

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS)

Doc Type: Compliance and Enforcement

Instructions: Inspector must submit completed form to Local Governmental Unit (LGU) and system owner within 15 days of final determination of compliance or noncompliance. Instructions for filling out this form are located on the Minnesota Pollution Control Agency (MPCA) website at <https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf>.

Property information

Local tracking number: _____

Parcel ID# or Sec/Twp/Range: 11-0-050900 Reason for Inspection Permit

Local regulatory authority info: Aitkin Co. 218-927-7342

Property address: 43833 245th Ln. Aitkin Mn 56431

Owner/representative: owner = David Rosati / Rep. = Amber Hoggarth Owner's phone: 218-851-8838

Brief system description: Gravity flow to a 1200 septic tank, gravity flow to a 250 lift tank, pumped up under 245th Lane to a 10' x 40' rockbed mound. Approx, 240 ft

System status

System status on date (mm/dd/yyyy): 8/31/2021

Compliant – Certificate of compliance*

Noncompliant – Notice of noncompliance

(Valid for 3 years from report date unless evidence of an imminent threat to public health or safety requiring removal and abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.)

Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.

***Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.**

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 or under section 145A.04 subdivision 8.

Reason(s) for noncompliance (check all applicable)

- Impact on public health (Compliance component #1) – *Imminent threat to public health and safety*
- Tank integrity (Compliance component #2) – *Failing to protect groundwater*
- Other Compliance Conditions (Compliance component #3) – *Imminent threat to public health and safety*
- Other Compliance Conditions (Compliance component #3) – *Failing to protect groundwater*
- System not abandoned according to Minn. R. 7080.2500 (Compliance component #3) – *Failing to protect groundwater*
- Soil separation (Compliance component #5) – *Failing to protect groundwater*
- Operating permit/monitoring plan requirements (Compliance component #4) – *Noncompliant - local ordinance applies*

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.

By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Business name: Brunner Septic LLC.

Raini Kohl C-2703

Certification number: C- 3589

Inspector signature: 
(This document has been electronically signed)

License number: L-1347

Phone: 218-821-0704

Necessary or locally required supporting documentation (must be attached)

- Soil observation logs
- System/As-Built
- Locally required forms
- Tank Integrity Assessment
- Operating Permit
- Other information (list): _____

Property Address: 43833 245th Ln. Aitkin Mn 56431

Business Name: Brummer Septic LLC.

Date: 8/31/2021

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

Attached supporting documentation:

- Other: _____
- Not applicable

Any "yes" answer above indicates the system is an imminent threat to public health and safety.

Describe verification methods and results:

- Checked Drainfield / Mound Area For surfacing
- Checked Drainfield / Mound Area for Seepage
- Checked For Ponding in Existing Inspection Pipes

2. Tank integrity – Compliance component #2 of 5

Compliance criteria:

System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
If yes, which sewage tank(s) leaks:	

Attached supporting documentation:

- Empty tank(s) viewed by inspector
- Name of maintenance business: _____
- License number of maintenance business: _____
- Date of maintenance: _____
- Existing tank integrity assessment (Attach)
- Date of maintenance (mm/dd/yyyy): _____ (must be within three years)
- (See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))
- Tank is Noncompliant (pumping not necessary – explain below)
- Other: _____

Any "yes" answer above indicates the system is failing to protect groundwater.

Describe verification methods and results:

Inspected tanks through manholes. septic tank manhole raised to surface, both baffles in- place. Lift tank manhole raised to surface, pump power Off, no alarm.

3. Other compliance conditions – Compliance component #3 of 5

3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?

Yes* No Unknown

3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety? Yes* No Unknown

**Yes to 3a or 3b - System is an imminent threat to public health and safety.*

3c. System is non-protective of ground water for other conditions as determined by inspector? Yes* No

3d. System not abandoned in accordance with Minn. R. 7080.2500? Yes* No

**Yes to 3c or 3d - System is failing to protect groundwater.*

Describe verification methods and results:

Attached supporting documentation: Not applicable

4. Operating permit and nitrogen BMP* – Compliance component #4 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 specified in the system design? 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. Have the operating permit requirements been met? Yes No

b. Is the required nitrogen BMP in place and properly functioning? Yes No

Any "no" answer indicates noncompliance.

