

AITKIN COUNTY ENVIRONMENTAL SERVICES

APPLICATION for an OPERATING PERMIT FOR WASTEWATER TREATMENT AND DISPERSAL

PERMITTEE Tim Patterson PARCEL NUMBER 09-0-002310

ADDRESS 29652 335th LANE Aitkin Mn 56431

LEGAL DESCRIPTION _____

TELEPHONE # 952-826-9480 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)

Adding 600 LIFT TO EXISTING 1350 COMPACTMENT TANK AND RE-BUILDING MOUND TO "OTHER" TYPE BECAUSE OF LACK OF SEPARATION

B. MONITORING PLAN AND REPORTING FREQUENCY:

PARAMETER	COMPLIANCE LIMIT	SAMPLE LOCATION	SAMPLE FREQUENCY	SAMPLE TYPE	REPORTING FREQUENCY
FLOW	450 gpd	will have an event catch	once a month when there		once a year to Aitkin County
5-DAY BOD					
TOTAL NITROGEN					
TOTAL PHOSPHORUS					
TSS					
FATS, OILS AND GREASE					
FECAL COLIFORM					
SEPARATION DISTANCE	3 FEET	mound	Inspect Annually for 2 yrs	Borescopes in field	Report to Aitkin County for 2 yrs - Report Annually

Tim Patterson will perform the monitoring of this septic system.

C. MAINTENANCE PLANS

PARAMETER	LOCATION	FREQUENCY
450 gpd	(each month) Read event counter when present	Each month it is used
Set pump float to approx 125 gpd cycle	Pump tank is 15 gallons per inch - doesn't change	CHECK ONCE A YEAR TO MAKE SURE FLOAT IS SET CORRECTLY
Keep log of gpd - Send to Aitkin Co. ONCE A YEAR	KEEP track monthly	ONCE A YEAR Report findings to Aitkin Co. -

D. MITIGATION PLAN:

WE will do a compliance inspection the next
2 yrs to insure the system is working
I will check lift pump setting for correct sizing

I hereby certify with my signature as the designer, that all data for the operating permit application is true and correct to the best of my knowledge. I agree to indemnify and hold Aitkin County harmless from loses, damages, costs and charges that may be incurred by the County because of the information submitted with this application.

Tom Antonson
Signature

1054
License Number

6-14-20
Date

Tom Antonson
Name (please print)

17633 STATE Hwy 6 Road, mn
56444
Address

218-851-7757
Telephone #

**MAINTENANCE SERVICE, MONITORING AND INSPECTION
CONTRACT
FOR INDIVIDUAL SEWAGE TREATMENT SYSTEM**

It is hereby agreed this 29 day of JUNE, 2010 by and between
Tom Antonsen (Inspector) and Tim Patterson (client)

(Client) Name & Address

Tim Patterson

Street Address 29652 335th LANE,

City, State, Zip Aitkin, Mn 56431

That in consideration of the payments provided herein, the Inspector shall provide services to perform Preventative Maintenance, Monitoring and Inspection of the Individual Sewage Treatment System (ISTS) located at the property described in the Aitkin County Operating Permit.

Each inspection includes an examination of the ISTS followed by a written report to the client. This inspection report shall contain recommendations for operation and maintenance for failure-preventative measures, if any are deemed appropriate by the inspector and a list of recommended corrective measures or replacement parts. The Inspector is authorized to submit a copy of the report to the Aitkin County Environmental Services Department.

This contract does not assume any responsibilities or obligations, which are normally the responsibilities of the Client, as related to parts or labor and does not extend to cover any costs that may be associated with any recommendations made under this contract.

The Inspector can only contract or subcontract for parts or labor after authorization. Billings for service calls shall be made on a case by case basis. This contract only covers maintenance, monitoring and inspection services per current Aitkin County Operating Permit and does not cover alarm calls of any kind.

The Inspector shall be provided access to the site and the system in order to perform the following services:

SEPTIC TANK AND LIFT STATIONS INSPECTION

(check the boxes needed to fill the requirements of the Operating Permit)

Check septic tank and compartments for solids buildup and general appearance. If necessary, have tanks pumped (cost of pumping is the responsibility of the client).

Check effluent filter for buildup and clean, if applicable.

Check pumping system, including control panel and floats.

Record and date the readings of the elapsed time meter and cycle counter(s), if applicable. Owner will take monthly reading

Check dosing settings (in the control panel, if applicable).

Other: _____

**If the septic tank or lift stations need pumping to be in compliance with the operating permit the cost of the pumping is the responsibility of the Client.

