

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 (MPC requirements and attached forms – additional local requirements may also		
Submit completed form to Local Unit of Government (LUG) and syswithin 15 days	tem owner	
System Status		
System status on date (mm/dd/yyyy): 6/2/2017	_	
	Noncompliant – Notice of Noncompliance (See Upgrade Requirements on page 3.)	
Reason(s) for noncompliance (check all applicable) Impact on Public Health (Compliance Component #1) – Imm Other Compliance Conditions (Compliance Component #3) – Tank Integrity (Compliance Component #2) – Failing to prote Other Compliance Conditions (Compliance Component #3) – Soil Separation (Compliance Component #4) – Failing to pro Operating permit/monitoring plan requirements (Compliance	- Imminent threat to public health and safety ect groundwater - Failing to protect groundwater tect groundwater	
Property Information Parcel ID# or :	Sec/Twp/Range: 3602721110001	
Property address: 11000 Manning Av. S., Hastings, Mn. 55033	Reason for inspection: Property Transfer	
Property owner: Mike and Deb Kleis	Owner's phone: 651-338-8934	
or		
Owner's representative:	Representative phone:	
Local regulatory authority: Washington County	Regulatory authority phone: 651-430-6655	
Brief system description: 2-1000 gal. precast septic tanks and 267 lin. Comments or recommendations:	ft. rock trench with 12" rock below pipe.	
System installed in 1996 when home was built. Cannot find exact date. Well >50' to tanks and drainfield.	/ill use 10/15/96.	
Certification		
I hereby certify that all the necessary information has been gathered to de determination of future system performance has been nor can be made d possible abuse of the system, inadequate maintenance, or future water u	ue to unknown conditions during system construction	
Inspector name: Roger Benson	Certification number: 1505	
Business name: Benson Septic Service	License number: 190	
Inspector signature: Roger Barrel	Phone number: 651-325-6555	
Necessary or Locally Required Attachments		
	Tearms par local ardinana	
	Forms per local ordinance	
☑ Other information (list): Original design (8/96). 2010 compliance	inspection. All records on file at washington Co.	

Pro	operty address: 11000 Manning Av. S., i	Hastings Mn 55033	Inspector initials/Date: R: 8 6/2/2017
1 10	porty address. Troop Maining Av. S.,	riastings, Will. 55055	Inspector initials/Date: 6/2/2017 (mm/dd/yyyy)
1.	Impact on Public Health - 0	Compliance compor	nent #1 of 5
	Compliance criteria:	perinpilarioe cerriper	Verification method(s):
	System discharges sewage to the	☐ Yes ⊠ No	Searched for surface outlet
	ground surface.	les Milo	⊠ Searched for seeping in yard/backup in home
	System discharges sewage to drain tile or surface waters.	☐ Yes ⊠ No	☐ Excessive ponding in soil system/D-boxes ☐ Homeowner testimony (See Comments/Explanation)
	System causes sewage backup into dwelling or establishment.	☐ Yes ⊠ No	☐ "Black soil" above soil dispersal system ☐ System requires "emergency" pumping
	Any "yes" answer above indicates the system is an imminent threat to public health and safety.		☐ Performed dye test ☐ Unable to verify (See Comments/Explanation) ☐ Other methods not listed (See Comments/Explanation)
11	Comments/Explanation: No excessive ponding in D-boxes. Rai	n water for 30 min. All e	
2.	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. Seepage pits meeting 7080.2550 may be		☐ Examined construction records
	compliant if allowed in local ordinance.		☐ Examined Tank Integrity Form (Attach)
	Sewage tank(s) leak below their	☐ Yes ☒ No	 ☐ Observed liquid level below operating depth ☑ Examined empty (pumped) tanks(s)
	designed operating depth. If yes, which sewage tank(s) leaks:		☐ Probed outside tank(s) for "black soil"
	Any "yes" answer above indi	cates the	☐ Unable to verify (See Comments/Explanation)
	system is failing to protect gr		○ Other methods not listed (See Comments/Explanation)
	Comments/Explanation:		
	Effluent level in tanks normal before pumping. No visible faults in empty tanks. Baffles in place. Manholes to grade. Top of tanks 36" below grade.		
3.	Other Compliance Condition	IS – Compliance com	nonent #3 of 5
		to immediately and adve	d, or appear to be structurally unsound. ☐ Yes* ☒ No ☐ Unknown ersely impact public health or safety. ☐ Yes* ☒ No ☐ Unknown
	Explain:	passio ricalul allu sale	rcy.
	c. System is non-protective of ground	water for other condition	as as determined by inspector . ☐ Yes* ☒ No

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*System is failing to protect groundwater.

