	Depth Of Rock Below:	12	Inches	
Flow Rate:	600	Maximum Trench Depth:	30	Inches	
Number of Bedrooms:	4	Number Of Trenches:	5		
☐ Gravelless		Length Of Trenches:	80	Feet	
☐ Chambered		Spacing Of Trenches:	7	Feet	
Tank Sizes					
Tank 1: 1000	Tank 2: 1000	Tank 3: 0	Lift Station: 1000		

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. Minimize number of trees cut down to install system.
4. Minimum 50 feet from septic tank/drainfield to well.
5. Rock only. No chambers. No gravelless.
6. Rope off and protect tested area from all vehicle traffic.
7. System cannot be installed if frozen at trench depth.
8. 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.)

Permit Issue Date: 10/27/2004
Permit Expiration Date: 10/27/2005

Christopher W. LeClair, REHS
Senior Environmental Specialist

Washington County

Department of Public Health and Environment

Individual Sewage Treatment System Inspection Form

Project Address:	4872 Pinecroft AVE N	**Application ID:**	0002-04-20
Community:	Baytown Township	**Geo Code:**	10-029-20-22-0021
Owner:	Paul Yokanovich	**Type of System:**	Standard Drainfield
Applicant:	Paul Yokanovich	**Designer:**	Eklin Soil Testing & Inspections, Inc.

Type of Installation: ☒ New ☐ Repair ☐ Replacement ☐ Other

Type of Inspection: ☐ Site Review ☐ Tank ☐ Rough-Up ☐ Treatment Area ☒ Final

Inspector: ☐ Pete Ganzel ☒ Chris LeClair ☐ Other

Inspection Dates: 18 Nov 2004

Number of Bedrooms: 4

Installer: Tom POWERS

Site Review

Date: _____ Conclusions:

☐ Soil Boring ☐ Site Suitable

☒ Soil Pit ☐ Site Unsuitable

Depth of Pit/Boring _____ ☐ Additional Tests Required

Comments _____

Mounds / At-Grade

☐ Mound ☐ At-Grade Absorption Area _____

Percent Slope _____ Sand Below Bed _____

Upslope Width _____ Rock Below Pipe _____

Downslope Width _____ Perf Size/Spacing _____

Sideslope Width _____ Pipe Size/Spacing _____

Pressure Bed Dimensions: Length _____ Width _____

Sewage / Holding Tanks

Tank 1 1000 ☒ New ☐ Existing

Tank 2 1000 ☒ New ☐ Existing

Baffle Type ☐ Plastic ☐ Fiberglass ☐ San-T ☐ Concrete

Pump Information

Lift Station Capacity 1000 Feet of Head _____

Horsepower/GPM _____ Size of Discharge Line: _____

Gallons Per Cycle _____ Type/Location or Alarm _____

Gallons Per Minute _____

Trenches, Bed or Gravelless Drainfield

☒ Drop Box ☐ Distribution Box ☒ Gravity ☐ Pump Trench ☐ Pressure Bed

☐ Serial ☐ Parallel ☐ Chambers ☐ Gravelless ☐ 8" ☐ 10"

	Trench Depth (in)	Trench Length (ft)
T1	20-30	100
T2	20-30	100
T3	20-30	100
T4	20-30	100
T5		

Trench Width: ☐ 24" ☒ 36" ☐ Other _____

Trench Spacing _____

Rock Below Pipe: ☐ 6" ☒ 12" ☐ 18" ☐ 24"

Pressure Bed Dimensions: Length _____ Width _____ Absorption Area 1200FT²

Setbacks

Building(s) to tanks	710
Building(s) to drainfield	720
Surface Water	N/A
Property Lines OUTLOT	N/A
Wells ☐ 50' ☐ 100'	

Pressure Test

Time _____ Time _____

PSI _____ PSI _____

Comments _____

Inspector

EKLIN SOIL TESTING AND INSPECTIONS, INC.

1986 Ridgewood Avenue
White Bear Lake, MN 55110
1-651-429-1090

NEW TEST SITE

Owner's Name	PAUL YOKANOVICH
Job Site Address	LOT 1 BLOCK 2 PINECROFT
City or Township	BAYTOWN TOWNSHIP TEST SITE AT OUT-LOT A
Use of Building	HOME - 4 BEDROOMS

Design Flow Rate 600 GAL PER DAY	Perc Rate 34 MPI	Land Slope 15 Percent
Two Required Tank Sizes 1000 Gallons	1000 Gallons	Lift Station Tank Size 1000 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 24 Inches		MAXimum Depth of Trench From Existing Grade 30 Inches
Recommended Number of Trenches 5		Recommended Length of Trenches 80 FT
Trench Spacing Measured Center to Center		7 Feet
Any Other Special Conditions	TANK LOCATIONS CAN VARY —	

