

Preliminary & Field Evaluation Form

www.SepticResource.com vers 12.4

Owner Information			
Date	<u>6/11/2020</u>	Sec / Twp / Rng	<u>S.25 T. 46 R.22</u>
Parcel ID	<u>04-0-038900</u>	LUG (county, city, township)	<u>Aitkin County</u>
Property Owner:	<u>Ronald Anick</u>	Owners address (if different)	
Property Address:	<u>10061 State Hwy. 27</u>		
City / State / Zip:	<u>Sturgeon Lake, MN. 55783</u>		

Flow Information and Waste Type / Strength			
Estimated Design flow	<u>450</u>	Anticipated Waste strength	<input type="checkbox"/> Hi Strength <input checked="" type="checkbox"/> Domestic
Comments:		Any Non-Domestic Waste	<input type="checkbox"/> Yes (class V) <input checked="" type="checkbox"/> No
		Sewage ejector/grinder pump	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Water softener	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Garbage Disposal	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Daycare / In home business	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Site Information			
Existing & proposed lot improvements located (see site map)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Well casing depth	<u>>50'</u>
Easements on lot located (see site map)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drainfield w/in 100' of residential well	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Property lines determined (see site map)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Site w/in 200' of transient noncommunity water supply (TNCWS)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Req'd setbacks determined (see site map)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Site w/in an inner wellhead mgmt zone (CWS/NTNCWS)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Utilities located & identified (gopher state one call)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Buried water supply pipe w/in 50' of system	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Access for system maintenance (shown on site map)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Site located in Shoreland (w/in 1000' of lake, 300' of river)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Soil treatment area protected	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Site map prepared with previous items included	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Construction related issues	<u>Existing tank was inspected by designer.</u>		

Soil Information

		Evidence of site:	
		Cut	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Filled	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Compacted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Disturbed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Original soils	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Soil logs completed and attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Perk test completed and attached (if applicable)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Soil loading rate (gpd/ft ²)	<u>0.78</u>	Percolation rate (if applicable)	_____
Depth/elev to SHWT	<u>6.00</u>	Flooding or run-on potential (comments)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Depth to system bottom maximum (or elev minimum)	<u>-30.00</u>	Flood elevation (if applicable)	_____
Depth/elev to standing water (if applicable)	_____	Elevation of ordinary high water level (if applicable)	_____
Depth/elev to bedrock (if applicable)	_____	Floodplain designation and elev - 100 yr/10 yr (if applicable)	_____
Soil Survey information determined (see attachment)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Differences between soil survey and field evaluation (if applicable)	_____ _____		

I hereby certify this evaluation was completed in accordance with MN 7080 and any local req's.

Roger Hunt
Designer Signature

R.H. Inspection & Design
Company

3847
License #

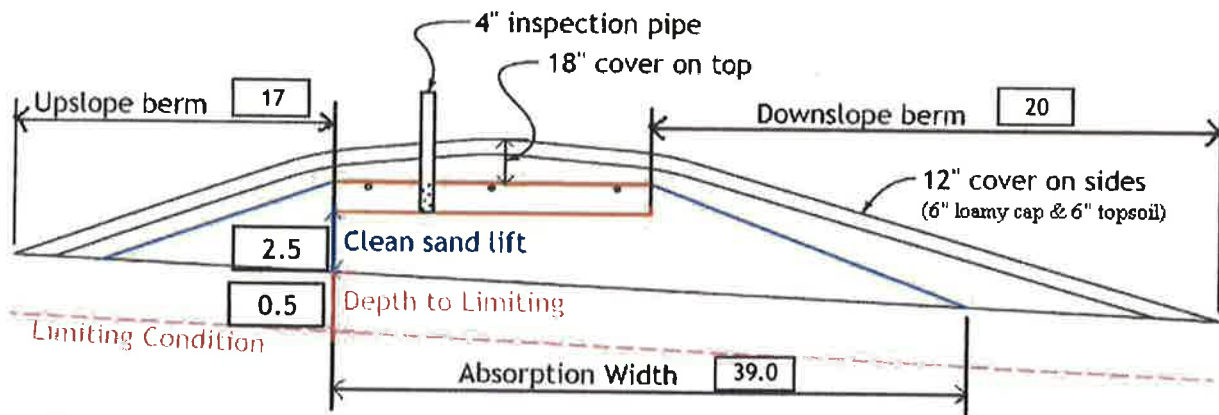
Mound Design - Aitkin county

Property Owner: Ronald Anick Date: 6/11/2020
 Site Address: 10061 State Hwy. 27 PID: 04-0-038900
 Comments: _____

