

FIELD EVALUATION SHEET

PRELIMINARY EVALUATION DATE 10-10-21, FIELD EVALUATION DATE 10-10-21
PROPERTY OWNER: WALLY McFARLANE PHONE _____
ADDRESS: 2242B 436TH AVE CITY, STATE, ZIP: AITKIN MN 56431
LEGAL DESCRIPTION: PART OF LOT 3 A5 2ND DOC 427366
PIN# 11-0-072702 SEC 33 T 45 R 27 TWP NAME HAZELTON
FIRE# _____ LAKE/RIVER _____ LAKE CLASS _____ OHWL _____ FT. _____

DESCRIPTION OF SOIL TREATMENT AREAS

	AREA #1	AREA #2	REFERENCE BM ELEV. <u>100</u> FT.
DISTURBED AREAS	YES _____ NO <u>X</u>	YES _____ NO <u>X</u>	REFERENCE BM DESCRIPTION _____
COMPACTED AREAS	YES _____ NO <u>X</u>	YES _____ NO <u>X</u>	<u>BENCHMARK IS</u>
FLOODING	YES _____ NO <u>X</u>	YES _____ NO <u>X</u>	<u>ELEVATION OF DIRT</u>
RUN ON POTENTIAL	YES _____ NO <u>X</u>	YES _____ NO <u>X</u>	<u>NEXT TO STRUCTURE</u>
SLOPE %	<u>4</u>	_____	_____
DIRECTION OF SLOPE	<u>SOUTH/SE</u>	_____	_____
LANDSCAPE POSITION	<u>SIDEHILL</u>	_____	_____
VEGETATION TYPES	<u>WOODED</u>	_____	_____

DEPTH TO STANDING WATER OR MOTTLED SOIL: BORING# 1 18", 1A 18", 2 24", 2A 24"

BOTTOM ELEVATION--FIRST TRENCH OR BOTTOM OF ROCK BED: #1 _____ FT., #2 _____ FT.

SOIL SIZING FACTOR: SITE #1 1.27, SITE #2 _____

CONSTRUCTION RELATED ISSUES: 3 BEDROOM STANDARD MOUND

LIC# 127 SITE EVALUATOR SIGNATURE: Larry Liljenquist

SITE EVALUATOR NAME: LARRY LILJENQUIST TELEPHONE# 218 820 8886

LUG REVIEW _____ DATE _____

Comments: _____

SOIL BORING LOGS ON REVERSE SIDE

SOILS CHARTS FOR BOTH PROPOSED AND ALTERNATE SITES

1 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-4	TOPSOIL	
4-18	SANDY LOAM	10YR 5/4
18-20	LOAM	10YR 5/6
MOTTLED @ 18"		

2 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-6	TOPSOIL	
6-18	SANDY LOAM	10YR 5/4
RED MOTTLES @ 18"		

1 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-4	TOPSOIL	
4-20	SANDY LOAM	10YR 5/4
20-24	LOAM	10YR 5/6
RED MOTTLES @ 24"		

2 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-4	TOPSOIL	
4-20	SANDY LOAM	10YR 5/4
20-24	LOAM	10YR 5/6
RED MOTTLES @ 24"		

ADDITIONAL SOIL BORINGS MAY BE REQUIRED

MOUND DESIGN WORK SHEET (For Flows up to 1200 gpd)

A. Average Design FLOW

Estimated 450 gpd (see figure A-1)
 or measured _____ x 1.5 (safety factor) = _____ gpd

A-1: Estimated Sewage Flows in Gallons per Day

number of bedrooms	Class I	Class II	Class III	Class IV
2	300	225	180	60%
3	450	300	218	of the
4	600	375	256	values
5	750	450	294	in the
6	900	525	332	Class I,
7	1050	600	370	II, or III
8	1200	675	408	columns:

B. SEPTIC TANK Capacity

1000 gallons (see figure C-1)

C. SOILS (refer to site evaluation)

- Depth to restricting layer = 1 1/2 feet
- Depth of percolation tests = _____ feet
- Texture SANDY LOAM
 Percolation rate 6-15 mpi
- Soil loading rate .79 gpd/sqft (see figure D-33)
- Percent land slope 4 %

