



Minnesota Pollution Control Agency

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

Compliance Inspection Form
Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms - additional local requirements may also apply.

Submit completed form to Local Unit of Government (LUG) and system owner within 15 days

For local tracking purposes:

System Status

System status on date (mm/dd/yyyy): 3/1/2017

[] Compliant - Certificate of Compliance
(Valid for 3 years from report date, unless shorter time frame outlined in Local Ordinance.)

[X] Noncompliant - Notice of Noncompliance
(See Upgrade Requirements on page 3.)

Reason(s) for noncompliance (check all applicable)

- [] Impact on Public Health (Compliance Component #1) - Imminent threat to public health and safety
[] Other Compliance Conditions (Compliance Component #3) - Imminent threat to public health and safety
[] Tank Integrity (Compliance Component #2) - Failing to protect groundwater
[] Other Compliance Conditions (Compliance Component #3) - Failing to protect groundwater
[X] Soil Separation (Compliance Component #4) - Failing to protect groundwater
[] Operating permit/monitoring plan requirements (Compliance Component #5) - Noncompliant

Property Information

Parcel ID# or Sec/Twp/Range:

Property address: 9180 125th St Cir N Hugo, MN 55038 Reason for inspection: Sale

Property owner: David Howe Owner's phone: 651-587-5792

or

Owner's representative: Representative phone:

Local regulatory authority: Washington County Regulatory authority phone: 651-430-6000

Brief system description: Septic tank with a gravity rock trench drainfield

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.

Inspector name: Benjamin Zierke Certification number: 9594

Business name: Zierke Soil Testing License number: 119

Inspector signature: [Signature] Phone number: 651-249-1346

Necessary or Locally Required Attachments

- [X] Soil boring logs [X] System/As-built drawing [] Forms per local ordinance
[X] Other information (list): Tank Integrity/Pumping

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

Any "yes" answer above indicates the system is an imminent threat to public health and safety.

Comments/Explanation:

David did not report any issues with the system.

Verification method(s):

- Searched for surface outlet
- Searched for seeping in yard/backup in home
- Excessive ponding in soil system/D-boxes
- Homeowner testimony (See Comments/Explanation)
- "Black soil" above soil dispersal system
- System requires "emergency" pumping
- Performed dye test
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

2. Tank Integrity – Compliance component #2 of 5

Compliance criteria:

System consists of a seepage pit, cesspool, drywell, or leaching pit. <i>Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth. If yes, which sewage tank(s) leaks:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Comments/Explanation:

Tanks pumped 9/23/2015 by Boss's Pumping. See attached.

Verification method(s):

- Probed tank(s) bottom
- Examined construction records
- Examined Tank Integrity Form (Attach)
- Observed liquid level below operating depth
- Examined empty (pumped) tanks(s)
- Probed outside tank(s) for "black soil"
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

3. Other Compliance Conditions – Compliance component #3 of 5

- a. Maintenance hole covers are damaged, cracked, unsecured, or appear to be structurally unsound. Yes* No Unknown
- b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety. Yes* No Unknown
***System is an imminent threat to public health and safety.**

Explain:

- c. System is non-protective of ground water for other conditions as determined by inspector. Yes* No
***System is failing to protect groundwater.**

Explain:

4. Soil Separation – Compliance component #4 of 5

Date of installation: 1987 Unknown
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging? Yes No

Compliance criteria:

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.

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.*

"Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080.2350 or 7080.2400 (Advanced Inspector License required) Yes No
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Verification method(s):

Soil observation does not expire. Previous soil observations by two independent parties are sufficient, unless site conditions have been altered or local requirements differ.

- Conducted soil observation(s) (Attach boring logs)
- Two previous verifications (Attach boring logs)
- Not applicable (Holding tank(s), no drainfield)
- Unable to verify (See Comments/Explanation)
- Other (See Comments/Explanation)

Comments/Explanation:

Indicate depths or elevations

A. Bottom of distribution media	96.4
B. Periodically saturated soil/bedrock	97.3
C. System separation	-0.9
D. Required compliance separation*	3.0

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

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

5. Operating Permit and Nitrogen BMP* – Compliance component #5 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? 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. Operating Permit number: _____ Yes No
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.

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.