Explain:

Property address: 11000 Manning Av. S., Hastings, Mn. 55033		Inspector initials/Date: Roll 6/2/2017 (mm/dd/yyyy)	
			(mm/dd/yyyy)
4. Soil Separation - Compliance co	omponent #4 of 5		
Date of installation: 10/15/1996 (mm/dd/yyyy)	Unknown	Verification method(s):	
Shoreland/Wellhead protection/Food beverage lodging? Compliance criteria:	☐ Yes No	Soil observation does not expire. Probservations by two independent paralless site conditions have been alto the conditions and the conditions.	arties are sufficient,
_		requirements differ.	
For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead	Yes No	Conducted soil observation(s) (Attach boring logs)	
Protection Area or not serving a food, beverage or lodging establishment:		 ☑ Two previous verifications (Attach boring logs) ☑ Not applicable (Holding tank(s), no drainfield) 	
Drainfield has at least a two-foot vertical		☐ Unable to verify (See Comments/Explanation)	
separation distance from periodically saturated soil or bedrock.		Other (See Comments/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/Explanation:	
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	Yes No	Indicate depths or elevations	
or V systems built under 2008 Rules (7080.		A. Bottom of distribution media	48"
2350 or 7080.2400 (Advanced Inspector License required)		B. Bariadian II. and a second	
Drainfield meets the designed vertical	d	B. Periodically saturated soil/bedrock	>84"
separation distance from periodically saturated soil or bedrock.		C. System separation	>36"
		D. Required compliance separation*	36"
Any "no" answer above indicates the failing to protect groundwater.	ne system is	*May be reduced up to 15 percent if Ordinance.	allowed by Local
5. Operating Permit and Nitrogen	BMP* - Complian	ce component #5 of 5	lot applicable
Is the system operated under an Operating		⊠ No If "yes", A below is requir	
Is the system required to employ a Nitrogen	N-22-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	No If "yes", B below is required in the second of the	
BMP = Best Management Practice(s) s		The state of the s	ou
If the answer to both questions is "n			
	o , uno occuon doc	s 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		g? Yes No	
Any "no" answer indicates Nonco	ompliance.		
Upgrade Requirements (Minn. Stat. § 115.55)	An imminent threat to pub	lic health and safety (ITPHS) must be upgr	raded, replaced, or its use

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

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, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas,