Instructions: = enter data = adjust if desired = computer calculated - DO NOT CHANGE!

- 1) 3 bedroom Type III Residential System
- 2) 450 GPD design flow
- 3) No Garbage disposal or pumped to septic
- 4) 1000 Gal Septic tank (code minimum) 1000 Gal Septic tank (design size / LUG req'd)
 Tank options: none
- 5) 1.2 GPD/ft² mound sand loading rate contour loading rate of 12 req's a min 37.5 ft. long rockbed
- 6) 10.0 ft rockbed width 37.5 ft rockbed length
- 7) 3.0 ft lateral spacing 3.0 ft perforation spacing (maximum of 3 for both)
end feed manifold connection
- 8) 3 laterals 35.5 feet long 12.0 perfs / lateral 36 perfs total
 (1/2 a perf means the first perf starts at the middle feed manifold)
- 9) 1/4" inch perfs at 1 feet residual head gives 0.74 gpm flow rate per perforation
 for this perf size & spacing, & pipe size on line 12, max perfs/lateral = 16, line #8 must be less --> OK
- 10) 4.0 doses per day (4 minimum)
- 11) 113 gallons per dose (treatment volume) 2.00 5x
- 12) 1.50 inch diameter laterals must be used to meet "4x pipe volume" requirement 2.00 3x
- 13) 140 feet of 2.0 inch supply line leads to 24 gallons of drainback volume
 (Tip: "top feed" manifold to control the drainback)
- 14) 137 gallons TOTAL pump out volume (treatment + drainback)
- 15) 12 feet vertical lift from pump to mound laterals, leads to a:
- 16) 27 GPM @ 21 feet of head, Pump requirement (note: >50gpm may require an extra 3-6' of head)
- 17) 500 gal Dose tank (code minimum) 500 gal Dose tank (design size / LUG req'd) at 12.00 gpi
 leads to a
- 18) 11.4 inch swing on Demand float, or timed dosing of 5.1 min ON (confirm pump rate with drawdown
 (this delivers Average flow, =70% of Peak design flow) 9 hrs OFF test and adjust as necessary)
- 19) 12 inches from bottom of tank to "Pump OFF" float
- 20) 23 inches from bottom of tank to "Pump ON" float, or 12 inches to "Timer ON" float if time dosed
- 21) 26 inches from bottom of tank to "Hi Level" float, or 36 inches to "Hi Level" float if time dosed
- 22) 188 gallons reserve capacity (after High Level Alarm is activated)

- 23) **0.78** gpd/ft² Absorption area Soil Loading Rate, which gives a mound ratio of **1.5** (minimum) (this must match the soil boring log) desired mound ratio **1.5**
- 24) **2** percent site slope (0-20% range) **2** (% downslope site slope, if different than upslope)
- 25) **6** inches, or **0.5** ft. to Redox or other limiting condition (need at least 12" to be a Type I)
Treatment zone contains **0** inches of 0% soil credit, and **0** inches of 50% soil credit. Giving a:
- 26) **30** inch, or **2.5** ft. Sand Lift Mound **CRITICAL FOR FUTURE CERTIFICATIONS!!!**
- 27) **15.0** ft. base absorption width (with sand beyond rockbed as follows:)
39.0 greater of: absorption width OR sand slope
- 28) **0.0** ft. upslope and sideslope sand upslope **13.0**
5.0 ft. Downslope sand down slope **16.1**
- Individual slope ratios give BERM widths (topsoil beyond rockbed) of:
- 29) **4:1** upslope ratio **17** ft. upslope berm
- 30) **4:1** sideslope **19** ft. sideslope berms
- 31) **4:1** downslope **20** ft. downslope berm
- 32) Overall Dimensions: **10.0** ft. wide by **37.5** ft. long Rock bed
47 ft. wide by **76** ft. long Mound footprint



Note:

For 0 to 1% slopes, *Absorption Width* is measured from the *Bed* equally in both directions.
For slopes >1%, *Absorption Width* is measured downhill from the upslope edge of the *Bed*.

