

wq-wwists4-31b • 6/4/14

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

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

Page 1 of 3

Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.	For local tracking purposes:						
Submit completed form to Local Unit of Government (LUG) and system owner within 15 days							
	11.00						
System Status							
System status on date (mm/dd/yyyy): 3/14/2017							
· · · · · · · · · · · · · · · · · · ·	pliant – Notice of Noncompliance de 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 to	- 19°						
☐ Tank Integrity (Compliance Component #2) — Failing to protect groundwater							
☐ Other Compliance Conditions (Compliance Component #3) – Failing to p	74 1 4 2						
☐ Soil Separation (Compliance Component #4) - Failing to protect grounds	vater						
☐ Operating permit/monitoring plan requirements (Compliance Component	#5) – Noncompliant						
	日本 日本 お売り						
Property Information Parcel ID# or Sec/Twp/Ra	nge: <u>32.030.21.24.0072</u>						
Property address: 999 Warner Ave S, Mahtomedi, MN 55110 Reason	for inspection: routine						
	s phone: 651-426-5300						
or							
Owner's representative: Represe	entative phone:						
Local regulatory authority: Washington County Regulat	tory authority phone: 651-430-6673						
Brief system description: soft bottom cesspool / drywell system.							
Comments or recommendations:							
This is a very old system, installed in 1960. It could begin discharging sewage to the	surface & become an imminent threat to public						
health at anytime. This home should have a new septic system installed or be connected	cted to a municipal sewer system ASAP.						
	(2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4						
Certification	<u> </u>						
I hereby certify that all the necessary information has been gathered to determine the determination of future system performance has been nor can be made due to unknot possible abuse of the system, inadequate maintenance, or future water usage.	compliance status of this system. No own conditions during system construction,						
Inspector name: Tom Trooien Certifica	ation number: 323						
Business name: All State Septic Services LLC Lice	ense number: _1568						
Inspector signature: 700 Pr	none number: 612+594-4496						
Necessary or Locally Required Attachments							
	er local ordinance						
Other information (list):	100 mg/s						
www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • TTY 651-282-5332 or							

Prope	erty address: 999 Warner Ave S, Maht	omedi, MN 55110	Inspector initials/Date: TT 3/14/2017				
•			(mm/dd/yyyy)				
	Dublic Health C	ampliance compans	nt #1 of 5				
<u>1.</u>	Impact on Public Health – C	ompliance compone					
_	Compliance criteria:		Verification method(s):				
	System discharges sewage to the	☐ Yes ☒ No	Searched for surface outlet Searched for surface				
_	ground surface.		Searched for seeping in yard/backup in home				
	System discharges sewage to drain	☐ Yes ☒ No	☐ Excessive ponding in soil system/D-boxes				
	tile or surface waters.		☐ Homeowner testimony (See Comments/Explanation)				
	System causes sewage backup into	☐ Yes ☒ No	☐ "Black soil" above soil dispersal system				
	dwelling or establishment.		System requires "emergency" pumping				
	Any "yes" answer above indi	cates the	☐ Performed dye test☐ Unable to verify (See Comments/Explanation)				
	system is an imminent threat	to public					
	health and safety.		Other methods not listed (See Comments/Explanation)				
-	Comments/Explanation:						
	Olimono.						
	•						
		. #0 -f F					
<u>2.</u>	Tank Integrity - Compliance	component #2 of 5					
	Compliance criteria:		Verification method(s):				
-	System consists of a seepage pit,	⊠ Yes □ No	☐ Probed tank(s) bottom				
	cesspool, drywell, or leaching pit.		☐ Examined construction records				
	Seepage pits meeting 7080.2550 may be		☐ Examined Tank Integrity Form (Attach)				
	compliant if allowed in local ordinance.		☐ Observed liquid level below operating depth				
	Sewage tank(s) leak below their	☐ Yes ☐ No	☐ Examined empty (pumped) tanks(s)				
	designed operating depth.		☐ Probed outside tank(s) for "black soil"				
	If yes, which sewage tank(s) leaks:		☐ Unable to verify (See Comments/Explanation)				
	Any "yes" answer above indicates the						
	system is failing to protect g	rounawater.					
	Comments/Explanation:	the markets against available 8					
	Reviewed history of the system and photos of the cesspool & drywell tanks when the manhole covers were excavated &						
	opened up for repairs in Aug, 2015.						
	4						
3	Other Compliance Condition	ns – Compliance com	ponent #3 of 5				
			ed, 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 ☐ Unknows *System is an imminent threat to public health and safety. 						
	Explain:		[編集] 				
	;						
	c. System is non-protective of ground water for other conditions as determined by inspector . ☐ Yes* ☑ No						
	*System is failing to protect gr	oundwater.					
	Explain:						
	•		、数。 - 数。 - 数。				
	·		**************************************				
			TTV 454 292 5222 or 800 457-3864 a Available in alternative format				