1991 4/2012 2016

Relative Elevations

B1: 100.0, redox 97.3
 B2: 100.2, redox 97.5
 Top of rock: 97.9
 Bottom of rock: 96.4
 B1 Separation: -1.1
 B2 Separation: -0.9
 Benchmark: 101.2
 (cover on septic tank)
 Height of instrument: 104.8



Imagery Date: 4/3/2012 45°08'01.20" N 92°55'14.53" W elev 1006 ft eye alt 1367 ft

Logs of Soil Borings

Location of Project: 9180 125th St Cir N Hugo, MN 55038

Borings Made by Ben Zierke

Date:

2/27/2017

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-----	-----
0-8"	Mixed fill	0-6"	10YR 3/3 loamy sand
8-14"	10YR 3/3 sandy loam	6-17"	10YR 4/4 medium sand
14-18"	10YR 4/4 loamy sand	17-36"	10YR 5/4 silt loam, redox present between 32-36"
18-36"	10YR 5/4 silt loam, redox present below 32"	36-48"	5YR 4/4 fine sand

End of boring at 3 feet
Standing water table:
 Present at _____ feet of depth _____ Hours after boring
 Standing water not present in hole
Mottled Soil:
 Observed at 2.7 feet of depth
 Mottled soil not present in bore hole
 Comments:

End of boring at 4 feet
Standing water table:
 Present at _____ feet of depth _____ Hours after boring
 Standing water not present in hole
Mottled Soil:
 Observed at 2.7 feet of depth
 Mottled soil not present in bore hole
 Comments:

Depth, in Inches	Boring Number 3	Depth, in Inches	Boring Number 4
0-----	-----	0-----	-----

End of boring at _____ 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:

End of boring at _____ 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:



CRANE'S
ESTIMATE
612-850-2081

P.O. Box 534
Forest Lake, MN 55025
Office: (651) 466-0800
Office: (763) 434-6744
Fax: (651) 982-1357

Septic/Commercial Maintenance

Invoice # 16087
Date: 9-23-15
Purchase Order #: _____
Next Service: 9/18

Billing Information or Bill To:
Name: David Newk
Address: 9180 - 175E 50 Cir
City: Waco
Zip: 55038 State: W
Phone: (85) 426-2246 Day
(651) 430-1903 Night

Type of Service
Residential
Commercial
Time In: _____ Time Out: _____

Work Description

Residential	Commercial
1 Tank <input checked="" type="checkbox"/> # of Gallons: <u>1200</u> 2 Tank <input type="checkbox"/> # of Gallons: _____ Lift Station <input type="checkbox"/> # of Gallons: _____ Total Gallons _____ (est.) Dump Site _____ Waste Type: <u>Domestic</u> / Dilute / Holding	Flammable Trap/s: <input type="checkbox"/> Sand Trap: <input type="checkbox"/> Sand Pit/s or Trench: <input type="checkbox"/> Grease Trap/s: <input type="checkbox"/> Holding Tank/s: <input type="checkbox"/> Lift Stations: <input type="checkbox"/> OTHER: <input type="checkbox"/>
Method of Removal Cleaned through Manhole <input checked="" type="checkbox"/> Pumped through Vent Pipe <input type="checkbox"/> Portion of Cover Removed <input type="checkbox"/>	Total # of Gallons: _____ Dump Site: _____ Waste Type: <u>Comm.</u> / Indst. / Dom. / Dilute / Holding <small>*All solid waste disposal methods are approved by M.C.E.S. and / or M.P.C.A.</small>
Permit: <u>Waco Cir</u> Condition of Baffles: GOOD <input checked="" type="checkbox"/> Other <input type="checkbox"/> Evidence of Drainage Problems: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Comments: <u>train</u>	Type of Service Regular Maintenance: Yes <input type="checkbox"/> No <input type="checkbox"/> Urgent / Emergency: Yes <input type="checkbox"/> No <input type="checkbox"/> Comments: _____
Pumping <u>250</u> Permit <u>96 Waco Cir</u> Miscellaneous _____ Sand/Dump _____ TOTAL DUE <u>270</u>	Payment Method Cash: <input type="checkbox"/> Check <input checked="" type="checkbox"/> (# <u>6913</u>) Charge: VISA <input type="checkbox"/> MC <input type="checkbox"/> Billing-Commercial Only: <input type="checkbox"/> <small>Terms: Net 30 Days</small>

Thank you for choosing **BOSS Pumping**. We appreciate your business. The above described work will be / has been completed properly based on the information and descriptions given. We are committed to "doing the job right," the first time, every time.

Service Accepted By: _____ **Date:** _____