- 33) Rock Bed:
10.0 ft. by **37.5** ft. by **6** inches under pipe, plus 20% gives **13** yd³ or *1.4= **18** ton
- 34) Mound Sand: (note: volume is based on 3:1/4:1 slope from top of rockbed, Exchange sand for loamy cap if desired)
56.7 up + **74.4** downslope + **20.3** ends + **36.1** under rock = **225** yd³ or *1.4= **315** ton plus 20%
- 35) Loamy Cap:
43 ft. by **72** ft. 6" deep, plus 20% gives **69** yd³ or *1.4= **97** ton
- 36) Topsoil:
47 ft. by **76** ft. 6" deep, plus 20% gives **79** yd³ or *1.4= **111** ton

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

Roger H. H. H.
Designer Signature

R.H. Inspection & Design
Company

3847
License#

6/11/2020
Date

Installer Summary

1000 gallon Septic tank (minimum)

Tank options: none

500 gallon Dose tank (minimum)

at 12.00 gpi

27 GPM @ 21 ft. of head, Pump required

11.4 inch swing on Demand float which translates to roughly 6.7 inches of float tether length

if time dosing is required --> 5.1 minutes ON time & 9 hours OFF time

23 inches from bottom of tank to "pump ON" float, or 12 inches to "timer ON" float

26 inches from bottom of tank to "Hi Level Alarm" or 36 inches to "Hi level alarm" if time dosed

140 ft. of 2.0 inch supply line with end feed manifold connection

(Tip: "top feed" manifold to control drainback)

30 inch, or 2.5 ft. Sand Lift Mound

10.0 ft. wide by 37.5 ft. long Rock bed

3 laterals 1.50 inch diameter 35.5 ft. long

1/4" inch perfs 3.0 ft. perforation spacing 3.0 ft. lateral spacing

No Effluent filter & alarm

3 clean out & valve box assemblies

39.0 ft. Total sand ABSORPTION width (minimum)

13.0 ft. upslope and sideslope (sand beyond rockbed, minimum)

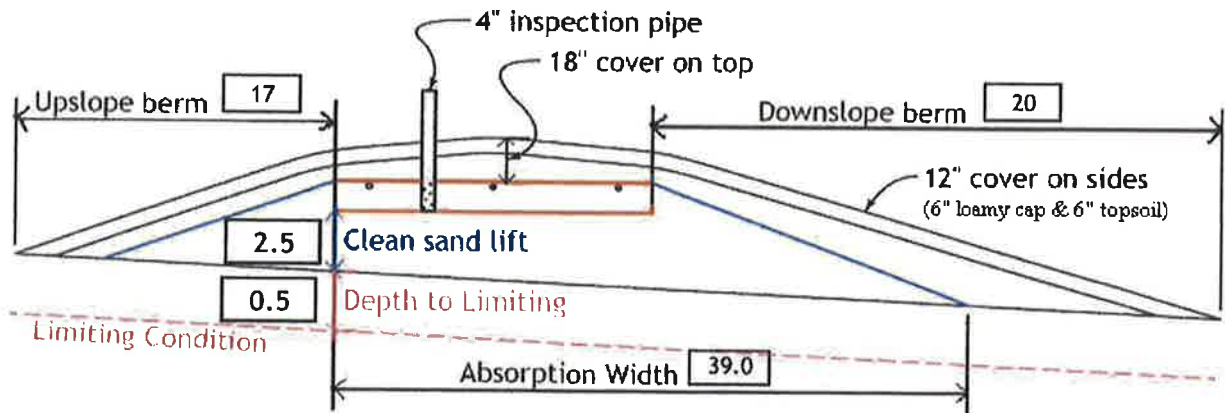
16.1 ft. Downslope (sand beyond rockbed, minimum)

Specific slope ratios give BERM widths (topsoil beyond rockbed) of:

4:1 upslope ratio 17 ft. upslope berm

4:1 sideslope 19 ft. sideslope berms

4:1 downslope 20 ft. downslope berm



Note:

For 0 to 1% slopes, *Absorption Width* is measured from the *Bed* equally in both directions.

