FIELD EVALUATION SHEET

PRELIMINARY EVALUATION DATE 10-1-2 , FIELD EV PROPERTY OWNER: DENNIS OLSON ADDRESS: CITY, STATE, ZIP:	ALUATION DATE 10 ~ 1~ 21 PHONE
LEGAL DESCRIPTION: PIN# 09-0-03\800 SEC 19 T 46 R 25 FIRE# LAKE/RIVER RABBIT LAKE LA	TWP NAME GLEN TWIP
DESCRIPTION OF SOIL TREATMENT AREAS AREA #1 AREA #2 DISTURBED AREAS YES NO Y YES NO Y COMPACTED AREAS YES NO Y YES NO Y FLOODING YES NO Y YES NO Y RUN ON POTENTIAL YES NO Y SLOPE % DIRECTION OF SLOPE LANDSCAPE POSITION HTLL ST.DE VEGETATION TYPES DEPTH TO STANDING WATER OR MOTTLED SOIL: BORING	REFERENCE BM ELEV. 100 FT REFERENCE BM DESCRIPTION BM IS SET NEXT TO 100' SETBACK SURVEY STAVE FROM LAVE
BOTTOM ELEVATION-FIRST TRENCH OR BOTTOM OF ROC	<u>K BED</u> : #1FT., #2FT.
SOIL SIZING FACTOR: SITE #1 1.27 , SITE #2	1.27
CONSTRUCTION RELATED ISSUES:	
SITE EVALUATOR NAME: LARRY LILJENQUIST TI	rry Lyngul
SITE EVALUATOR NAME: LARRY LILJENQUIST TI	ELEPHONE# 218 820 8886
UG REVIEW	DATE
Comments:	

SOIL BORING LOGS ON REVERSE SIDE

SOILS CHARTS FOR BOTH PROPOSED AND ALTERNATE SITES

1 (PROPOSED) SOILS DATA

DEPTH	TEXTURE	MUNSELL
(INCHES)		COLOR
0-6	TOPSOIL	
6-20	SANDY LOAM	10 YR 5/6
30.72	SANDY	104x 4/6
	ING ENDS	
. 8 - 1 -		

2 (PROPOSED) SOILS DATA

DEPT	H	TEXTURE	MUNSELL
(INC)	JES)族	3 10 2 11 11 17	COLOR
	0-6	TOPSOIL	
analirinosta dermanan	6-19	SANDY	10485/6
	19-24	SMO	104R4/6
	24' D	ORINGE VETO RO	IND AT
,			