C-1: Septic Tank Capacities (in gallons)

Number of Bedrooms	Minimum Liquid Capacity	Liquid capacity with garbage disposal	Liquid capacity with disposal & lift inside
2 or less	750	1125	1500
3 or 4	1000	1500	2000
5 or 6	1500	2250	3000
7, 8 or 9	2000	3000	4000

D. ROCK LAYER DIMENSIONS

- Multiply average design flow (A) by 0.83 to obtain required rock layer area.
450 gpd x 0.83 sqft/gpd = 380 sqft
- Determine rock layer width = 0.83 sqft/gpd x linear Loading Rate (LLR)
 0.83 sqft/gpd x 12 gpd/sqft = 10 ft
- Length of rock layer = area ÷ width =
380 sqft (D1) ÷ 10 ft (D2) = 38 ft

Mound LLR

< 120 MPI	≤ 12
≥ 120 MPI	≤ 6

E. ROCK VOLUME

- Multiply rock area (D1) by rock depth of 1 ft to get cubic feet of rock
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 tons
14 cuyd x 1.4 ton/cuyd = 19.6 tons

F. SEWAGE ABSORPTION WIDTH

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

1.50 x 10 ft = 15 ft

D-33: Absorption Width Sizing Table

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	0.79	1.50
16 to 30	Loam	0.60	2.00
31 to 45	Silt Loam	0.50	2.40
46 to 60	Silt		
	Sandy Clay Loam Silty Clay Loam	0.45	2.67
61 to 120	Clay Loam Silty Clay Sandy Clay	0.24	5.00
Slower than 120*	Clay		

*System designed for these soils must be other or performance

G. MOUND SLOPE WIDTH & LENGTH

(landslope greater than 1%)

1. Downslope absorption width = absorption width (F) minus rock layer width (D2)

15 ft - 10 ft = 5 ft

2. Calculate mound size

UPSLOPE

a. Depth of clean sand fill at upslope edge of rock layer = 3 ft minus the distance to restricting layer (C1)

3 ft - 1 1/2 ft = 1 1/2 ft

b. Mound height at the upslope edge of rock layer = depth of clean sand for separation (G2a) at upslope edge plus depth of rock layer (1 ft) plus depth of cover (1 ft)

1 1/2 ft + 1ft + 1ft = 3 1/2 ft

c. Upslope berm multiplier based on land slope

3.45 (see figure D-34)

d. Upslope width = berm multiplier (G2c) x upslope mound height (G2b):

3.45 x 3 1/2 ft = 12 ft

DOWNSLOPE

e. Drop in elevation = rock layer width (D2) x percent landslope (C5) ÷ 100

10 ft x 4 % ÷ 100 = .4 ft

f. Downslope mound height = depth of clean sand for slope difference (G2e) at downslope rock edge plus the mound height at the upslope edge of rock layer (G2b)

.4 ft + 3 1/2 ft = 3.9 ft

g. Downslope berm multiplier based on percent land slope

4.76 (see figure D-34)

h. Downslope width = downslope multiplier (G2g) times downslope mound height (G2f)

4.76 x 3.9 ft = 19 ft

i. Select the greater of G1 and G2h as the downslope width:

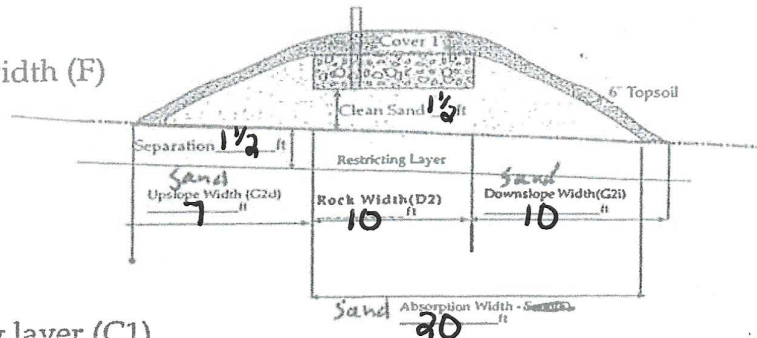
19 ft

j. Total mound width is the sum of upslope width (G2d) width plus rock layer width (D2) plus downslope width (G2i)