Jul. 23 2010 12:31PM_P1

Minnesota Pollution Control Agency

S20 Lafayette Road North St. Paul, MN 55155-4194

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Instructions on page 7

Parcel number: 3602721110001	For Local Tracking Purposes:
System status:	
Summary Form	
Property Information	
Property owner name(s): Aurora Loan Servicing, LLC	
Property address: 11000 Manning Ave. Cottage Grove, MN	
Property owner's address (if different):	
County: Washington Property owner phone: 800-930-8990	Permitting authority: Washington County
Date system constructed: 8/96 Reason for inspection: pro	pperty transfer
System Description	
Brief system description: type I, 2 septic tanks, drainfield	
Local permit number: o.k. Number of bedrooms: 4	Design flow rate: _600g/pd
is the system:	
In Shoreland area? ☐ Yes ☒ No ☐ In Wellhead Pro	
	a Minnesota Department Ilcensed facility? Yes No
Compliance Status (Based on state requirements – additional local requi	rements may also apply.)
Based on the information gathered and reported on attached forms, the comp	pliance status of this system is (check one):
Certificate of Compliance - valid until (3 years from date of report):	/20/2013
□ Notice of Noncompliance - For Noncompliant systems:	
The reason for noncompliance is:	, , , , , , , , , , , , , , , , , , ,
This noncompliant system is classified as (check one below): imminent threat to public health & safety Falling to protect grounds.	nd water Not in compliance with operating permit
Certification (Completed form must be submitted to the local unit of govern	nment within 15 days.)
I hereby certify that all the necessary information has been gathered to determination of future system performance has been nor can be made due to possible abuse of the system, inadequate maintenance, or future water usage	o unknown conditions during system construction,
Name: Frank Bakke Cert	fication number: C4209
Business license name and number: Mendota Environmental, LLC, L1718	8 or
Name of local unit of government:	
Signature:	Date: 7/23/10
	This inspection Report is <u>14</u> pages long.
Check compliance forms attached: ☑ Hydraulic Performance ☒ Tank Integrispolicable) ☒ System drawing/As-built drawing ☐ An assessment of any local reform ☐ Soli Boring Logs ☐ Abandonment form (if appropriate) ☐ Other Information	ity Soil Separation
Upgrade Ri	ned andata //TOLIO) would be contended emband or
tts use discontii Date Toy Note 7/23/1. # of .	and safety (ITPHS) must be upgraded, replaced, or dinance. If the system is falling to protect ground ence, if an existing system is not falling as defined in
faw, and has at From From	laced, or its use disponlyhed, notwinstanding eny sedion Areas, or those used in connection with food,
beverage, and i Ca/Dept. TELM Co.	demonstrated as a same as an entitlament with them
Phone #/ / >_ \ i \ \ / /	
Phone #	

Parcel number: <u>3602721110001</u>	System status: Compliant Noncompliant (es determined by this form)
Hydraulic Performance and O	ther Compliance
Compliance Issue #1 of 4	
	Reason for observation:property transfer
tool Service S. V	three years, whichever occurs first: 7/20/2013
	· · · · · · · · · · · · · · · · · · ·
Compliance questions/criteria: (Require (Check the appropriate box)	
Does the system discharge sewage to the	(Check the appropriate box) ☐ Yes ☒ No ☒ Searched for surface outlet
ground surface?	EX Operation of settings office.
Does the system discharge sewage to drain	☐ Yes ☒ No ☐ Performed hydraulic test
tille or surface waters?	☐ Yes ☑ No ☐ Checked for seeping in yard
Does the system cause sewage backup into dwelling or establishment?	☐ Yes ☑ No ☐ Checked for backup in home ☐ Excessive ponding in soil system/D-boxes
Do other situations exist that have the	☐ Yes ☑ No ☐ Homeowner testimony
potential to immediately and adversely impact or threaten public health or safety	☐ Examined for surging in tank
(electrical, unsafe oovers, etc.)?	T "Right soil" above sail dispensed everyone
Any "yes" enswer indicates that the system threat to public health and safety.	is an imminent System requires "emergency" pumping
	Performed dye test
Does the system pose a threat to ground water for any conditions deemed non- protective as determined by the inspector?	Yes No Other:
"Yes" indicates that the system is falling t ground water. If "yes", describe the condi	to protect ition noted: * No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.
inapection form for Existing Subsurface S	the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Sewage Treatment Systems. Observations, interpretations, and conclusions must be must be submitted to the local unit of government within 16 days.
Property owner name(s): Aurora Loan Ser	vicing, LLC
Property address: 11000 Manning Ave. Co.	
Property owner's address (if different):	THE PARTY OF THE P
County: Washington	Phone: 800-930-8990
I hereby certify that I personally made the obs correct.	servations, interpretations, and conclusions reported on this form and that they are
Name: Frank Bakke	Certification number: C4209
Business license name and number: Mend	
Name of local unit of government:	
Signature:	Date: 7/23/2010