1 (ALTERNATE) SOILS DATA

0-6	TOPSOIL	
6-18	SANDY	10485/6
18-30	SAMOY	10 YR 4/6

2 (ALTERNATE) SOILS DATA

HES)		GOLOR COLOR
0-6	TOPSOIL	
6-16	SAUDY	10 4R 5/6
	SANDY	
16-28	Loam	10 4x 4/6
		76
	6-16	6-16 LOAM SANDY

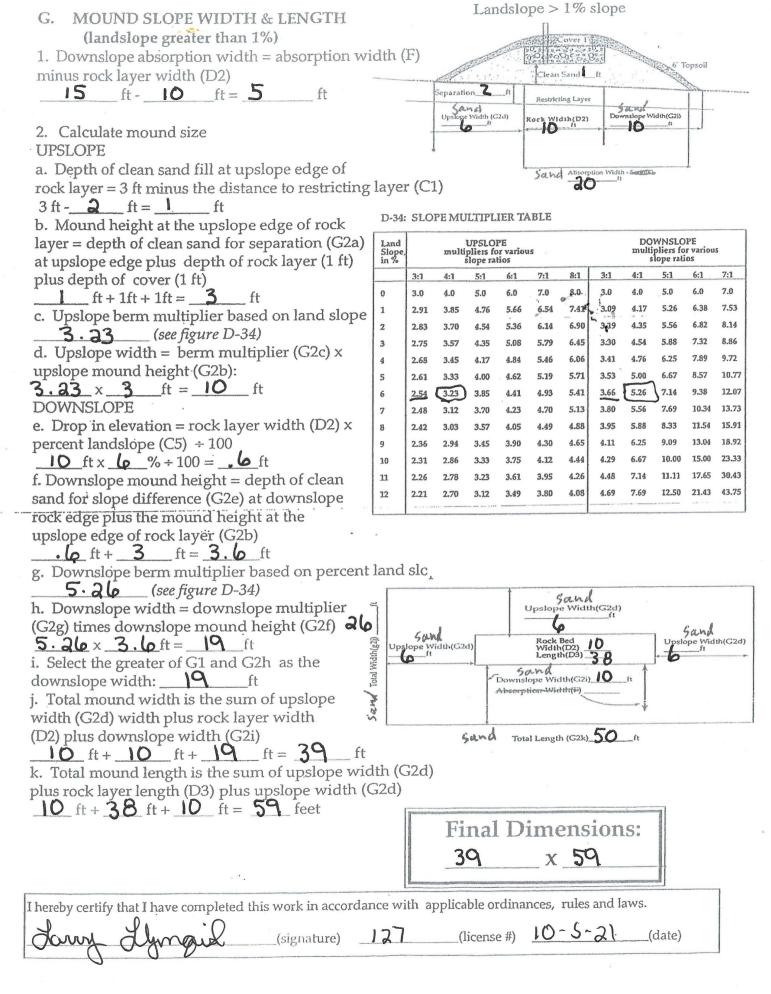
MOUND DESIGN WORK SHEET (For Flows up	o to 120	00 gpd	l)			
A. Average Design FLOW	A-1: Es	limated	Sewag	ge Flows in	Gallons per	Day
Estimated 450 gpd (see figure A-1) or measured x 1.5 (safety factor) = gpc B. SEPTIC TANK Capacity gallons (see figure C-1)	number bedrooi 2 3 4 5 6 7		Class 300 450 600 750 900 1050 1200	1 Clas 225 300 375 450 525 600 675	180 218 2256 256 294 332 370	Class IV 60% of the values in the Class I II, or III
	0					Colorri
 C. SOILS (refer to site evaluation) 1. Depth to restricting layer =		C-1: Se	of Min	Capacities (in nimum Liquid Capacity	gallons) Liquid capacity garbage dispo	
 Depth of percolation tests =feet Texture 5007 LOAM Percolation rate 6-15 mpi 		2 or less 3 or 4 5 or 6 7, 8 or 9		750 1000 1500 2000	1125 1500 2250 3000	1500 2000 3000 4000
4. Soil loading rate	e D-33)				•	
D. ROCK LAYER DIMENSIONS			and the second of the second o			
1. Multiply average design flow (A) by 0.83 to obtain						
2. Determine rock layer width = 0.83 sqft/gpd x line	ar Load ft	ling R			x 5 0 1	
0.83 sqft/gpd x gpd/sqft = 10 3. Length of rock layer = area ÷ width =	1			Mou	nd LL	~
$380 \text{ sqft (D1)} \div 10 \text{ ft (D2)} = 38 \text{ ft}$			- POSTAL PROPERTY AND ADDRESS OF THE POSTAL PROPERTY ADDRESS OF THE POSTAL PROPERTY AND ADDRESS OF THE POSTAL PROPERTY ADDRESS	< 120) MPI	≤12 ≤6
E. ROCK VOLUME				≥ 120) MPI	≤6
 Multiply rock area (D1) by rock depth of 1 ft to get 380 sqft x 1 ft = 380 cuft Divide cuft by 27 cuft/cuyd to get cubic yards 380 cuft ÷ 27 cuyd/cuft = 14 cuyd Multiply cubic yards by 1.4 to get weight of rock in cuyd x 1.4 top/cuyd = 19.6 tops 		feet of	rock			

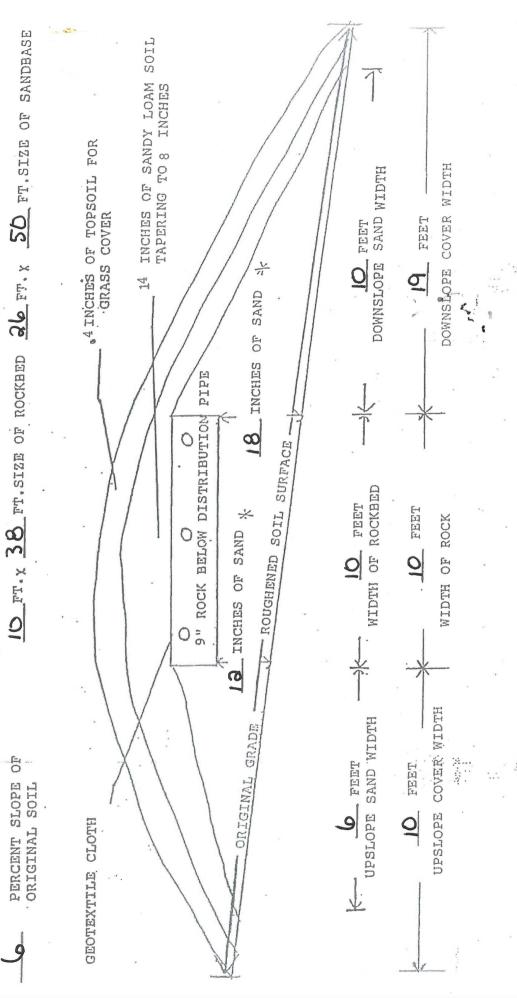
F. SEWAGE ABSORPTION WIDTH

Absorption width equals absorption ratio (See Figure D-33) times rock layer width (D2)