Describe verification methods and results:

Attached supporting documentation: Operating permit (Attach)

5. Soil separation – Compliance component #5 of 5

Date of installation 1987 Unknown
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging? Yes No

Compliance criteria (select one):

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <p>5a. 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:</p> <p>Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No* |
| <p>5b. 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:</p> <p>Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*</p> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No* |
| <p>5c. "Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules 7080.2350 or 7080.2400 (Intermediate Inspector License required ≤ 2,500 gallons per day; Advanced Inspector License required > 2,500 gallons per day)</p> <p>Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No* |

Attached supporting documentation:

- Soil observation logs completed for the report
- Two previous verifications of required vertical separation
- Not applicable (No soil treatment area)
- 2 prior soil verifications

Indicate depths or elevations

A. Bottom of distribution media	
B. Periodically saturated soil/bedrock	
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.**

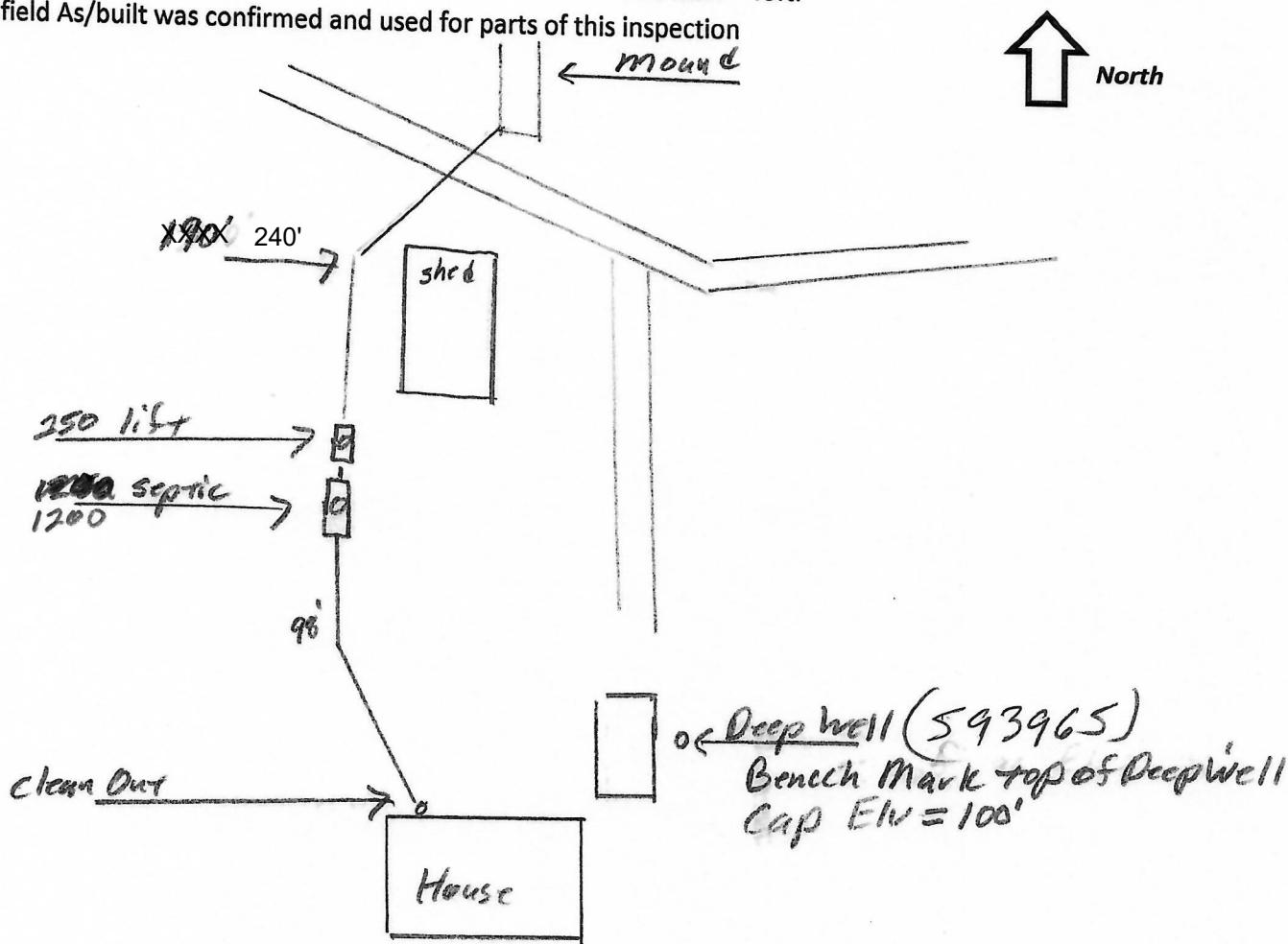
Describe verification methods and results:

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 Drawing }

Property Owner: David Rosati Date: 8/31/2021 Designer's Initials: JB
 Parcel ID. Number: 11-0-050900 Address: 43833 245th Ln. Aitkin MN 56431
 Aitkin Co. One Inch = 40ft.'

