



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): 8/6/2017

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: 1902920320004

Property address: 2423 Manning Ave. N West Lakeland, MN 55042 Reason for inspection: Property Transfer

Property owner: JRT Group LLC Owner's phone: 651-295-7550

or
Owner's representative: _____ Representative phone: _____

Local regulatory authority: Washington County Regulatory authority phone: 651-430-6655

Brief system description: 2 1000G Septic Tanks to Gravity Drainfield

Comments or recommendations:

System was installed with a permit from Washington County in 1997.

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: Dave Brown Certification number: C9370

Business name: David R. Brown License number: L3649

Inspector signature:  Phone number: 651-788-3296

Necessary or Locally Required Attachments

- Soil boring logs
- System/As-built drawing
- Forms per local ordinance
- Other information (list): _____

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:

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:

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: 5/11/1998 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: Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 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.* | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| "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) Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock. | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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 | 18" |
| B. Periodically saturated soil/bedrock | 54" |
| C. System separation | 36" |
| D. Required compliance separation* | 36" |

*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: _____ Have the Operating Permit requirements been met? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. Is the required nitrogen BMP in place and properly functioning? | <input type="checkbox"/> Yes <input type="checkbox"/> 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.

INSPECTION RECORD

2015-11-16

| BUILDING | DATE | INSP. | COMMENTS |
|-------------------------------------|------|-------|----------|
| Foundation | | | |
| Foundation Wall | | | |
| Plumbing (Groundwork) | | | |
| Heating (Groundwork) | | | |
| Rough Plumbing | | | |
| Rough Gas Piping | | | |
| Rough Heating and Ventilation | | | |
| Framing | | | |
| Insulation | | | |
| Fireplace | | | |
| Chimney | | | |
| Wallboard or Lath and Plaster | | | |
| Final Electrical | | | |
| Final Plumbing | | | |
| Final Gas Piping | | | |
| Final Heating and Ventilation | | | |
| Final Building | | | |

| SEWAGE TREATMENT SYSTEM | DATE | INSP. | COMMENTS |
|-------------------------|---------|---------|---|
| Installation | 5-11-68 | P. L... | Tank Size: 2-1000 Treatment Area: 1200 sq |
| As Built | | | Installer: Bruce Capra |

| DRIVEWAY | DATE | INSP. | COMMENTS |
|--------------------|------|-------|----------|
| Access | | | |
| Installation | | | |

NOTES:



WASHINGTON COUNTY, MINNESOTA
 Department of Health, Environment,
 and Land Management 612/430-6708
 WEST LAUREL TOWNSHIP

PERMIT NUMBER 001797067 SEWAGE PERMIT

Owner : STEVE NELSON

Applicant : VERN CARDINAL HOMEOWNER 612-739-5033

VEN BRAINFIELD PERMIT 150.00
 Total Fee : 150.00
 Total Paid : 150.00
 Total Due : .00

0017-97067

PERMISSION IS HEREBY GRANTED

To execute the work specified in this permit on the following described property upon express condition that said persons and their agents, employees and workmen shall conform in all respects to the provisions of the Building Code, and/or Ordinances. This permit may be revoked at any time upon the violation of any of the provisions of said code and ordinances.

Project Address : 2423 HANNING AVE N STILLWATER MN 55062
 Legal Description: WEST LAUREL TOWNSHIP Geo : 18-029-20-32-0004
 Flow Capacity 750 Gal/Day Tank Volume 2300
 Soil Conditions: Depth to Restriction 80 inches Perc Rate 40 Min/Inch

Soil Treatment Type:
 Bottom Area 1200 Inch Depth 12

- Authorized Work / Special Conditions
- Install individual sewage treatment system as per approved design in area tested and shown on site plan.
 - Install no trenches below 910 contour.