$$1.5 \times 10 \text{ ft} = 15 \text{ ft}$$

Percolation Rate in Minutes per Inch (MPI)	Soil Texture	Loading Rate Gallons per day per square foot	Absorption Ratio
Faster than 5	Coarse Sand Medium Sand Loamy Sand Fine Sand	1.20	1.00
6 to 15	Sandy Loam	0.72	1.50
16 to 30	Loam	0.60	2.00
31 to 45	Silt Loam Silt	0.50	2.40
46 to 60	Sandy Clay Loan Silty Clay Loam Clay Loam	0.45	2.67
61 to 120	Silty Clay Sandy Clay Clay	0.24	5.00
Slower than 120*			





PRESSURE DISTRIBUTION SYSTEM

Select perforation spacing = 3 2.

3. Since perforations should not be placed closer than 1 foot to the edge of the rock layer (see diagram), subtract 2 feet from the rock layer length.

$$\frac{38}{\text{Rock layer length}} - 2 \text{ ft} = \frac{36}{100} = \frac{3}{100} = \frac{3}{100}$$

Determine the number of spaces between perforations. Divide the length (3) by perforation spacing (2) and round down to nearest whole number.

Perforation spacing = 3 ft ÷ 3 ft = 12 spaces

5. Number of perforations is equal to one plus the number of perforation spaces(4). Check figure E-4 to assure the number of perforations per lateral guarantees <10% discharge variation.

12 spaces + 1 = 13 perforations/lateral

6. A. Total number of perforations = perforations per lateral (5) times number of laterals (1)

13 perfs/lat \times 3 lat = 39 perforations

B. Calculate the square footage per perforation.

Should be 6-10 sqft/perf. *Does not apply to at-grades*. Rock bed area = rock width (ft) \times rock length (ft)

10 ft x 38. ft = 380 sqft

Square foot per perforation = Rock bed area ÷ number of perfs (6)

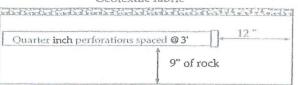
 $\frac{1380}{380}$ sqft $\frac{139}{39}$ perfs = $\frac{9.14}{39}$ sqft/perf

7. Determine required flow rate by multiplying the total number of perforations (6A) by flow per perforation (see figure E-6)

39 perfs x . **14** gpm/perfs = **29** gpm

8. If laterals are connected to header pipe as shown on upper example, to select minimum required lateral diameter; enter figure E-4 with perforation spacing (2) and number of perforations per lateral (5) Select minimum diameter for perforated lateral = $\frac{\sqrt{4}}{}$ inches.

If perforated lateral system is attached to manifold pipe near the center, lower diagram, perforated lateral length (3) and number of perforations per lateral (5) will be approximately one half of that in step 8. Using these values, select minimum diameter for perforated lateral = _____ inches.



Perf Sizing 3/16" - 1/4" Perf Spacing 1.5'- 5'

E-4: Maximum allowable number of 1/4-inch perforations per lateral to augrantee <10% discharge variation

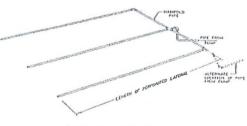
perforation spacing			CONTRACTOR	on the control of the
(feet)	1 inch	1.25 inch	1.5 inch	2.0 inch
2.5	8	14	18	28
3.0	8.	, 13	17	26
3.3	7	12	16	25
4.0	7	91	15	23
5.0	6	10	14	22

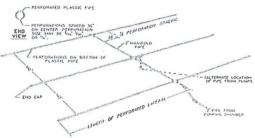
E-6: Perforation Discharge in apm perforation diameter (inches) head 1/8 3/16 7/32 1/4 (feet) 1.00 0.18 0.42 0.56 0.74 2.0b 0.26 0.59 0.80 1.04 5.0 0.41 0.94 1.26 1.65

^a Use 1.0 foot for single-family homes.

b Use 2.0 feet for anything else.