Inspector initials/Date: TT

www.pca.state.mn.us • www.pca.state.mn.us • wa-wwists4-31b • 6/4/14

				(mm/dd/yyyy)
1. Soil Separation — Compliance co	omponent #4 of 5		1	
Date of installation: 1960	Unknown	Verification me	thod(s):	
<i>(mm/dd/yyyy)</i> Shoreland/Wellhead∶protection/Food beverage odging?	⊠ Yes □ No	observations by tw		expire Previous soil endent parties are sufficient, been altered or local
Compliance criteria:		requirements diffe	<i>r.</i>	
For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead	☐ Yes ☐ No		observation(s) (Atta	
Protection Area or not serving a food,		•	erifications (Attach b	•
everage or lodging establishment:		☐ Not applicable	(Holding tank(s), no dr	ainfield)
Prainfield has at least a two-foot vertical		☐ Unable to verify	y (See Comments/Exp	lanation)
eparation distance from periodically aturated soil or bedrock.		☐ Other (See Com	nments/Explanation)	
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	Comments/Expla	ination:	
Orainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*				
Experimental", "Other", or "Performance"	☐ Yes ☐ No	Indicate depths	or elevations	
ystems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080. 1350 or 7080.2400 (Advanced Inspector		A. Bottom of distribu	35	
icense required)		B. Periodically satur	rated soil/bedrock	
ainfield meets the designed vertical		C. System separation	on On	
eparation distance from periodically aturated soil or bedrock.				
Any "no" answer above indicates t		D. Required complia	ance separation! up to 15 percent if al	
Operating Permit and Nitroger Is the system operated under an Operating	ı BMP* – Complia	Ordinance. nce component #	5 of 5 🔀 N o	t applicable
· · · · · · · · · · · · · · · · · · ·		_	A below is required	
Is the system required to employ a Nitroger	n BMP?	s ⊠ No If "yes",	B below is required	d
BMP = Best Management Practice(s)	specified in the system	design	. 1	
If the answer to both questions is "r	o", this section d	es not need to be	completed	
Compliance criteria				
a. Operating Permit number: n/a				
Have the Operating Permit requireme	nts been met?	│ □ Yes □	□No	
b. Is the required nitrogen BMP in place		ng?] No	
Any "no" answer indicates Nonc				
and the majorito Hono			na n	
Upgrade Requirements (Minn. Stat. § 115.55 discontinued within ten months of receipt of this ground water, the system must be upgraded, rep is not failing as defined in law, and has at least t its use discontinued, notwithstanding any local of	notice or within a shorte placed, or its use discont wo feet of design soil se	period if required by loc nued within the time req aration, then the system	al ordinance. If the sys uired by local ordinanc n need not be upgraded	tem is failing to prote e. If an existing syste d, repaired, replaced,

www.pca.state.mn.us • www.pca.state.mn.us •

651-296-6300 651-296-6300

Property address: 999 Warner Ave S, Mahtomedi, MN 55110

800-657-3864 800-657-3864

Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

TTY 651-282-5332 or 800-657-3864 TTY 651-282-5332 or 800-657-3864

Available in alternative formats Available in alternative formats

Inspector initials/Date: TT | 3/14/2017

HOME

e CESSPOOL/DRYWELL