** Permit Expiration Date : Sewage Treatment : 1998-12-23

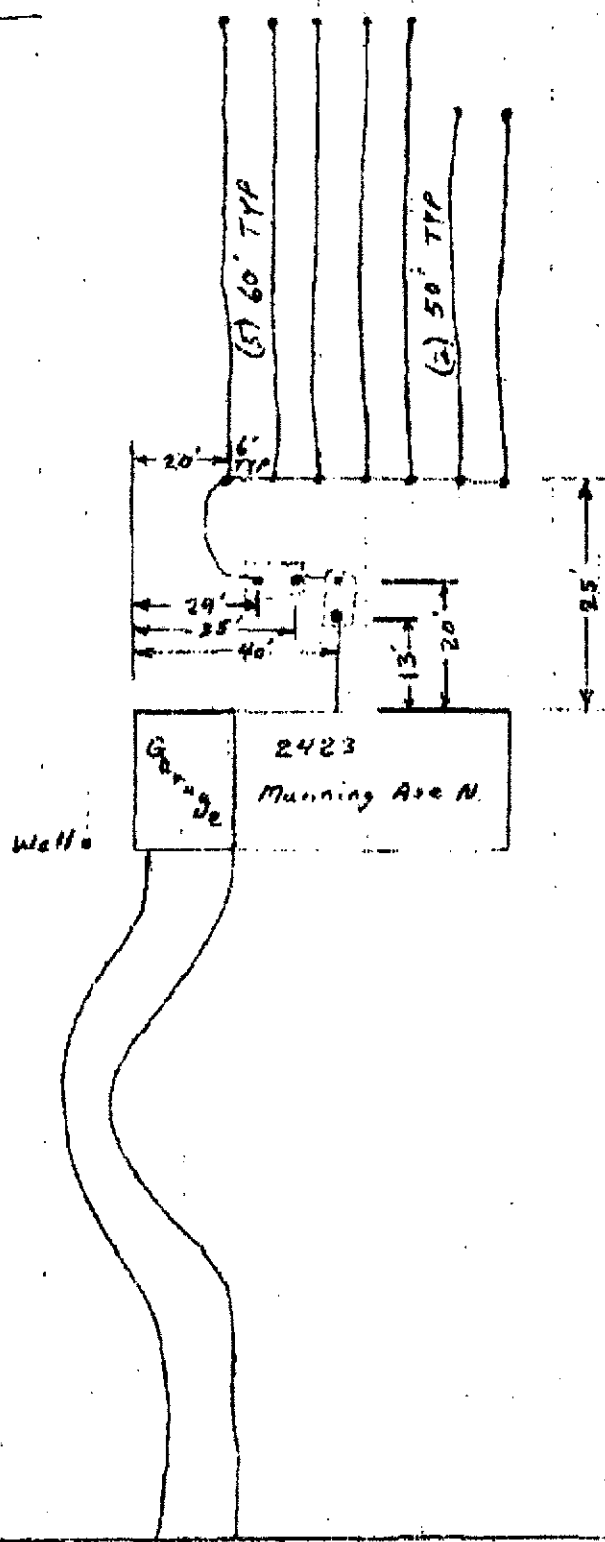
A CERTIFICATE OF OCCUPANCY MUST BE REQUESTED AND ISSUED PRIOR TO USE OR OCCUPANCY OF WORK PERMITTED BY A BUILDING PERMIT.

** This permit shall expire and be null and void if the work authorized by the Building Permit is not commenced within 60 days of the date of issuance or if work is abandoned or suspended for a period of 120 days. Term of the Building Permit is 12 months from date of issue. Term of sewage treatment permit is 12 months from date of issue.

Penalty for violation of any of the provisions of building code: fine not to exceed five hundred dollars (\$500.00) or imprisonment for not more than ninety (90) days, or both.

Permit Issue Date 1997-12-23 Code Enforcement Officer P. Gauriel

Cardinal
Steve Nelson
7423 Manning Ave N.
0017-97067





AS-BUILT REPORT INDIVIDUAL SEWAGE TREATMENT SYSTEM

Washington County Health, Environment & Land Management
14900 61ST ST N, PO BOX 3803, STILLWATER, MN 55082-3803
612/430-6708 or 612/430-6656 FAX 612/430-6730