Parcel number: 3602721110001	S (6	ystem status: Compliant Notes determined by this farm)	ncompliant	
	·			
Tank Integrity and Safety Co.	mpliance		×	
Compliance Issue #2 of 4		X.		
Date of observation: 7/20/2019	Réason for observation:	property transfer		
This form expires on (three years): 7/20/	2013			
Compliance questions/criteria: (Requ (Check the appropriate box)	ired) .	Verification Method**: (Optional)	
Does the system consist of a seepage pit*, cesspool, drywell, or leaching pit?	☐ Yes ⊠ No	Probed tank bottom		
Do any sewage tank(s) leak below their	☐ Yes ⊠ No	Observed low liquid level		
designed operating depth?		Examined construction record		
if yes, identify which sewage		Examined empty (pumped) tar		
tank leaks. Any "yes" answer indicates that the system	n is falling to protect	Probed outside tank for *black	soll"	
ground water.		☐ Pressure/vacuum check		
* Seepage pits meeting 7080.2550 may be	compliant if allowed	Other:	-	
in ordinance by local permitting authority.				
		** No standard protocol exists. This its sequential order, nor does it indicate are necessary to make this determin	which comb	
Safety Check				
1. Are any maintenance hole covers damag	ed, cracked, or appeared to be a	structurally unsound?	☐ Yes*	⊠ No
2. Were all maintenance hole covers replace	ed in a secured manner (e.g., al	screws replaced)?	⊠ Yes	□ No*
3. Was secondary access restraint present	(safety pan, second cover, or sa	fety natting) - highly recommended.	☐ Yes	⊠ No
4. Was any other safety/health issue presen	nt?		☐ Yes*	⊠ No
Explain:				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
*System is an imminent threat to pul	blic health and safety.			
C-utili mati a			22	
Certification				
This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.				
Property owner name(s): Aurora Loan Se	ervicing, LLC			
Property address: 11000 Manning Ave. C	ottage Grove, MN			
Property owner's address (if different):				
County: Washington		hone: 800-930-8990	Proce No. 100 Process of the Control	
I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.				
Name: Frank Bakke		Certification number: C4209		
Business license name and number: Mer	ndota Environmental, LLC, L17	18		_ or
Name of local unit of sovernment:			MARKEN BARROWN P.	
Signature:		Date: 7/23/2010		

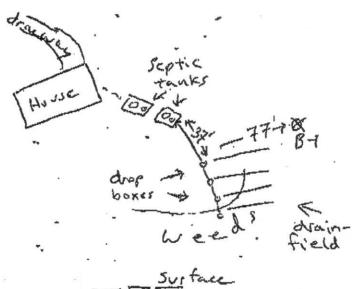
Parcel number: 3602721110001		System status: Compliant Noncompliant (as determined by this form)
		(as determined by this form)
Soil Separation Compliance and	Other Complian	ice ·
Compliance Issue #3 of 4		
	Reason for observation:	property transfer
This information on this form does not expire.		
Compliance questions/criteria: (Required) (Check the appropriate box)		Verification Method**: (Optional) (Check the appropriate box)
For systems built prior to April 1, 1996, and not		□ Conducted soli observation(s) (ettach boring logs)
located in Shoreland or Wellhead Protection Area or not serving a food, beverage or		Two previous verifications (attach boring logs)
lodging establishment:	8	Other:
Does the system have at least a two-foot		
vertical separation distance from periodically saturated soil or bedrock?	Yes No	·
For non-performance systems built April 1,	111	
1996, or later or for non-performance systems		Soil observation does not expire. Previous observations
located in Shoreland or Wellhead Protection Areas or serving a food, beverage or lodging		by two independent parties are sufficient, unless site
establishment:		conditions have been altered.
Does the system have a three-foot vertical		
separation distance from periodically saturated soil or bedrock?*	⊠ Yes □ No	
	24 165 (10	
For reduced separation distance systems (i.e., "performance" systems under old 7080.0179 or		* May be reduced by up to 15 percent if allowed in local
Type IV or V system under new 7080. 2350 or	İ	ordinance.
,7080.2400):		No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which
Does the system meet the designed vertical separation distance from periodically saturated		combinations are necessary to make this
soll or bedrock?*	Yes No	determination.
Any "no" enswer Indicates that the system is fe ground water.	illing to protect	
Bicone water.		
Certification		
		Minus de Ballidon Castral Annual (MBCA) Castrallina
Inamaction Form for Existing Subsurface Sev	vage Treatment System	Minnesota Pollution Control Agency's (MPCA) Compliance ns. Observations, interpretations, and conclusions must be
completed by an inspector or designer. Complet	ted form must be submit	ted to the local unit of government within 16 days.
Property owner name(s): _Aurora Loan Service	ina. LLC	
Property address: 11000 Manning Ave. Cottag		1.44
Property owner's address (if different):		
County: Washington		Phone: 800-930-8990
I hereby certify that I personally made the obser- correct.	vations, interpretations,	and conclusions reported on this form and that they are
Name: Frank Bakke	407	Certification number: C4209
Business license name and number: Mendot	e Environmental, LLC, L	1718 or
Name of local unit of generament:		
Signature:		Date: 7/23/2010