For slopes >1%, *Absorption Width* is measured downhill from the upslope edge of the *Bed*.

Rock Bed:	13.0 yd ³ or *1.4=	18 ton	6 inches under pipe
Mound Sand:	225 yd ³ or *1.4=	315 ton	calculation based on 3:1/4:1 slope from top of rockbed
Loamy Cap:	69 yd ³ or *1.4=	97 ton	6" deep
Topsoil:	79 yd ³ or *1.4=	111 ton	6" deep

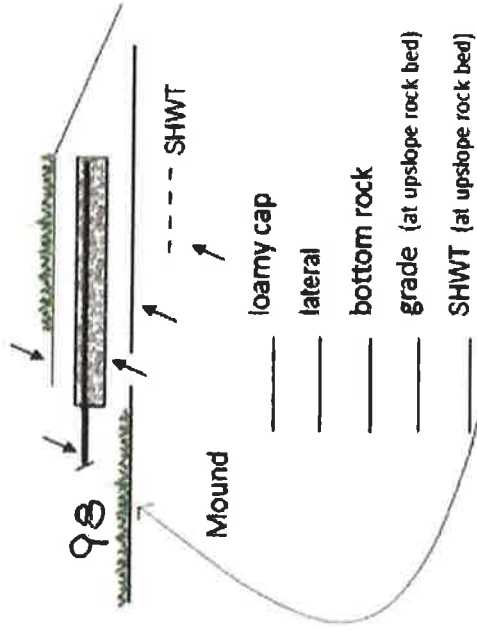
INSPECTOR CHECKLIST - mound

- 10061 State Hwy. 2/
 WELL setbacks: 20' to pressure tested sewer line (5 psi for 15 min)
 50' to everything 100' to dispersal area with shallow well
- PROPERTY LINES setback: 10' to everything
 Road setback: platted: 10' prop line. Metes & bounds: out of road easement, or outer ditch.
 LAKE / BLUFF setback: 20' for bluff. Lakes: GD ____, RD ____, NE _____. Protected wetland ____.
 Building setbacks: 10' for everything, 20' for dispersal area.
 WATER LINE under pressure sc 10' to bed, tank & sewer line. (else sewer line > 12" below, else ok w/pvc)
- Sewer line & baffle connection (no 90's, 3' between 45's, slope min 1" in 8', max 2" in 8')
 (no depth req's, clean out every 100', Sch 40 pipe)
- Septic tank and risers (water tight, insulated, proper depth, existing verified by pumping)
 mfg _____ 1000 gallons none _____
- Riser over outlet, riser over inlet or center, and 6"+ inspection pipe over any remaining baffles.
 No _____ effluent filter & alarm
 Dose tank risers and piping (water tight, insulated, proper depth, drainback)
 mfg _____ 500 gallons
- dose pump _____ 27 gpm 21 head VERIFY PUMP CURVE 5.1 min ON 9 hr OFF
- float setting drop 11.4 inches at 12.0 gpi "DESIGNED" 6.7 inches approx float tether length
 137.0 gal dose divided by _____ gpi "INSTALLED" = _____ inches float drop (field corrected)
 LABEL pump requirements and drawdown on riser or panel
- Cam lock reachable from grade - 30" max. J-hook weep hole. Supply line access (no hard 90's)
 2.0 inch supply pipe: Sch40, sloped 1/8"+, supported by 4" sch40 sleeve or compacted, and buried 6"+.
 splice box / control panel / electrical connections
 flow measurement: CT, ETM, time dosed, home water meter
 mound absorption area rough up
 mound rock dimensions 10.0 X 37.5
 Sand lift depth 30 inches. (Jar test : 2" sand leaves < 1/8" silt after 30 min)
- Absorption Sand beyond rock 13.0 upslope 16.1 downslope
- Bermed topsoil beyond rockbed 17 upslope 19 sideslope 20 downslope
- cover depth of 12-18"+ VERIFY
 3 laterals (1-2' from edge of rock)
 1.50 inch pipe size (Sch40 pipe & fittings)
 3.0 ft lateral spacing
- 1/4" inch perforations
 3.0 ft perforation spacing
- Air inlet at end of laterals, and at top feed manifold if necessary. VERIFY
 clean outs (no hard 90's)
 4" inspection pipe to bottom of rock, anchored VERIFY
- Abandon existing system - if necessary Re-use existing tank certification
 monitoring plan and type _____
 well abandonment form - if necessary _____