12 ft + 10 ft + 19 ft = 41 ft

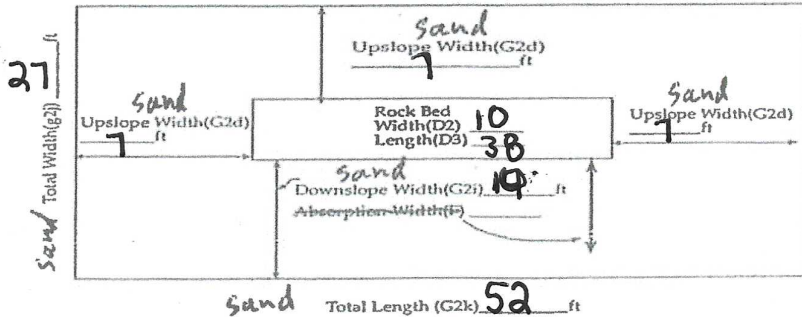
k. Total mound length is the sum of upslope width (G2d) plus rock layer length (D3) plus upslope width (G2d)

12 ft + 38 ft + 12 ft = 62 feet



D-34: SLOPE MULTIPLIER TABLE

Land Slope in %	UPSLOPE multipliers for various slope ratios						DOWNSLOPE multipliers for various slope ratios				
	3:1	4:1	5:1	6:1	7:1	8:1	3:1	4:1	5:1	6:1	7:1
0	3.0	4.0	5.0	6.0	7.0	8.0	3.0	4.0	5.0	6.0	7.0
1	2.91	3.85	4.76	5.66	6.54	7.41	3.09	4.17	5.26	6.38	7.53
2	2.83	3.70	4.54	5.36	6.14	6.90	3.19	4.35	5.56	6.82	8.14
3	2.75	3.57	4.35	5.08	5.79	6.45	3.30	4.54	5.88	7.32	8.86
4	2.68	3.45	4.17	4.84	5.46	6.06	3.41	4.76	6.25	7.89	9.72
5	2.61	3.33	4.00	4.62	5.19	5.71	3.53	5.00	6.67	8.57	10.77
6	2.54	3.23	3.85	4.41	4.93	5.41	3.66	5.26	7.14	9.38	12.07
7	2.48	3.12	3.70	4.23	4.70	5.13	3.80	5.56	7.69	10.34	13.73
8	2.42	3.03	3.57	4.05	4.49	4.88	3.95	5.88	8.33	11.54	15.91
9	2.36	2.94	3.45	3.90	4.30	4.65	4.11	6.25	9.09	13.04	18.92
10	2.31	2.86	3.33	3.75	4.12	4.44	4.29	6.67	10.00	15.00	23.33
11	2.26	2.78	3.23	3.61	3.95	4.26	4.48	7.14	11.11	17.65	30.43
12	2.21	2.70	3.12	3.49	3.80	4.08	4.69	7.69	12.50	21.43	43.75