MANIFOLD LOCATED AT END OF PRESSURE DISTRIBUTION SYSTEM





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

(signature) 127 (license #)

10-5-21

PUMP SELECTION PROCEDURE

1. Determine pump capacity:

A. Gravity distribution

- 1. Minimum required discharge is 10 gpm
- Maximum suggested discharge is 45 gpm. For other establishments at least 10% greater than the water supply rate, but no faster than the rate at which effluent will flow out of the distribution device.

B. Pressure distribution

See pressure distribution work sheet

Transa A	~ D	Calactad	******	annagitur.	29	anm
rrom A	OL D	Sefecten	pump	capacity.	94	ghm

2.	Determine	pump	head	requ	iirements	30
----	-----------	------	------	------	-----------	----

A. Elevation difference between pump and point of discharge?

8.5 feet

B. Special head requirement? (See Figure at right - Special Head Requirements)

5 feet

C. Calculate Friction loss

1. Select pipe diameter 2 in

2. Enter *Figure E-9* with gpm (1A or B) and pipe diameter (C1). Read friction loss in feet per 100 feet from Figure E-9

Friction Loss = 1.55 ft/100ft of pipe

3. Determine total pipe length from pump discharge to soil treatment discharge point. Estimate by adding 25 percent to pipe length for fitting loss. Total pipe length times 1.25 = equivalent pipe length
16 feet x 1.25 = 20 feet

4. Calculate total friction loss by multiplying friction loss (C2) in ft/100 ft by the equivalent pipe length (C3) and divide by 100.

= 1.55 ft/100ft x 20 ÷100 = .3\ ft

D. Total head required is the sum of elevation difference (A), special head requirements (B), and total friction loss (C4)

8.5 ft + 5 ft + .3 ft =

Total head: 14 feet

3. Pump selection

A pump must be selected to deliver at least __gpm (1A or B) with at least __l feet of total head (2D)

Special	Head	Requirements	
Gravity D	istribu	tion	0 f
Pressure	Distrib	ution	5 f

2A. elevation

difference

total pipe length

inlet-

pipe

soil treatment system

& point of discharge

E-9: Friction Loss in Plastic Pipe							
Per 100 feet							
nominal pipe diameter flow rate 1.5" 2" 3" gpm							
20	2.47	0.73	0.11				
25	3.73	1.11	0.16				
30	5.23	(1.55)	0.23				
35	6.96	2.06	0.30				
40	8.91	2.64	0.39				
45	11.07	3.28	0.48				
50	13.46	3.99	0.58				
55		4.76	0.70				
60		5.60	0.82				
65		6.48	0.95				
70		7.44	1.09				

10-5-21

(license #)

(date)

I hereby	certify that I have	completed	this work in accordance with applicable ordin	nances,	rules and lav	VS.
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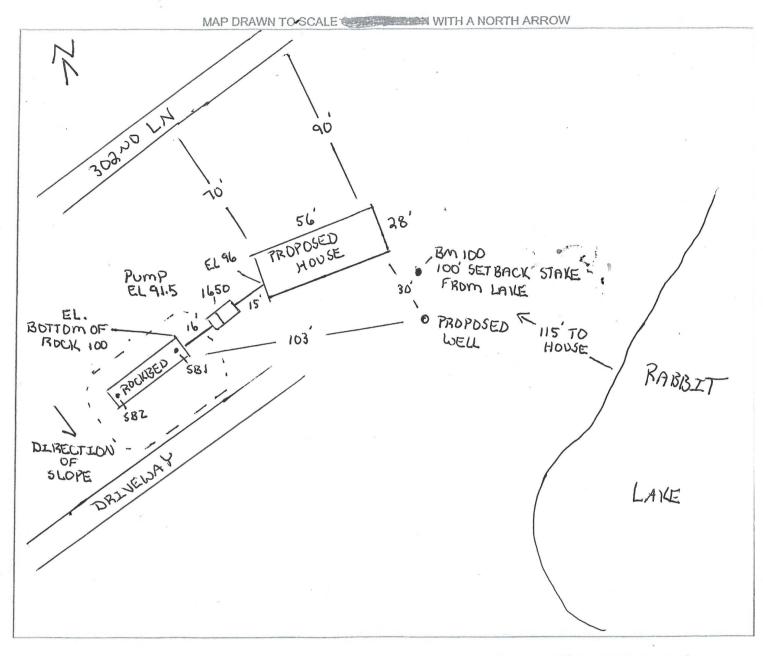
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☐ WATER WELLS WITHIN 100 FT OF TREATMENT AREAS