DRAIN FIELD LOCATED AT OUT LOT A —
SOME SMALL TREES WILL HAVE TO BE
REMOVED FOR THE TRENCHES

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

Designer Name DALE EKLIN — STATE — 410
PCA Certification # 695
Address 1986 RIDGEWOOD AVE. WHITE BEAR LAKE MINN. 55110
Phone # 651-429-1090
Signature
Date 10-12-2004

SITE REVIEW and/or SEPTIC PERMIT APPLICATION

Washington County Public Health & Environment

14949 62nd Street N, PO Box 6, Stillwater, MN 55082-0006
651/430-6688 FAX 651/430-6730

RECEIVED
OCT 19 2004
PUBLIC HEALTH

Paid $ 420

Receipt # 319

0002-0420

Make checks payable to WASHINGTON COUNTY

- $215 - Drainfield System Permit
- $350 - Mound System Permit
- $350 - Alternative/Experimental System
- $ 85 - Additional Review Fee (1 hour minimum)
- $205 - Individual Lot
- $140 - Subdivision Soil/Site Review - Base fee Plus $65/lot
- $105 - Renewal of an Expired Permit

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

LOT 1 BLOCK 2 PINECROFT BAYTOWN TWSP. SEC 10 TW 29N RA. 20W

Applicant	Address	City	State	Zip	Phone
PAUL YOKANOVICH	1781 CO. RD. B.	ROSEVILLE	MN	55113	612-701-5040

Owner (if different from applicant)	Address	City	State	Zip	Phone

New Home ☐ Existing Home ☐ New Business ☐ Existing Business ☐ | Number Of Bedrooms: | Gallons Per Day:

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

New Home ⇨ Drainfield System ☒ Mound System ☐ Alternate/Experimental System ☐ Existing Permit Renewal ☐

Existing Home Replacement System ⇨ Drainfield System ☐ Mound System ☐ Tank Replacement Only ☐

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 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 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.

PAUL YOKANOVICH

BY _____

Signature of Applicant (Owner or Contractor) — Date: 10-12-2004

THE AREA BELOW IS FOR COUNTY USE ONLY

SITE EVALUATION BY INSPECTOR CWL DATE 26 OCT 2004

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 _____

BORING BY PI TO 30"
OBSTR. (ROCK) @ 30"

10 029 20220021
4872 PINECROFT AVE N.

Washington County

Department of Public Health and Environment
14949 62nd Street North PO Box 6
Stillwater MN 55082-0006
Office: 651-430-6655 – TTY: 651-430-6246 – Fax: 651-430-6730

Individual Sewage Treatment System
Certificate of Compliance

Type of System:	Standard Drainfield
Permit Number:	0002-04-20
Property ID Number:	10-029-20-22-0021
Property Address:	4872 Pinecroft AVE N
Community:	Baytown Township
Date of Installation:	November 18, 2004

This certifies that the individual sewage treatment system installed at the aforementioned address was inspected during installation and found to be in compliance with requirements of the Washington County Development Code, Chapter Four, Individual Sewage Treatment System Regulations (Washington County Ordinance No. 128). This Certificate of Compliance is valid for five (5) years from the date of issuance unless Washington County finds evidence of an imminent threat to public health and safety. Supporting documentation with detailed information on the system can be found on the attached as-built.

Christopher W. LeClair, REHS
Senior Environmental Specialist

AS-BUILT REPORT
INDIVIDUAL SEWAGE TREATMENT SYSTEM

ENTERED

Washington County Public Health & Environment
14949 – 62ND ST N, PO BOX 6, STILLWATER, MN 55082-0006
651/430-6688 OR 651/430-6655 FAX 651/430-6730

RECD NOV 22 2004

Legal Description or Complete Street Address

City of Township

Owner Name: Yokanovich	Mail Address: 4812 Pinecrest Ave. No.	City: Baytown Twp./ Stillwater	State: MN	Zip: 55082
Installer: Outdoor Design Tom Powers	Mail Address: P.O. Box 547	City: Hugo	State: MN	Zip: 55038

Septic Tank Information

Tank Manufacturer: Plastec Companies — Liquid Capacity: 2 @ 1000 gallons each

PUMP CHAMBER (if installed)

Tank Manufacturer: Plastec Cos.	Liquid Capacity: 1000 gallons	Horsepower of Pump: 4/10 HP	Type of Warning Device: Rhombus
Pump Discharge in Gallons Per Minute: 28 GPM at Feet of @ 25' head		Starite EC44012OT	
		Number of Gallons Per Cycle: 130	

DRAINFIELD TRENCH

Width: 36"	Length of Each Trench: 4 @ 100'
Depth of Trench Bottom from Finished Grade: 20" - 30"	
Method of Distribution: ☐Pressure ☐Distribution Box ☑Drop Box	
Depth of Rock Under Distribution Pipe: 12"	
Square Footage of Tested Area Used: 2800 sq.ft.	
Trench Bottom Square Footage Required: 1,200 Sq.ft.	Area As Built: 1,200 Sq.ft.