Drainfield As/built was confirmed and used for parts of this inspection



Elv. Of ground at Septic Tank = 84.9'

Inlet Septic Tank Elv. = 83.7'

Elv. Of ground at Pump Tank = 85.1'

Inlet Pump Tank Elv. = '

Pump Elv. = 81.4'

Bench Mark Elv. = 100' Top of Deep Well Cap

Ground at well Elv. = 98.9'

Estimated Big Pine Lake Elv. = 78'

Grade at Clean-out near house Elv. = 90.8'

Existing sewer pipe at house Elv. = 88.3'

Grade near Center of mound Elv. = 97.4'

SB - <input type="checkbox"/>	Top of Ground Soil Boring	
Depth (in.)	Texture	Color
Two prior soil verifications		
Mark Ritter 2008		
Lou Ann Maschler 2014		

SB - <input type="checkbox"/>	Top of Ground		Elv.
Depth (in.)	Texture	Color	

Purpose: This form *may* be used to certify the compliance status of the sewage tank components of the SSTS. **This form is not a complete SSTS inspection report, only a tank integrity assessment, and may only certify sewage tank compliance status when entirely completed and signed by a qualified professional.** SSTS compliance inspection report forms can be found at: <https://www.pca.state.mn.us/water/inspections>.

Instructions: This form may be completed, and signed, by a Designated Certified Individual (DCI) of a licensed SSTS inspection, maintenance, installation, or service provider business who personally conducts the necessary procedures to assess the compliance status of each sewage tank in the system. Only a licensed maintenance business is authorized to pump the tank for assessment. A copy of this information should be submitted to the system owner and be maintained by the licensed SSTS business for a period of five (5) years from the assessment date.

When this form is signed by a qualified certified professional, it becomes *necessary supporting documentation* to an Existing System Compliance Inspection Report: [Compliance inspection form - Existing system \(wq-wwists4-31b\)](#). This form can be found on the MPCA website at <https://www.pca.state.mn.us/water/inspections>.

The information and certified statement on this form is **required** when existing septic tank compliance status is determined by an individual other than the SSTS Inspector that submits an inspection report. This form represents a third party assessment of SSTS component compliance and is allowable under Minn. R. 7082.0700, subp. 4(B)(1). This form is valid for a period of three years beyond the signature date on this form unless a new evaluation is requested by the owner or owner's agent or is required according to local regulations. Additional Administrative Rule references for this activity can be found at Minn. R. 7082.0700, subp. 4(B),(C), and (D) and; Minn. R. 7083.0730(C).

Owner information

Owner/Representative ROSATI, DAVID & GAIL / Jeff Brummer
 Property address: 43833 245th Lane Aitkin MN 56431
 Local Regulatory Authority: Aitkin County Parcel ID: 11-0-050900

System status

System status on date (mm/dd/yyyy): 8/30/2021

Certificate of sewage tank compliance **Notice of sewage tank non-compliance**

Compliance criteria:

The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit - "Failure to Protect Groundwater."	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
The SSTS has a sewage tank that leaks below the designed operating depth - "Failure to Protect Groundwater."	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
The SSTS presents a threat to public safety by reason of structurally unsound (damaged, cracked, or weak) maintenance hole cover(s) or lids or any other unsafe condition - "Imminent Threat to Public Health or Safety."	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No

Any "yes" answer above indicates sewage tank non-compliance.

Company information

Company name: Timber Lakes Septic Service Inc
 Business license number: L455

Designated Certified Individual (DCI) information

Print name: Dan Swanson
 Certification number: C6023

I personally conducted the work described above as a Designated Certified Individual of a Minnesota-licensed SSTS inspection, maintenance, installation, or service provider Business. I personally conducted the necessary procedures to assess the compliance status of each sewage tank in this SSTS.

By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Designated Certified Individual's signature: Dan Swanson Date (mm/dd/yyyy): 8/30/2021
(This document has been electronically signed.)



