

AITKIN COUNTY ENVIRONMENTAL SERVICES

APPLICATION for an OPERATING PERMIT FOR WASTEWATER TREATMENT AND DISPERSAL

PERMITTEE _____ PARCEL NUMBER 01-0-015600

ADDRESS 41427 390th St. Aitkin MN 56431

LEGAL DESCRIPTION _____

TELEPHONE # _____ GIS LOCATION _____

**A. DESCRIPTION OF WASTEWATER TREATMENT AND DISPERSAL SYSTEM:
(Attach ISTS site evaluation and design; estimated cost of system
construction, operation, monitoring, service, component replacement, and
management; anticipated system life, hydraulic and organic loading rates)**

Type III mound because of soil separation, (7") . Gravity flow from house to septic tank. Pumped to mound.
Mound has 3 ft. washed sand under rockbed. 10 year flood Elv.= 1199.8' 100 year flood Elv.= 1202.7'
Spike on Power Pole at Elv.= 1202.8'

B. MONITORING PLAN AND REPORTING FREQUENCY:

PARAMETER	COMPLIANCE LIMIT	SAMPLE LOCATION	SAMPLE FREQUENCY	SAMPLE TYPE	REPORTING FREQUENCY
FLOW	300 GPD 600 GPD	Event counter	Once a Month or when present		Send Report to Aitkin Co. Once a year
5-DAY BOD					
TOTAL NITROGEN					
TOTAL PHOSPHORUS					
TSS					
FATS,OILS AND GREASE					
FECAL COLIFORM					
SEPARATION DISTANCE					

Owner will read event counter once a month or when present. Owner will send monthly readings report to Aitkin co. or the inspector ONCE A YEAR.

_____ will perform the monitoring of this septic system.