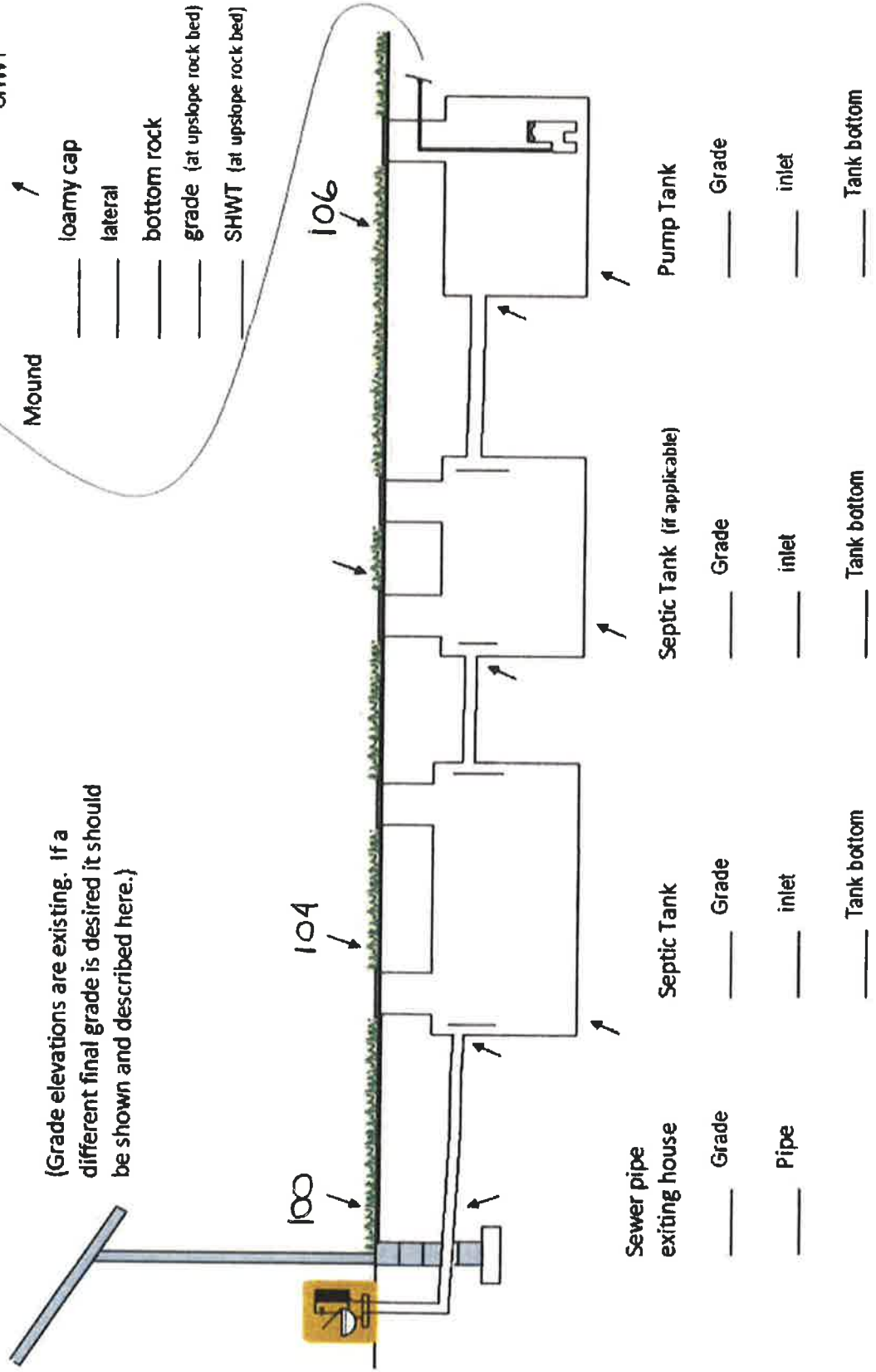
System Elevations

_____ benchmark _____

(Grade elevations are existing. If a different final grade is desired it should be shown and described here.)



- _____ loamy cap
- _____ lateral
- _____ bottom rock
- _____ grade (at upslope rock bed)
- _____ SHWT (at upslope rock bed)



Sewer pipe exiting house

_____ Grade

_____ Pipe

Septic Tank

_____ Grade

_____ inlet

_____ Tank bottom

Septic Tank (if applicable)

_____ Grade

_____ inlet

_____ Tank bottom

Pump Tank

_____ Grade

_____ inlet

_____ Tank bottom

Soil Observation Log

www.SepticResource.com vers 12.4

Owner Information	
Property Owner / project: <u>Ronald Anick</u>	Date <u>6/11/2020</u>
Property Address / PID: <u>10061 State Hwy. 27</u>	

Soil Survey Information	
<input type="checkbox"/> refer to attached soil survey	
Parent mat'l's:	<input checked="" type="checkbox"/> Till <input type="checkbox"/> Outwash <input type="checkbox"/> Lacustrine <input type="checkbox"/> Alluvium <input type="checkbox"/> Organic <input type="checkbox"/> Bedrock
landscape position:	<input type="checkbox"/> Summit <input checked="" type="checkbox"/> Shoulder <input type="checkbox"/> Side slope <input type="checkbox"/> Toe slope
soil survey map units:	_____ slope <u>2</u> % direction- <u>downhill</u>

Soil Log #1							
		<input checked="" type="checkbox"/> Boring <input type="checkbox"/> Pit		Elevation _____		Depth to SHWT <u>6"</u>	