Detailed Parcel Report

Parcel Number: 11-0-050900

General Information

Township/City: HAZELTON TWP
Taxpayer Name: ROSATI, DAVID & GAIL
Taxpayer Address: 4140 NEW YORK AVENUE
EAGAN MN 55123
Property Address: 43833 245th Ln
Township: 45 Lake Number: 1015700
Range: 27 Lake Name: BIG PINE LAKE (Hazelton) *RD*
Section: 21 Acres: 3.00
Green Acres: No School District: 1.00
Plat:
Brief Legal Description: E132 FT OF W678.5 FT OF LOT 1 IN DOC 286998

Tax Information

Class Code 1: Non-Comm Seasonal Residential Recreational *OHW 1263.6*
Class Code 2: Unclassified
Class Code 3: Unclassified *1009R 1264.8*
Homestead: Non Homestead *Floor 1265.8*
Assessment Year: 2020

Estimated Land Value: \$171,700.00
Estimated Building Value: \$90,700.00
Estimated Total Value: \$262,400.00
Prior Year Total Taxable Value: \$276,300.00
Current Year Net Tax (Specials Not Included): \$2,166.00
Total Special Assessments: \$0.00
**Current Year Balance Not Including Penalty: \$1,083.00
Delinquent Taxes: No

* For more information on delinquent taxes, please call the Aitkin County Treasurer's Office at 218-927-7325.

** Balance Due on a parcel does not include late payment penalties.



Minnesota Well Index

General Information

Unique Well ID:	593965	Well Name:	BROWN, JAMES T.	County:	Aitkin	Aquifer:	Quat. buried artes. aquifer
Well Elevation (msl in feet):	1301	Drilled Depth (ft):	68	Well Completed (ft):	68	Date Drilled:	04/25/1997
Township:	45	Range:	27	Dir:	W	Section:	21
Subsection:	CBCABA	Use:	domestic	Well Status:	Active	Depth To Bedrock:	
Driller:	Northland Well Co.	Entry Date:	06/19/1997	Update Date:	08/07/2017		

Related Resources:

[Go to MN Well Index Map](#) [Well Log Report](#) [Scanned Record\(s\)](#) [Stratigraphy Report](#)

More Details

Stratigraphy

Address

Chemical Data

Construction

Pump Test

Static Water

Comments

Location Changes

Overview Map

Description	From(ft)	To(ft)	Color	Hardness	Lith Primary	Lith Secondary	Interpretation
SANDY CLAY	0	40	BROWN	MEDIUM	CLAY		clay+sand-brown
SAND	40	52	BROWN	MEDIUM	SAND		sand-brown
CLAY	52	59	GRAY	MEDIUM	CLAY		clay-gray
SAND	59	68	BROWN	MEDIUM	SAND		sand-brown



Minnesota Pollution Control Agency

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

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Instructions on page 7

Parcel number: 11-0-050900

System status: [X] Compliant [] Noncompliant
(based on all compliance requirements)

For Local Tracking Purposes: [Empty box]

Summary Form

Property Information

Property owner name(s): James Brown
Property address: 43833 245th Ln
Property owner's address (if different): 18752 County Rd 101N Maple Grove Mn
County: Aitkin Property owner phone:
Permitting authority: Aitkin County
Date system constructed: 1990?? Reason for inspection: Property Transfer

System Description

Brief system description: Septic tank pump out across rd to mound
Local permit number:
Number of bedrooms: 3 Design flow rate:

Is the system:
In Shoreland area? [X] Yes [] No In Wellhead Protection Area? [] Yes [X] No
An U.S. Environmental Protection Agency (EPA) Class V Injection Well? [] Yes [X] No System serving a Minnesota Department of Health (MDH) licensed facility? [] Yes [X] No

Compliance Status (Based on state requirements - additional local requirements may also apply.)

Based on the information gathered and reported on attached forms, the compliance status of this system is (check one):
[X] Certificate of Compliance - valid until (3 years from date of report): July 14-2011
[] 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 [] Failing to protect ground water [] Not in compliance with operating permit

Certification (Completed form must be submitted to the local unit of government within 15 days.)

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.

Name: Mark P Ritter Certification number: 698 1672
Business license name and number: Ritter Sewer & Excavating 698 or
Name of local unit of government:
Signature: [Signature] Date: 7.28.08

Required Attachments

Inspector Complete: This inspection report is 6 7 pages long.