B-2 0-28" 104RZ/2 loam 28'-45" 10YR 3/3 Site lown 45-56" 7.54×3/4 finesand 56"-85" 104R3/6 sand lensesof finesand 70"-85" End of boring 85"

11000 Manning Ave

Not to scale

< N



cross-section Land

11000 Manning AUR S.



A-1 EARTH SCIENCE TESTINGIM

Berner and Campion of the search of the first of the control of the cont

A SOILS INFORMATION SERVICE COMPANY
P.O.BOX 187
FOREST LAKE, MN. 55025-187
464-7746

SOIL BORINGS & PERCOLATION TESTS

FOR: JOHN REUTER

10797 CEDAR HEIGHTS TR.

HASTINGS, MN. 55033

61ch weel

LOCATION: PARCEL "A"

PT. OF NE ¼ - SEC. 36 - T 27 - R 21W

CITY OF COTTAGE GROVE, MN.

17.42 ACRES

Prepared by
HARRY E. WEAVER
MPCA CERT.# 551 - MHD. LIC'S # 2150-M

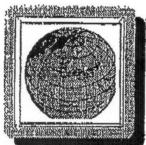
THE RESULTS OF THIS TESTING DOES NOT APPROVE OR DISAPPROVE BUILDING CONSTRUCTION OR INSTALLATION OF A SEPTIC SYSTEM ON THIS SITE. THIS TESTING INFORMATION SHOULD BE SUBMITTED TO THE APPROVING OFFICIALS FOR FORMAL REVIEW AND APPROVAL WHILE TEST HOLES AREA CLEARLY STAKED ONSITE.

A PROPOSED WASTE WATER TREATMENT AREA SHOULD BE PROVIDED WITH SOME TYPE OF VISABLE BARRIER TO PREVENT CONSTRUCTION TRAFFIC FROM ENCROAGHING INTO THIS AREA AND POSSIBLY DESTROYING THE SOIL STRUCTURE WITHIN THIS AREA.

NORCUTT HOMES.

612 789 8602

P. 03



EARTH SCIENCE TESTING TM SOILS INFORMATION COMPANY:

SOIL BORINGS

COTTAGE GROVE

BORING NO.1

0"-6" DARK BROWN FINE SANDY LOAM

6"-14" BROWN FINE LOAMY SAND

14"-6'9" LIGHT BROWN FINE TO MEDIUM SAND

6'9" LIGHT BROWN FINE TO MEDIUM SAND, SMALL LIMESTONE ROCKS

OBSTRUCTION . END BORING

BORING NO.2

0"-40" DARK BROWN FINE SANDY LOAM

40"-64" LIGHT BROWN VERY FINE SANDY LOAM AND SAND MIXED

64"-7'0" LIGHT BROWN FINE TO MEDIUM SAND, SMALL LIMESTONE ROCKS

7'0" OBSTRUCTION, END BORING

BORING NO.3

0"-24" DARK BROWN FINE SANDY LOAM

24"-32" BROWN FINE SANDY LOAM

32"-8'0" LIGHT BROWN-TAN FINE TO MEDIUM SAND

8'0" END BORING

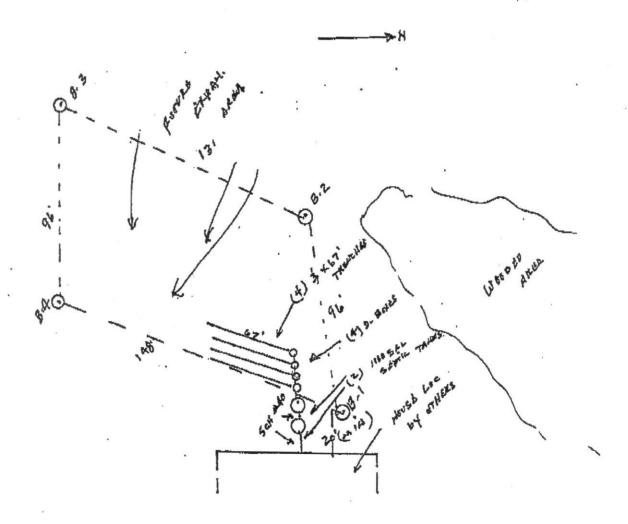
BORING NO.4

0"-4" DARK BROWN FINE SANDY LOAM

4"-8" BROWN FINE LOAMY SAND 8"-6'6" LIGHT TAN FINE LOAMY SAND

6'6"-7'6" LIGHT YELLOW-TAN FINE LOAMY SAND, SMALL LIMESTONE ROCKS

7'6" OBSTRUCTION, END BORING



Last Page of fax
14 Pages rotal

SCALE 1 DAY

STANDARD SYSTEM DESIGN INDIVIDUAL SEWAGE TREATMENT SYSTEM

Owner's Name NORCUTT HOMES INC JOHN RUET	ER - (RESIDENCE)
Job Site Address PARCEL "A" PT. OF NE % SEC.	36 - T 27 - R 21W
City or Township CITY OF COTTAGE GROVE - WA	ASHINGTON CO.
Use of Swilding NEW HOME	
2-tel room's 1450 gal.	
Design Flow Rate (600 MAX.) G.F.D. (3) REDROOM - W/ 3'X 5' WHIRLPOOL TUB	Land Slope (8-10) Percent Average Perdolation Rate (7) Mpi.
Required Tank Sizes Gallons (2-1000)	Gallons
Type of System - Standard (X), At grade () or bed ()
System Size: = Square Feet (800') Lineal Feet	t(267 ') Trench Width(3') Fest
Depth of rook below pipe (12")	Depth of Rock Above Pips (2")
MINimum Depth of Trench (36") From Existing GradeInches	MAXimum Depth of Trench (48") From Existing GradeInches
Recommended Number of Tranches (4)	Recommended Length of Trenches (67')
Trench Spacing Measured Center to Center (7	(-6")
Any Other Special Conditions DROPBOXESTO	BE USED - FOLLOW LAND CONTOUR IN TESTED
	LETE THE PRESSURE DISTRIBUTION WORK SHEET ATTA
This design must be accompanied by a site makes tested and approved by the following:	plan that clearly shows the location of the
1.Use an appropriate scale and indicate di	rection by use of a north arrow.

- 2.Show All property boundaries, rights-of-way, easements, wetlands. If necessary, an enlarged detail of the house site may also be required.
- Show location of house, garage, driveway and all other improvements existing or proposed.
- 4. Show location and layout of sewage treatment system.
- 5. Show location of water supply (well and/or community supply line).
- 6. Dimension all setbacks and separation distances.

Designer Name HARRY E. WEAVER	PCA LIC'S. # 977
Address P.O. BOX 187 - FOREST LAKE, MN. 55025-0187	Phone # 464 - 7746
Signature Signature	
This Plan	n is design for 267li

feet of pipe , because this is a 3 bedroom House it is only required to have 191 feet. This plan is OF

DATE: _08/96_
LOCATION: PARCEL "A" - PT. OF NE 1/4 - SEC. 36 - CITY OF COTTAGE GROVE, MN.
SEPTIC TANK: (2-1000_GAL) .
minimum square feet: (800')
MINIMUM LN. FEET: (
WIDTH OF (TRENCH): ()
NUMBER OF (TRENCHES) (4)
LENGTH OF (TRENCHES): (
NUMBER OF (DROP BOXES): (4)
SPACING OF TRENCHES: (
AMOUNT OF FILTER ROCK BELOW PIPE (S): (12")
CUBIC YARDS OF FILTER ROCK REQUIRED: (44)= 62 TONS
DEPTH OF SYSTEM BOTTOM: (36*-48*')