| | | | | |
|---|---|---|-------|---------------------|
| Legal Description or Complete Rural Address 2425 Manning Ave N. | | City or Township West Lakeland Twp. | | |
| Owner Name Steve Nelson | MBR Address | City | State | Zip |
| Installer CARRAS UTILITIES INC. | Mail Address 4120 IRLA AVE N. | City Lake Elmo MN | State | Zip 55042 |
| Septic Tank Information Tank manufacturer: R.C.P. | | Liquid Capacity: 2,1000 | | |

| PUMP CHAMBER (if installed) | | | |
|---|------------------|---------------------|-------------------------------------|
| Tank Manufacturer: | Liquid Capacity: | Horsepower of Pump: | Type of Warning Device: |
| Pump Discharge in Gallons Per Minute: Head | at | feet of | Number of Gallons Pumped Per Cycle: |

| DRAINFIELD TRENCH | | BED OR MOUND | | |
|---|--|--|---------|----------------------|
| Width: 36" | Length of Each Trench: (5) 60' (2) 40' | Rock Bed Length: | Width: | Area: |
| Depth of Trench Bottom from Finished Grade: 18" to 24" | | Bed Depth from Grade: | | |
| Method of Distribution: <input type="checkbox"/> Pressure <input type="checkbox"/> Distribution Box <input checked="" type="checkbox"/> Drop Box | | MOUND: Upslope Sand Base Depth: Downslope Sand Base Depth: | | |
| Depth of Rock Under Distribution Pipe: 12" | | Depth of Rock Under Pipe: | | |
| Square Footage of Tested Area Used: 1200 | | PRESSURE DISTRIBUTION SYSTEM: | | |
| Trench Bottom Square Footage Required: 1200 | Area As Built: | 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 scale 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: Ernie T. Capra Jr. MPCA License #: 1510 Dated: 5-17-98

ASBUILT (M:DC)

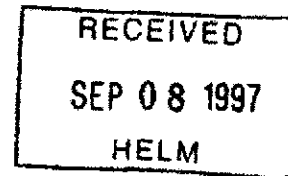
WASHINGTON COUNTY SEPTIC PERMIT NUMBER # 0017-77067

AN EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
IF YOU NEED ASSISTANCE DUE TO DISABILITY OR LANGUAGE BARRIER, PLEASE CALL 430-8708 (TDD 439-3220).



EARTH SCIENCE TESTING
SOILS INFORMATION COMPANY

SOIL BORINGS



BORING NO.1A

- 0" - 8" = DARK BROWN FINE SANDY LOAM. (10YR 3/2)
8" - 30" = LIGHT BROWN - TAN FINE SILTY LOAM. (10YR 4/2)
30" - 48" = LT. BROWN - TAN FINE SILTY LOAM (MOTTLED - 7.5YR 4/4)
END BORE

BORING NO.1

- 0" - 11" = DARK BROWN FINE SANDY LOAM. (10YR 3/2)
11" - 20" = LIGHT BROWN - TAN FINE SILTY LOAM. (10YR 4/2)
20" - 35" = LT. BRN. TAN FINE - MED. LOAMY SAND (7.5YR 4/4)
35" - 8'-0" = LT. BRN. TAN MED. SAND & ROCKS (7.5YR 4/4)
END BORE

BORING NO.2

- 0" - 8" = DARK BROWN FINE SANDY LOAM. (10YR 3/2)
8" - 21" = LIGHT BROWN FINE SILTY LOAM. (10YR 4/2)
21" - 40" = LT. BROWN TAN FINE SILTY LOAM (7.5YR 4/4)
40" - 58" = LT. BROWN TAN FINE SILTY SAND - LOAM MIXED (7.5YR 4/4)
58" - 60" = LT. BROWN FINE SILTY LOAM (MOTTLED - 7.5YR 4/3)
END BORE

BORING NO.3

- 0" - 6" = DARK BROWN FINE SANDY LOAM. (10YR 3/2)
6" - 26" = LIGHT BROWN FINE SILTY LOAM. (10YR 4/2)
26" - 53" = LT. BROWN TAN FINE SILTY LOAM & SILTY SAND (10R 4/4)
- 53" - 59" = LT. BROWN FINE SILTY LOAM (MOTTLED - 7.5YR 4/3)
END BORE

