



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): 4/25/2017

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

[] 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
[] 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: 6607 175th St N Hugo, MN 55036

Reason for inspection: Sale

Property owner: Mark Lanasa

Owner's phone: 651-387-7840

or

Owner's representative:

Representative phone:

Local regulatory authority: Washington County

Regulatory authority phone: 651-430-6000

Brief system description: Two 1,000 gallon septic tanks, 1,000 gallon lift station, mound dispersal system

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): Washington County Pumping Permit

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:

Homeowner has not had 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:

All three tanks pumped 12/1/2016 by Smilies. 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: 2007 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	101.4
B. Periodically saturated soil/bedrock	98.5
C. System separation	2.9
D. Required compliance separation*	3.0 (2.55 with allowance)

*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.

Logs of Soil Borings

Location of Project: 6607 175th St N Hugo, MN 55038

Borings Made by Ben Zierke

Date: 4/25/2017

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-----	-----
0-12"	Mixed sandy fill	0-12"	Mixed topsoil fill and mound sand
12-16"	10YR 3/3 loamy fine sand	12-18"	10YR 4/4 loamy fine sand, redox present below 12"
16-24"	10YR 4/4 loamy fine sand, redox present at 18"		

End of boring at 2 feet
Standing water table:
 Present at _____ feet of depth _____ Hours after boring
 Standing water not present in hole
Mottled Soil:
 Observed at 1.5 feet of depth
 Mottled soil not present in bore hole
 Comments:

End of boring at 1.5 feet
Standing water table:
 Present at _____ feet of depth _____ Hours after boring
 Standing water not present in hole
Mottled Soil:
 Observed at 1 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-----	-----

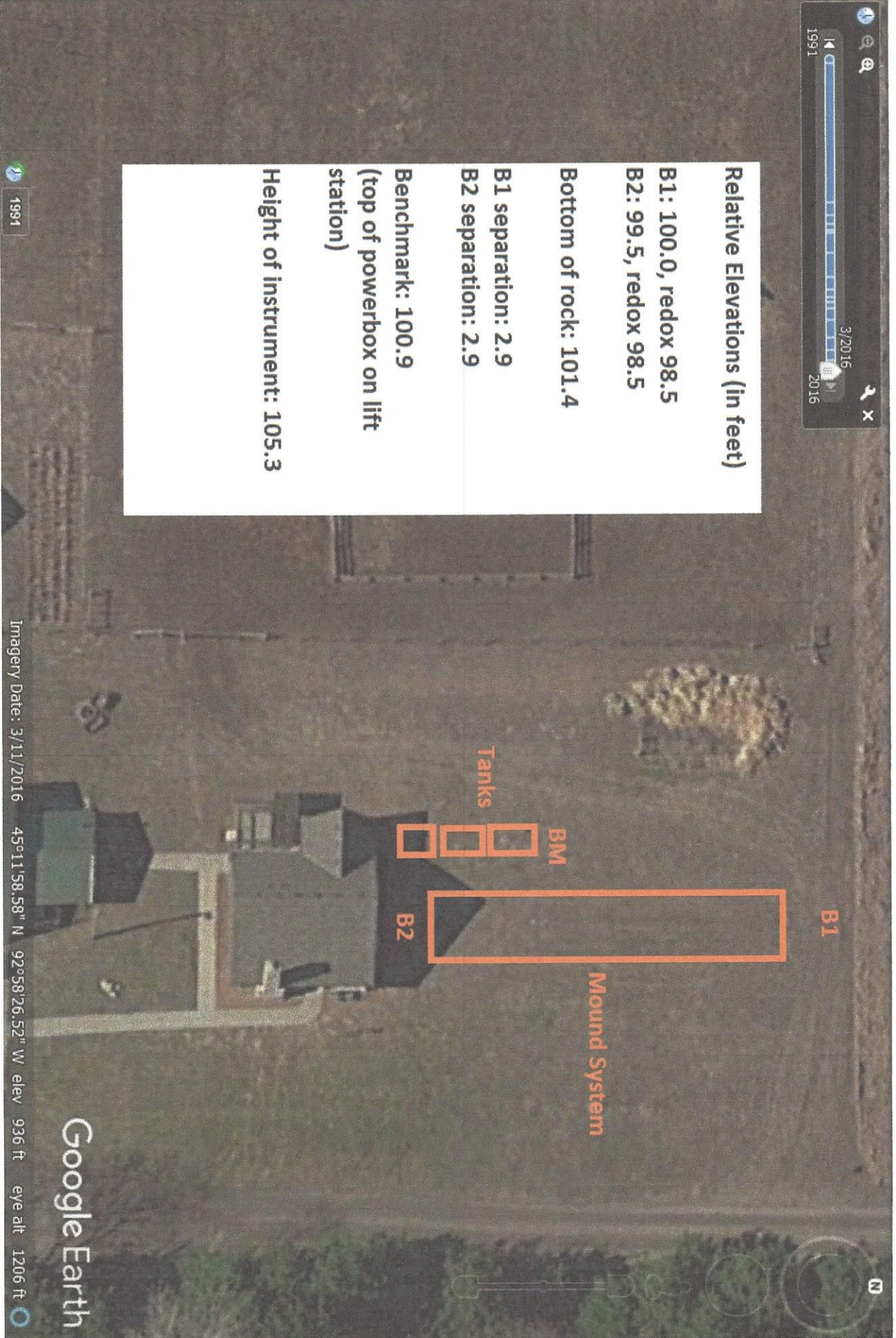
End of boring at _____ feet
Standing water table:
 Present at _____ feet of depth _____ Hours after boring
 Standing water not present in hole
Mottled Soil:
 Observed at _____ feet of depth
 Mottled soil not present in bore hole
 Comments:

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:

3/2016
1991 2016

Relative Elevations (in feet)

B1: 100.0, redox 98.5
B2: 99.5, redox 98.5
Bottom of rock: 101.4
B1 separation: 2.9
B2 separation: 2.9
Benchmark: 100.9
(top of powerbox on lift station)
Height of instrument: 105.3



Imagery Date: 3/11/2016 45°11'58.58" N 92°58'26.52" W elev 936 ft eye alt 1206 ft



DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
 GOVERNMENT CENTER
 14949 62nd STREET NORTH P.O. BOX 6 STILLWATER, MN 55082-0006
 Office: 651-430-6655 TTY: 651-430-6246 FAX: 651-430-6730

Subsurface Sewage Treatment System Maintenance Permit

This section must be completed in its entirety to constitute a valid maintenance permit. This permit must be completed prior to performing maintenance activities and remain on file for the duration of the maintenance activity.

Date of Maintenance: 12-1-16 Reason for Maintenance: Reg Maint
 Property Address: 6607 175th St N Property Owner's Name: Mark Larasa
 Municipality: Hugo ZIP: 55038 Property Identification Number: _____
 Maintenance Permit No: L2075@5430 Maintainer Name and License No. Smilie's Sewer Service/L2428

Maintenance Performed	Tank Measurement (must be completed if tanks NOT pumped)
<input checked="" type="checkbox"/> Tank(s) Pumped <input type="checkbox"/> Sludge and scum measured Do tanks need to be pumped? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no provide measurements)	Liquid Level of Tank _____ in Sludge Level in Tank _____ in Scum Level in Tank _____ in Sludge + Scum _____ / Liquid Level _____ X 100 = % Sludge & Scum _____ Tanks: must be pumped if 25% or greater

- Access used to remove septage: Maintenance Hole Other (enter authorization code) _____
- Were all covers securely replaced? Yes No
- Is there evidence of tank leakage from a septic, holding, pretreatment or pump tank below the operating depth or evidence of damaged, cracked, or structurally unsound maintenance hole covers?

Tank	Leaking Out	Leaking In	Cover Damage
Septic/Holding Tank #1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Septic/Holding Tank #2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Pretreatment Tank	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pump Tank	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

4. How many gallons of septage were removed?
 Tank #1 1000 gal Tank #2 1000 gal Pretreatment tank _____ gal Pump Tank 300 gal

5. Other information: List any troubleshooting, minor repairs conducted, tank safety concerns, or other concerns.

6. Location of septage disposal: Metro

Maintenance activities must be reported to the Department within 90 days.