PRESSURE WATER LINES WITHIN 10 FT OF TREATMENT AREAS

DATE: 10-5-21



CHECK OFF LIST--HAVE ALL OF THE FOLLOWING BEEN DRAWN ON THE MAP?? SHOW EXISTING OR PROPOSED

STRUCTURES	☐ LOT IMPROVEMENTS	INDICATE ELEVATIONS
ALL SOIL TREATMENT AREAS	ALL ISTS COMPONENTS	
HORIZONTAL AND VERTICAL	REFERENCE	BENCHMARK 100
POINT OF SOIL BORINGS	☐ DIRECTION OF SLOPE	ELEVATION OF SEWER LINE @ HOUSE 96
LOT EASEMENTS	ALL LOT DIMENSIONS	ELEVATION @ TANK INLET 95.5
DISTURBED/ COMPACTED A		The same and the s
SITE PROTECTION—LATHE A		ELEVATION @ BOTTOM OF ROCK LAYER 160
ACCESS ROUTE FOR TANK	MAINTENANCE	ELEVATION @ BOTTOM OF BORING OR
REQUIRED SETBACKS	Tananana wa	RESTRICTIVE LAYER 97
STRUCTURES [PROPERTY LINES	ELEVATION OF PUMP 91.5
COMMENTS:		ELEVATION OF DISTRIBUTION DEVICE 100.5
	Harry Hyngul	
DESIGNER SIGNATUR	Edarri allemand	
ICENSE# 127	0000	DATE 10-5-21

Subsurface Sewage Treatment System Management Plan

Property Owner: DENNES OLSON	Phone:	Date: 10-5-21
Mailing Address:	City:	
Site Address:	City:	Zip:
This management plan will identify the operation and main performance of your septic system. Some of these activities must be performed by a licensed septic service provider or	s must be performed by you,	to ensure long-term , the homeowner. Other tasks
System Designer: Recommends SSTS check every		tem needs to be checked
Local Government: Recommends SSTS check every	months	every 36 months.
State Requirement: Requires SSTS check every <u>36</u> more (State requirements are based on MN Rules Chapter 7080.2450, Subp. 2	2 & 3)	
Homeowner Management Tasks:		
Leaks – Check (look, listen) for leaks in toilets and dripping		
Surfacing sewage – Regularly check for wet or spongy soil	around your soil treatment a	rea.
Effluent filter – Inspect and clean twice a year or more.	somion or maintenance prov	vidor any timo an alarm signals
Alarms – Alarm signals when there is a problem. Contact a Event counter or water meter – Record your water use.	service of maintenance prov	ider any time an alarm signals.
-recommend meter readings be conducted (<i>circle</i>)	one: DAILY WEEKLY	MONTHLY N/A)
Licensed septic service provider or maintenance provider Check to make sure tank is not leaking Check and clean the in-tank effluent filter (if expected in all septions) Recommend if tank should be pumped Check inlet and outlet baffles Check the drainfield effluent levels in the rock Check the pump and alarm system functions Check wiring for corrosion and function Check dissolved oxygen and effluent temperated in the provide homeowner with list of results and an infilial filter (if expected in the pumper in the provide homeowner with list of results and an infilial filter (if expected in the pumper in the provide homeowner with list of results and an infilial filter (if expected in the pumper in the provide homeowner with list of results and an infilial filter (if expected in the provide in the pr	xists) c tanks layer cure in tank y action to be taken	
"I understand it is my responsibility to properly operate and ma Management Plan. If requirements in the Management Plan are necessary corrective actions. If I have a new system, I agree to a system."	not met, I will promptly notify	the permitting authority and take
Property Owner Signature:		Date:
Property Owner Signature: Designer Signature:	*	Date: 10-5-21

See Reverse Side for Management Log

Maintenance Log

Activity	Date Accomplished					
Check frequently:					40	
Leaks: check for plumbing leaks						
Soil treatment area check for surfacing						
Lint filter: check, clean if needed						
Effluent screen: if owner-maintained						
Water usage rate (monitor frequency)						
Check annually:		3,2				
Caps: inspect, replace if needed						
Sludge & Scum/Pump				****. ;		
Inlet & Outlet baffles			4"	3		
Drainfield effluent leaks						
Pump, alarm, wiring				8		
Flush & clean laterals if cleanouts exists		8				
Other:						
Other:						
			novembro sentra praktava nativi saga kanturina			-100
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•						
						Normal Section 1
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