BORING NO.4

- 0" - 7" = DARK BROWN FINE SANDY LOAM (10YR 3/2)
7" - 18" = LT. BROWN FINE SILTY LOAM & SAND MIXED (10YR 4/4)
18" - 30" = LT. BROWN FINE LOAMY SAND & GRAVEL (10YR 4/4)
30" - 58" = LT. BROWN FINE SILTY SAND (10YR 4/2)
58" - 60" = LT. BROWN FINE SILTY LOAM (MOTTLED 7.5YR 4/3)
END BORE

SOIL REVIEW/SEPTIC PERMIT APPLICATION

RECEIVED

SEP 08 1997

HELM

Washington County Health, Environment & Land Management

14900 61st Street N., P.O. Box 3803

Stillwater, MN 55082-3803

FEE: _____

430-6708 or 612/430-6656 FAX 612/430-6730

98-97047

Make checks payable to WASHINGTON COUNTY TREASURER *(Test Area No. 2)*

- | | | |
|---|--|--|
| \$150 - Soil Review Fee (Individual Lot) - | \$100 Base Fee, Plus \$50 Per Lot - Subdivision Fee. - | \$25 - Records Review Fee. |
| \$150 - New Standard Drainfield System Permit Fee. - | \$250 - Mound System Permit Fee - | \$125 - Septic Verification Fee. |
| \$70 - Replacement Standard Drainfield System Permit Fee. - | \$170 - Replacement Mound System Fee. - | \$110 - Modification Of Existing System (Tanks Only) |

| | | | | | |
|---|-------------------------|---|-------|------------------------|--|
| Legal Description and Parcel Identification | | Mannington Downs Add. - Lot 1 - Blk. 1 - West Lakeland Twp. | | 97475-2000 | |
| Applicant Cardinal Home Builders Inc. 2297 | | Att: Mr. Tom Wiener | | Geo: 19-029-20-32-0004 | |
| Stillwater Road | | | | | |
| St. Paul, Mn. 55119 - 739-8033 | | 2423 Manning Ave. N. | | | |
| Owner (if different from applicant) | Address | City | Zip | Phone | |
| Steve & Beth Nelson - Owner | 9018 Jasmine St. | C.G. | 55016 | | |
| Use of Building: NEW HOME | Number of Bedrooms: () | Gallons Per Day: () | | | |
| Check the following fixture(s) which are or will be installed: Garbage Disposal _____ Recreational Bathing Facility: (jacuzzi <input checked="" type="checkbox"/> , hot tub _____, etc.) | | | | | |
| New System <input checked="" type="checkbox"/> Approval Only _____ Previously Approved _____ Denied _____ Existing System Repair _____ Existing System Alteration _____ Fill Site _____ | | | | | |
| If this site has been previously approved, please attach a copy of the approval letter | | | | | |
| The following exhibits are required as part of this application and shall be attached here to: 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) copie 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. | | | | | |
| <p>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 the Washington County Building Official or his agent, 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 the Building Official or his agent 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 Building Official that the installation is ready for inspection.</p> | | | | | |
| By <u>Cardinal Home Builders Inc</u> Signature of Applicant (Owner or Builder) | | | | Date <u>9/8/97</u> | |

FOR OFFICE USE ONLY

| | | |
|---|--------------------------|--|
| REVIEWS: PLANNER _____ | INSPECTOR <u>P. Gamm</u> | DATE <u>9/8/97</u> |
| SITE EVALUATION: | | |
| Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table (Mottled Soil), Impervious Layer or Bedrock: | | |
| Soils Map Data: _____ | | Percolation Test Evaluation: |
| Setback: _____ | | 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: <input checked="" type="checkbox"/> Site Unsuitable: _____ Additional Tests Required: _____ | | |
| NOTES: | | |
| NOTES: Lot Size <u>3.23 acres</u> Year Built _____ | | |
| If You Need Assistance Due to Disability or Language Barrier, Please Call 430-6656 OR 430-6708 TDD 439-3220 | | |
| additional suitable area to east Boring at approx 905 contour showed mottle @ 36" suitable to 910 contour | | |