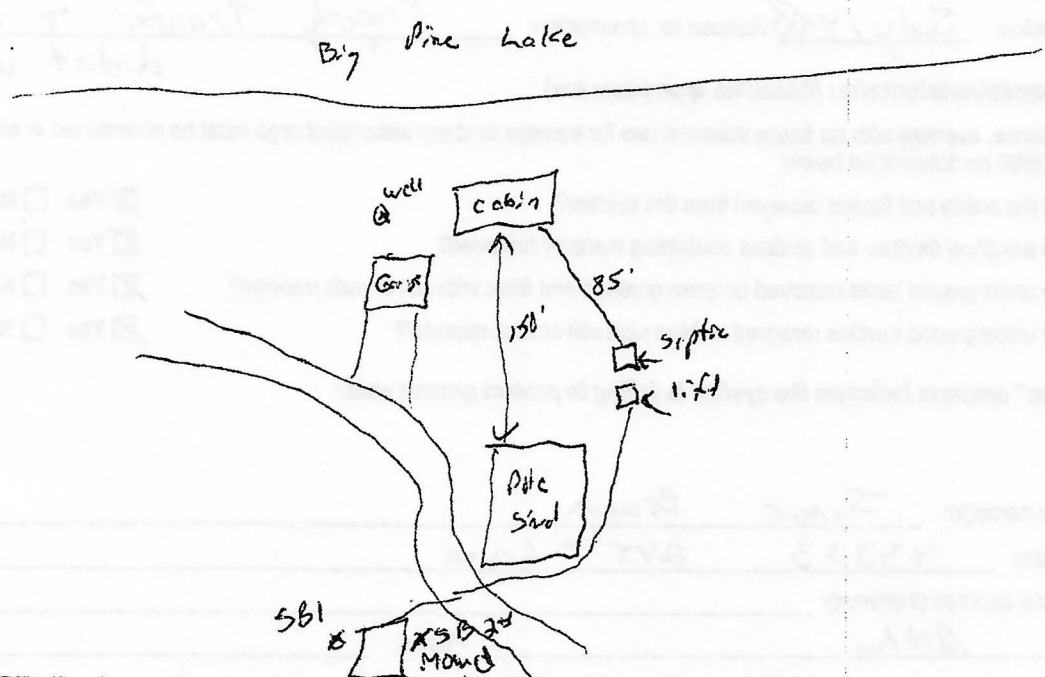
Check compliance forms attached: [X] Hydraulic Performance [X] Tank Integrity [X] Soil Separation [] Operating Permit Form (if applicable) [X] System drawing/As-built drawing [] An assessment of any local requirements that are different from what is required on this form [X] Soil Boring Logs [X] Abandonment form (if appropriate) [] Other information (list):

Upgrade Requirements (derived from Minn. Stat. § 115.55) An imminent threat to public health and safety (IPHS) 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.

Site Sketch:

Name: Jamr Brown

Re Code: 11-0-050900



Soil Borings (BR #): Locate each boring on the map above, indicate on the right of the column the soil texture, structure, color, depth of each different soil type, evidence of mottling, bedrock and standing water. Also indicate if the material is fill.

BR #		BR #
0 to 6"	Topsoil 10YR 3/2	0 to 4"
6" to 22"	loam/clay 7.5YR 6/4 6/4 = 4/4	4" to 20"
22" to 50"	clay loam slight leaching at approx. 22"	20" to 52"
	no mottles found to 52"	

RECORD DEPTH OF MOTTLING, SEASONAL HIGH WATER (AS DETERMINED USING THE MUNSELL COLOR BOOK) OR BEDROCK ON ABOVE LINES

Comments: mound system was built into hillside, but seems to meet 30" separation on entire mound area

What needs to be completed to bring the above system into compliance if found not in compliance? _____



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): 11/3/2014

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: 11-0-050900

Property address: 43833 245th Lane Reason for inspection: permit

Property owner: Dave Rosati Owner's phone: 651-452-9697

Owner's representative: _____ Representative phone: _____

Local regulatory authority: Aitkin County Regulatory authority phone: 218-927-7342

Brief system description: 1200 septic tank, 250 lift tank, 10 x 40 mound

Comments or recommendations:

*All distances, sizes and dimensions are approx

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: LouAnn Maschler/Dan Maschler Certification number: 2264/7907

