

**SUBSURFACE SEWAGE TREATMENT SYSTEM INSPECTION FORM
AITKIN COUNTY, MINNESOTA**

Township Shannon Date of Inspection 6-28-22 App. Number 2021-008198

Owner Donald Fairbanks Parcel Number 29-1-414300

Project Address 52055 Lake Ave Installer Lead Consultants

City Mooseport Zip Code 55720

New Repair DIST. or DROP BOX & TYPE _____

SETBACKS:

Buildings to tank(s) 25'
Buildings to drainfield Holding Tanks
Well(s) 50' or 100' No well yet
Lake/Creek/Wetland 2100'

TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:

Trench/Bed depth _____
Trench/Bed length _____
Trench/Bed bottom width _____
Trench spacing _____
Drainfield rock below pipe _____
Size of gravelless pipe _____
Depth of backfill _____
Absorption area: square feet _____
lineal feet _____

SEPTIC TANKS: New Existing _____

Number of tanks installed 2 Subsoil
Liquid capacity and type 2 x 1500s plastic
Type of baffle Plastic
Inspection pipes 2-6" each
Manholes size 20" 24" each
Manhole to grade Yes No _____

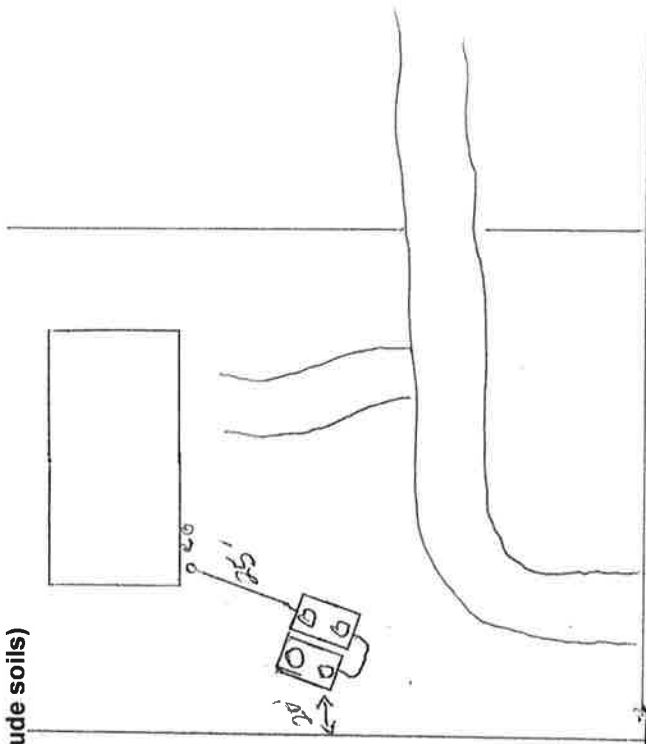
PUMPS: New _____ Existing _____

Tank capacity and type _____
Pump manufacturer & model # _____
Horsepower & GPM _____
Feet of head _____
Gallons per cycle _____
Size of discharge line _____
Type & location of alarm Elec. @ 2nd Tank
Water meter _____

MOUNDS:

Percent slope _____
Upslope sand width _____
Downslope sand width _____
Sideslope sand width _____
Drainfield rock below pipe _____
Depth of sand below rock _____
Perforation size & spacing _____
Pipe size & spacing _____
Dimensions of rock bed _____
Dimensions of sand base _____
Final cover _____

DRAWING OF SYSTEM: (include soils)



Inspector's Comments: AL

Inspector's Signature [Signature] Installer's Signature _____