Final Dimensions:
41 x 62

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

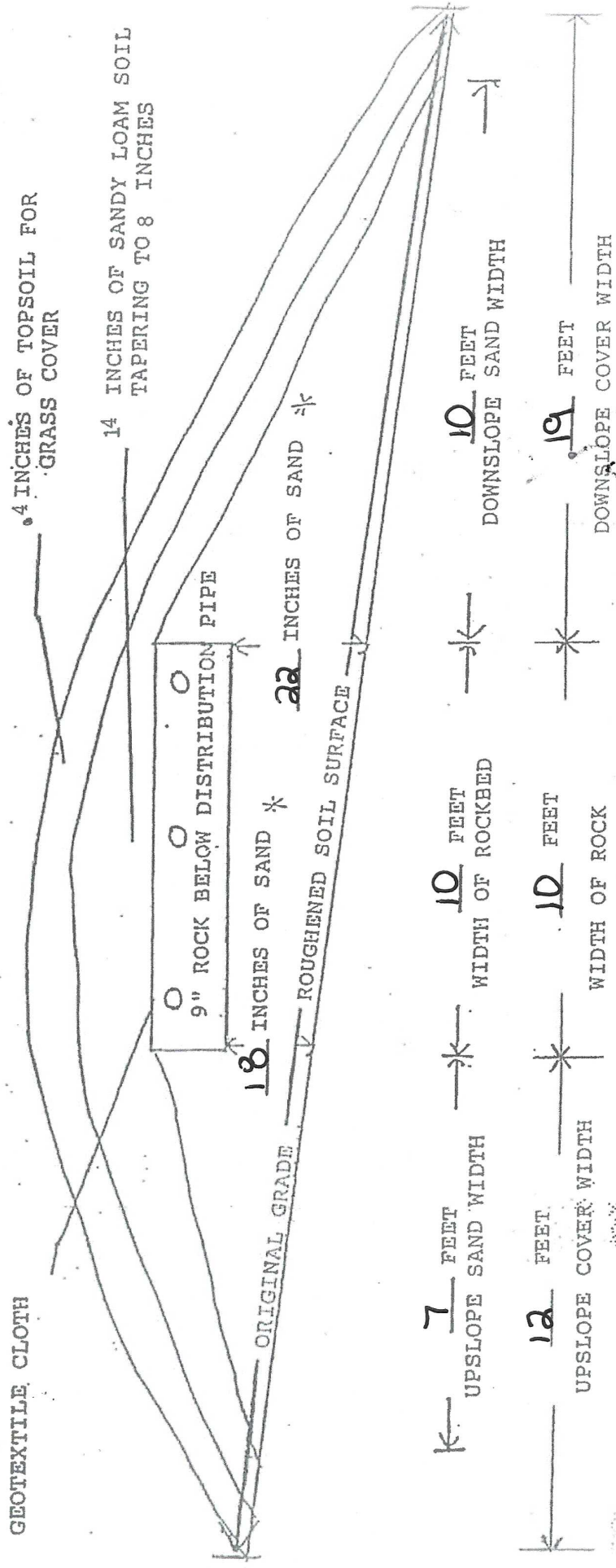
Larry Lyngvold (signature)

127 (license #)

10-26-21 (date)

GROUND CROSS-SECTION

4 PERCENT SLOPE OF ORIGINAL SOIL 10 FT. x 38 FT. SIZE OF ROCKBED 27 FT. x 52 FT. SIZE OF SANDBASE



7 FEET UPSLOPE SAND WIDTH

12 FEET UPSLOPE COVER WIDTH

10 FEET WIDTH OF ROCKBED

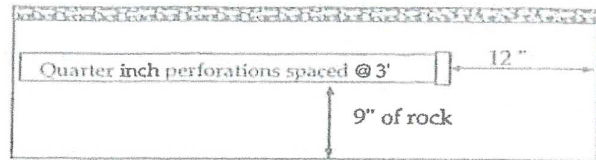
10 FEET WIDTH OF ROCK

10 FEET DOWNSLOPE SAND WIDTH

19 FEET DOWNSLOPE COVER WIDTH

PRESSURE DISTRIBUTION SYSTEM

Geotextile fabric



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

- Select number of perforated laterals 3
- Select perforation spacing = 3 ft
- 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.