Business name: Maschler Septic Consultants, Inc License number: L2264

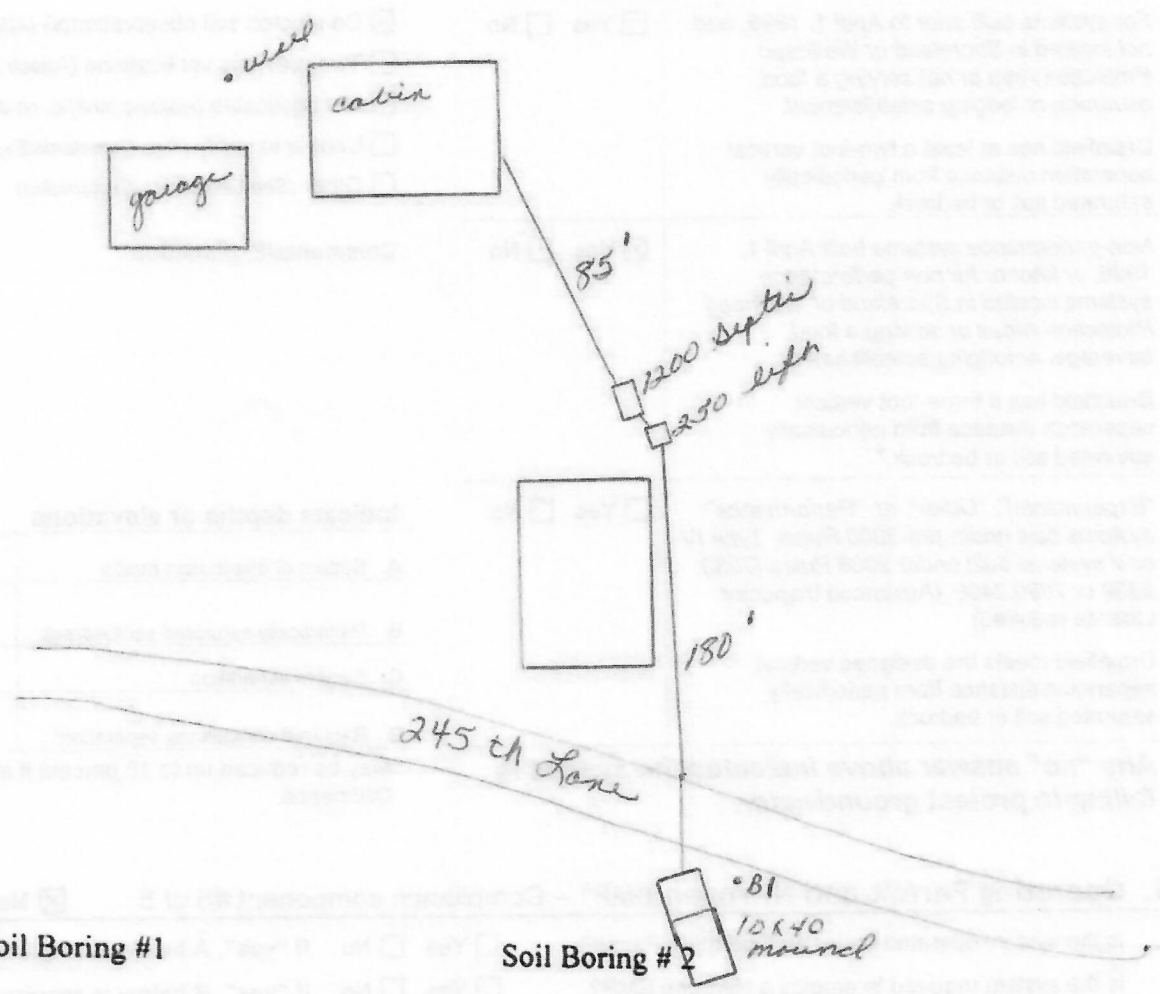
Inspector signature: *LouAnn Maschler* Phone number: 218-839-3042

Necessary or Locally Required Attachments

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

SITE SKETCH

NAME Rosati RE 11-0-050900



Soil Boring #1

0-6	Topsoil	10xR 3/2
6-24	loam	10xR 4/4
24-36	clay loam	10xR 1/3

Soil Boring #2

10x40 mound

System appears to be working and is in compliance with MN 7080 on the date of inspection. The inspection in no way warrants the system and its functioning beyond this date.

GPS Coordinates:

Tank: X _____ Y _____

Drainfield: X _____ Y _____

Well: X _____ Y _____