BED OR MOUND

Rock Bed Length:	Width: N/A	Area:
Bed Depth from Grade:		
MOUND: Upslope Sand Base Depth:		Downslope Sand Base Depth:
Depth of Rock Under Pipe:		

PRESSURE DISTRIBUTION SYSTEM:

Lateral Inside Diameter:	Length:	Perforation Size:
Spacing:	Number:	Perforation Spacing:

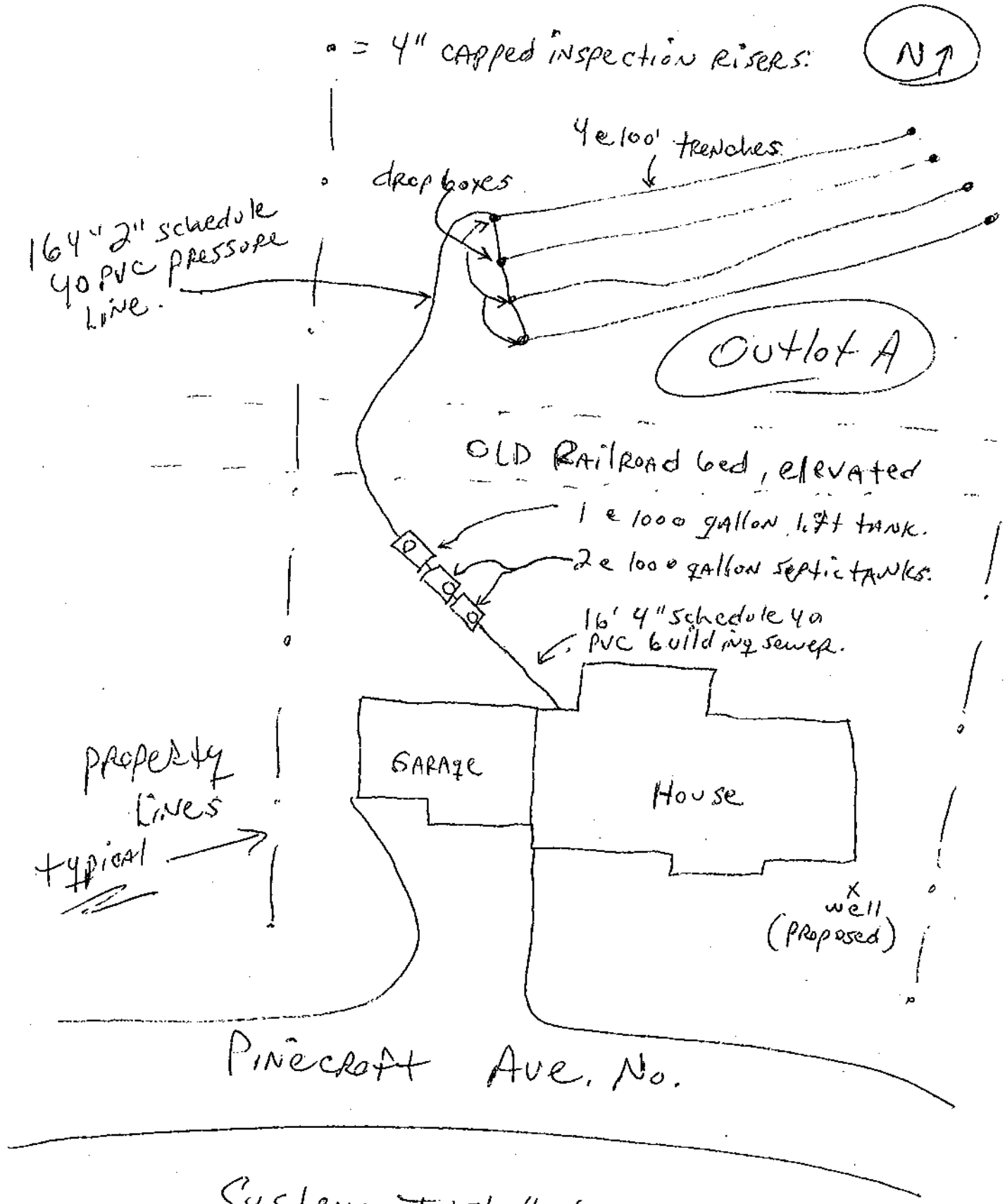
Complete site plan on attached sheet. On the site plan, include location of the following items.

Structures, septic tank, pump chamber, line from house to tank treatment system, distribution lines, distribution or drop 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 sale 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: Tom Powers MPCA License #: 13698/1464 Dated: 11/18/04

WASHINGTON COUNTY SEPTIC PERMIT NUMBER 0002-04-20



System Installed & Inspected on 11/18/04.
Tenpenny
MPCA #'s 1369 & 1764