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

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

perforation spacing (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	11	15	23
5.0	6	10	14	22

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

$$\text{Perforation spacing} = \underline{36} \text{ ft} \div \underline{3} \text{ ft} = \underline{12} \text{ spaces}$$

E-6: Perforation Discharge in gpm

head (feet)	perforation diameter (inches)			
	1/8	3/16	7/32	1/4
1.0 ^a	0.18	0.42	0.56	0.74
2.0 ^b	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

- 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.
- $$\underline{12} \text{ spaces} + 1 = \underline{13} \text{ perforations/lateral}$$
- A. Total number of perforations = perforations per lateral (5) times number of laterals (1)

$$\underline{13} \text{ perfs/lat} \times \underline{3} \text{ lat} = \underline{39} \text{ perforations}$$
 - 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) x rock length (ft)

$$\underline{10} \text{ ft} \times \underline{38} \text{ ft} = \underline{380} \text{ sqft}$$

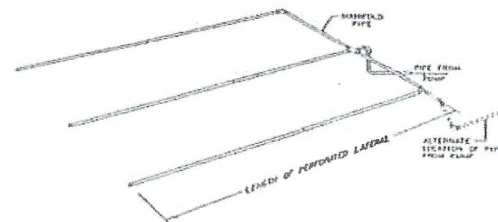
Square foot per perforation = Rock bed area ÷ number of perfs (6)

$$\underline{380} \text{ sqft} \div \underline{39} \text{ perfs} = \underline{9.74} \text{ sqft/perf}$$
- Determine required flow rate by multiplying the total number of perforations (6A) by flow per perforation (see figure E-6)

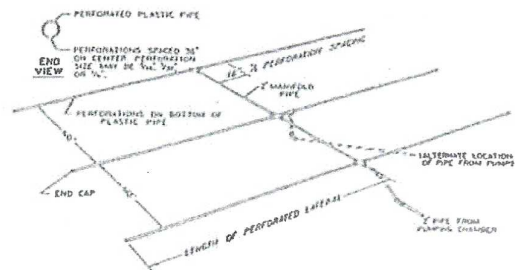
$$\underline{39} \text{ perfs} \times \underline{.74} \text{ gpm/perfs} = \underline{29} \text{ gpm}$$

- 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 = 1 1/4 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.



LAYOUT OF PERFORATED PIPE LATERALS FOR PRESSURE DISTRIBUTION IN MOUND



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

Barry Dymond (signature)

(signature)

127 (license #)

(license #)

10-26-21 (date)

(date)

PUMP SELECTION PROCEDURE

1. Determine pump capacity:

A. Gravity distribution

1. Minimum required discharge is 10 gpm
2. 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

From A or B Selected pump capacity: 29 gpm

2. Determine pump head requirements:

A. Elevation difference between pump and point of discharge?

9 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

20 feet x 1.25 = 25 feet

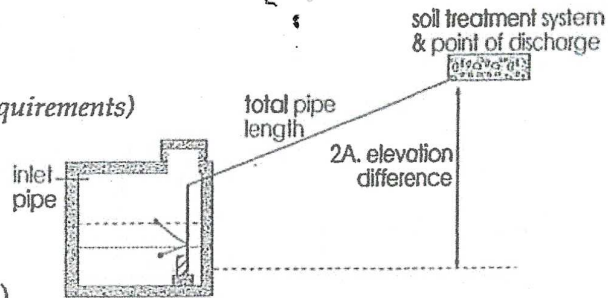
4. Calculate total friction loss by multiplying friction loss (C2) in ft/100 ft by the equivalent pipe length (C3) and divide by 100.

= 1.55 ft/100ft x 25 ÷ 100 = .39 ft

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

9 ft + 5 ft + .39 ft =

Total head: 14.39 feet



Special Head Requirements	
Gravity Distribution	0 ft
Pressure Distribution	5 ft

flow rate gpm	E-9: Friction Loss in Plastic Pipe Per 100 feet		
	nominal pipe diameter		
	1.5"	2"	3"
20	2.47	0.73	0.11
25	3.73	1.11	0.16
30	5.23	<u>1.55</u>	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

3. Pump selection

A pump must be selected to deliver at least 29 gpm (1A or B) with at least 14.39 feet of total head (2D)

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

Jerry Lyngzid (signature)

(signature)