TREATMENT DEVICE

Inspect pretreatment unit (aerobic tank, sand filter, etc.) per manufacturer's recommendations, if applicable.

Inspect and clean any parts per manufacturer's recommendations.

Inspect and clean laterals, if applicable.

Inspect the appearance of the wastewater inside the unit for color, turbidity and examination of odors.

Sample effluent per Operating Permit monitoring requirements.

(Cost of sampling and analysis is the responsibility of the Client)

Other: _____

DISPERSAL FIELD

Inspect for visible signs of failure (surface discharge, soggy ground, wet spots, settling, etc.)

If liquid level monitors are installed, levels will be observed and recorded.

Flush filters and clean cartridges, if applicable.

Check field control unit solenoid operations or manual control, if applicable.

Other: _____

{ Type III Design Notes for Owner and Installer }

Property Owner: Tim PATERSON Date: 6-29-20 Installer's Initials: TJA
 PIN: 09-0-002310 Site Address: 29652 335th LANE Aitkin, MN 56431

This is a TYPE III Septic System, Operating Permit Required of Owner. Permit # _____

Reason for Type III System had only 6-8" separation

Description of System Combo tank with pump to mound

1st Tank Gal. <u>1000</u>	1st compartment gal. _____	2nd Comp <u>350</u>	3rd _____
2nd Tank Gal. _____	1st compartment gal. _____	2nd Comp _____	3rd _____
3rd Tank Gal. _____	1st compartment gal. _____	2nd Comp _____	3rd _____
1st Pump tank Gal. <u>600</u>	1st Pump Brand and model # _____		
1st Pump GPM _____	1st Pump Ft. of Head _____	1st Pump Gal. per Dose _____	
1st Pump tank Gal. per inch. _____	1st Pump Inches per Dose _____	1st Pump Doses per Day _____	
1st Pump Design GPD _____	1st Pump Measured dose per day _____	Timed or demand Dose _____	
Time Settings: Minutes ON _____	Minutes OFF _____	Inches Pumped after drainback _____	
Notes : _____			
2nd Pump tank Gal. _____	2nd Pump Brand and model # _____		
2nd Pump GPM _____	2nd Pump Ft. of Head _____	2nd Pump Gal. per Dose _____	
2nd Pump tank Gal. per inch. _____	2nd Pump Inches per Dose _____	2nd Pump Doses per Day _____	
2nd Pump Design GPD _____	2nd Pump Measured dose per day _____	Timed or demand Dose _____	
Time Settings: Minutes ON _____	Minutes OFF _____	Inches Pumped after drainback _____	
Notes : _____			

1st Alarm: Tank _____ Reason: _____
 2nd Alarm: Tank _____ Reason: _____
 3rd Alarm: Tank _____ Reason: _____

Water Meter Installed on house hold water: _____ Where is it located : _____

Event counter Installed on pump: YES Which Pump: Pump in 600 lift Gal. Per Event 125

Where is Event Counter Located: IN ALARM TOWER ON 600 LIFT TANK

Requirement of Operating Permit

- Owner to UNDERSTAND System Operation: Required to do monthly readings of water meter or event counter.
- Owner to record readings every month that system is being used, should know calculations for Gal. per day.
- Owner to REPORT to Aitkin Co. once a year with log of monthly readings and annual Inspection Report
- Owner to Hire an Inspector for a Once a year Inspection of the system's, Operation, Mechanical functions, and Compliance with Operating Permit.

In no event shall the Inspector be responsible for special or consequential damages, including but not limited to, loss of time, injury to personal property or any other consequential damages or incidental or economic loss due to equipment failure or for any other reason. This contract does not assume any responsibilities or obligations, which are normally, the responsibility of the Client or as, related to parts or labor and does not extend to cover any costs that may be associated with any recommendations made under this contract.

This contract shall be effective: Beginning June 29, 2020
and Ending June 29, 2022

Cost for Maintenance Service, Monitoring and Inspection Contract is:

\$ 225 /yr. For 2 years totaling \$ 450.00

The Inspector agrees to provide inspection, monitoring and routine maintenance service only under this contract. The Client remedies for breach of this contract shall be limited to refund of any of the amounts paid in advance for service. This contract may be renewed 30 days from the ending date.

Payment for all services shall be paid by OWNER.

Client:

Inspector:

Sign: 

Sign: 

Print: Tim Patterson

Print: Tom Antonsen

Date: 6-29-2020

Date: 6-29-2020