Depth (in)	Texture	fragment %	matrix color	redox color	consistence	grade	shape
0-6	Topsoil	<35	5YR3/3		Friable	Weak	Blocky
6+	Sandy Loam	<35	10YR4/4	2.5YR4/8	Friable	Weak	Granular
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive
Comments: Mottles at 6"							

10061 State Hwy. 27

Soil Log #2

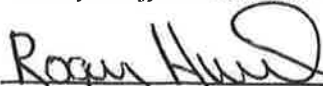
		<input checked="" type="checkbox"/> Boring	<input type="checkbox"/> Pit	Elevation _____		Depth to SHWT <u>6"</u>			
Depth (in)	Texture	fragment %	matrix color	redox color	consistence	grade	shape		
0-6	Topsoil	<35	5YR3/3		Friable	Weak	Blocky		
6+	Sandy Loam	<35	10YR4/4	2.5YR4/8	Friable	Weak	Granular		
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive		
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive		
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive		

10061 State Hwy. 27

Soil Log #3

		<input checked="" type="checkbox"/> Boring	<input type="checkbox"/> Pit	Elevation _____		Depth to SHWT <u>6"</u>			
Depth (in)	Texture	fragment %	matrix color	redox color	consistence	grade	shape		
0-6	Topsoil	<35	5YR3/3		Friable	Weak	Blocky		
6+	Sandy Loam	<35	10YR4/4	2.5YR4/8	Friable	Weak	Granular		
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive		
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive		
		<35 35 - 50 >50			loose friable firm rigid	loose weak moderate strong	single grain granular blocky prismatic platy massive		

I hereby certify this work was completed in accordance with MN 7080 and any local req's.