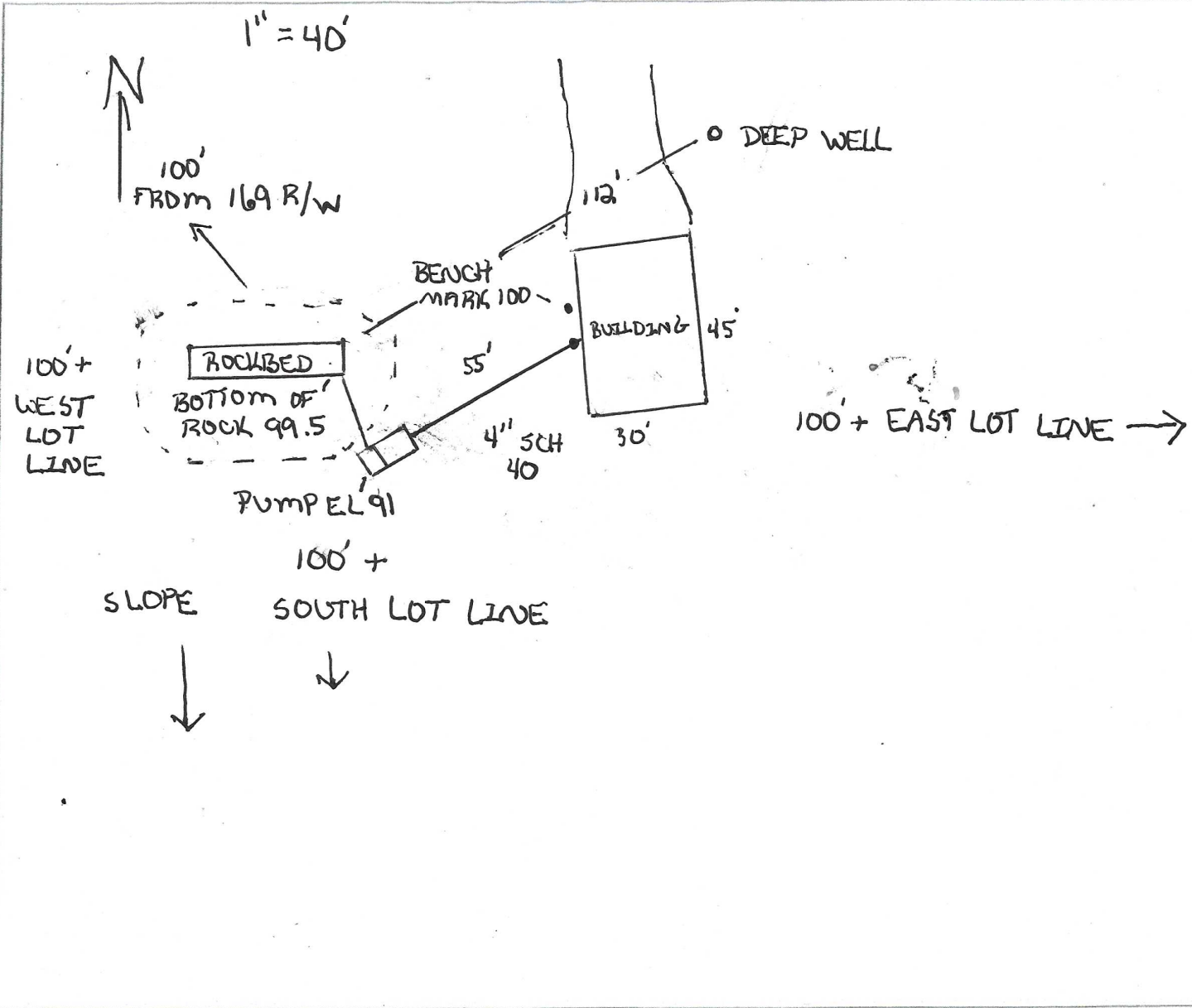
127 (license #)

(license #)

10-26-21 (date)

(date)

MAP DRAWN TO SCALE WITH A NORTH ARROW



CHECK OFF LIST--HAVE ALL OF THE FOLLOWING BEEN DRAWN ON THE MAP??

SHOW EXISTING OR PROPOSED

- WATER WELLS WITHIN 100 FT OF TREATMENT AREAS
- PRESSURE WATER LINES WITHIN 10 FT OF TREATMENT AREAS
- STRUCTURES
- ALL SOIL TREATMENT AREAS
- HORIZONTAL AND VERTICAL REFERENCE
- POINT OF SOIL BORINGS
- LOT EASEMENTS
- DISTURBED/ COMPACTED AREAS
- SITE PROTECTION--LATHE AND RIBBON EVERY 15 FT
- ACCESS ROUTE FOR TANK MAINTENANCE
- LOT IMPROVEMENTS
- ALL ISTS COMPONENTS
- DIRECTION OF SLOPE
- ALL LOT DIMENSIONS

REQUIRED SETBACKS

- STRUCTURES
- OHWL
- PROPERTY LINES

COMMENTS:

INDICATE ELEVATIONS

- BENCHMARK 100 NEXT TO BUILDING
- ELEVATION OF SEWER LINE @ HOUSE 98
- ELEVATION @ TANK INLET 95
- ELEVATION @ BOTTOM OF ROCK LAYER 99.5
- ELEVATION @ BOTTOM OF BORING OR RESTRICTIVE LAYER 96.5
- ELEVATION OF PUMP 91
- ELEVATION OF DISTRIBUTION DEVICE 100

DESIGNER SIGNATURE Larry Dymond

LICENSE# 127

DATE 10-26-21

Subsurface Sewage Treatment System Management Plan

Property Owner: WALLY MCFARLANE Phone: _____ Date: 10-26-21
Mailing Address: 22428 436TH AVE City: AITKIN Zip: 56431
Site Address: SAME City: _____ Zip: _____

This management plan will identify the operation and maintenance activities necessary to ensure long-term performance of your septic system. Some of these activities must be performed by you, the homeowner. Other tasks must be performed by a licensed septic service provider or maintenance provider.

System Designer: Recommends SSTS check every _____ months.
Local Government: Recommends SSTS check every _____ months.
State Requirement: Requires SSTS check every 36 months.
(State requirements are based on MN Rules Chapter 7080.2450, Subp. 2 & 3)

My System needs to be checked every 36 months.

Homeowner Management Tasks:

- Leaks* – Check (look, listen) for leaks in toilets and dripping faucets. Repair leaks promptly.
- Surfacing sewage* – Regularly check for wet or spongy soil around your soil treatment area.
- Effluent filter* – *Inspect and clean twice a year or more.*
- Alarms* – Alarm signals when there is a problem. Contact a service or maintenance provider any time an alarm signals.
- Event counter or water meter* – Record your water use.
 - recommend meter readings be conducted (circle one): DAILY WEEKLY MONTHLY N/A

Licensed septic service provider or maintenance provider (Check all that apply):

- Check to make sure tank is not leaking
- Check and clean the in-tank effluent filter (if exists)
- Check the sludge/scum layer levels in all septic tanks
- Recommend if tank should be pumped
- Check inlet and outlet baffles
- Check the drainfield effluent levels in the rock layer
- Check the pump and alarm system functions
- Check wiring for corrosion and function
- Check dissolved oxygen and effluent temperature in tank
- Provide homeowner with list of results and any action to be taken
- Flush and clean laterals if cleanouts exist

"I understand it is my responsibility to properly operate and maintain the sewage treatment system on this property, utilizing the Management Plan. If requirements in the Management Plan are not met, I will promptly notify the permitting authority and take necessary corrective actions. If I have a new system, I agree to adequately protect the reserve area for future use as a soil treatment system."

Property Owner Signature: _____ Date: _____
Designer Signature: Barry Dymingud Date: 10-26-21

See Reverse Side for Management Log

Maintenance Log

Activity	Date Accomplished
<i>Check frequently:</i>	
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 _____)	
<i>Check annually:</i>	
Caps: inspect, replace if needed	
Sludge & Scum/Pump	
Inlet & Outlet baffles	
Drainfield effluent leaks	
Pump, alarm, wiring	
Flush & clean laterals if cleanouts exists	
Other: _____	
Other: _____	

Notes: _____