Designer Signature

R.H. Inspection & Design

Company

3847

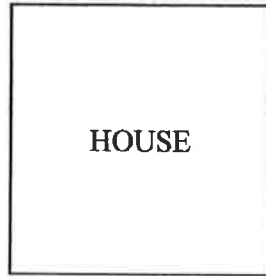
License #

STATE HWY. 27

10061 STATE HWY. 27
STURGEON LAKE, MN.
55783

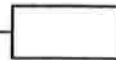


WELL
X



62'

EXISTING
SEPTIC
TANK

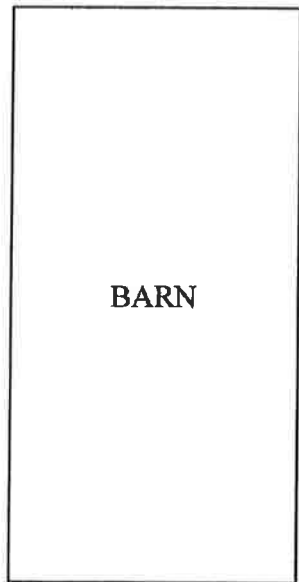


67'

500 GAL.
PUMP
TANK



140'



BARN



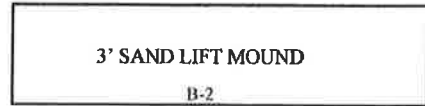
2% SLOPE

B-3

3' SAND LIFT MOUND

B-2

B-1





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): 8/17/2020

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: 04-0-038900

Property address: 10061 State Hwy. 27 Sturgeon Lake, MN. 55783

Reason for inspection: Permit

Property owner: Ronald Anick

Owner's phone: 218-839-7345

Owner's representative: _____

Representative phone: _____

Local regulatory authority: Aitkin County

Regulatory authority phone: 218-927-7342

Brief system description: Combo tank.

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: Roger Hurd

Certification number: 9573

Business name: Roger Hurd Inspection & Design

License number: 3847

Inspector signature: Roger Hurd

Phone number: 218-391-0510

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:

Tank is ok to use with new septic system.

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: _____ 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	
B. Periodically saturated soil/bedrock	
C. System separation	
D. Required compliance separation*	

*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.

AITKIN COUNTY ENVIRONMENTAL SERVICES

APPLICATION for an OPERATING PERMIT FOR WASTEWATER TREATMENT AND DISPERSAL

PERMITTEE RONALD ANICK PARCEL NUMBER 04-0-038900

ADDRESS 10061 STATE HWY. 27 STURGEON LAKE, MN. 55783

LEGAL DESCRIPTION T. 46 S. 25 R. 22

TELEPHONE # 218-839-7345

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)

MOTTLES IN SOIL @ 6" - TREATMENT WITH 3' SAND LIFT. MOUND.

B. MONITORING PLAN AND REPORTING FREQUENCY:

PARAMETER	COMPLIANCE LIMIT	SAMPLE LOCATION	SAMPLE FREQUENCY	SAMPLE TYPE	REPORTING FREQUENCY
FLOW	450 GPD	EVENT COUNTER	MONTHLY		ANNUALLY TO COUNTY
5-DAY BOD					
TOTAL NITROGEN					
TOTAL PHOSPHORUS					
TSS					
FATS, OILS AND GREASE					
FECAL COLIFORM					
SEPARATION DISTANCE	3'	MOUND	YEARLY	BORING	ANNUALLY TO COUNTY

HOMEOWNER RECORDS EVENT COUNTER MONTHLY AND REPORTS TO COUNTY.

HOMEOWNER will perform the monitoring of this septic system.

C. MAINTENANCE PLANS

PARAMETER	LOCATION	FREQUENCY
450 GPD	EVENT COUNTER AT PUMP TANK	MONTHLY

D. MITIGATION PLAN:

INSPECT SYSTEM 1 YEAR AFTER INSTALL.

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.

Rogan Hurd
Signature

3847
License Number

17 AUG 20
Date

ROGER HURD
Name (please print)

2169 SCHGLINDER RD.
Address
CARLTON, MN. 55718

218-391-0510
Telephone #