

FIELD EVALUATION SHEET

PRELIMINARY EVALUATION DATE 5-19-22, FIELD EVALUATION DATE 5-19-22
PROPERTY OWNER: Michael Podvalnyy PHONE 763-439-2637
ADDRESS: 17199 510 th Lane CITY, STATE, ZIP: McGregor, MN 55760
LEGAL DESCRIPTION: _____
PIN# 29-0-023600 SEC 11 T 49 R 23 TWP NAME Shamrock
FIRE# _____ LAKE/RIVER _____ LAKE CLASS _____ OHWL _____ FT.

DESCRIPTION OF SOIL TREATMENT AREAS

	AREA #1	AREA #2	REFERENCE BM ELEV. _____ FT.
DISTURBED AREAS	YES ___ NO ___	YES ___ NO ___	REFERENCE BM DESCRIPTION _____
COMPACTED AREAS	YES ___ NO ___	YES ___ NO ___	_____
FLOODING	YES ___ NO ___	YES ___ NO ___	_____
RUN ON POTENTIAL	YES ___ NO ___	YES ___ NO ___	_____
SLOPE %	_____	_____	_____
DIRECTION OF SLOPE	_____	_____	_____
LANDSCAPE POSITION	_____	_____	_____
VEGETATION TYPES	_____	_____	_____

DEPTH TO STANDING WATER OR MOTTLED SOIL: BORING# 1 _____, 1A _____, 2 _____, 2A _____

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

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

CONSTRUCTION RELATED ISSUES: _____

LIC# 910 SITE EVALUATOR SIGNATURE: Eric Dahl

SITE EVALUATOR NAME: _____ TELEPHONE# 218-426-4320

LUG REVIEW _____ DATE _____

Comments: Installing a 200 gallon plastic tank for an
outhouse

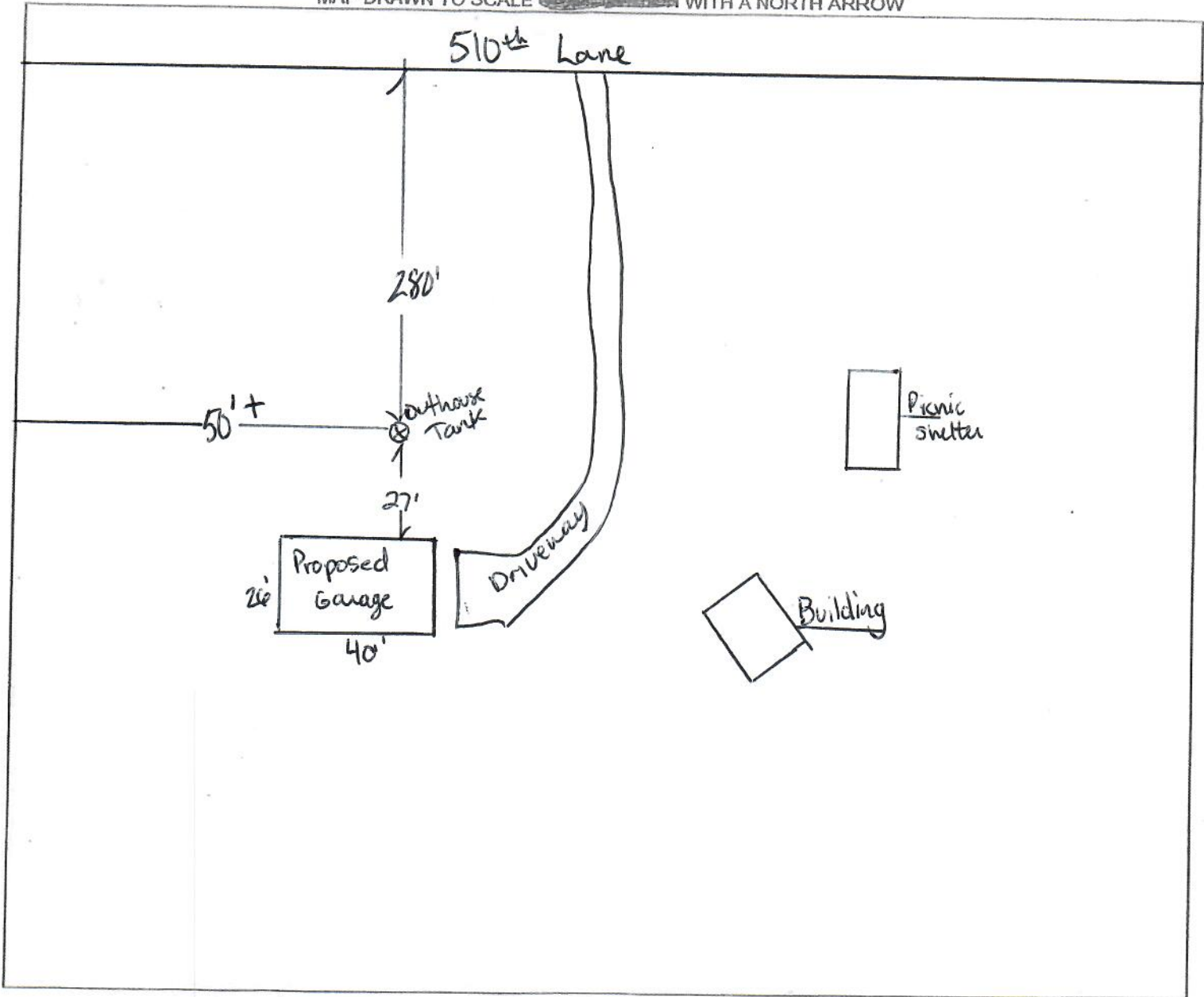
SOIL BORING LOGS ON REVERSE SIDE

SKETCH SHEET

CLIENT: Michael Podvalnyy

DATE: 5-19-22

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

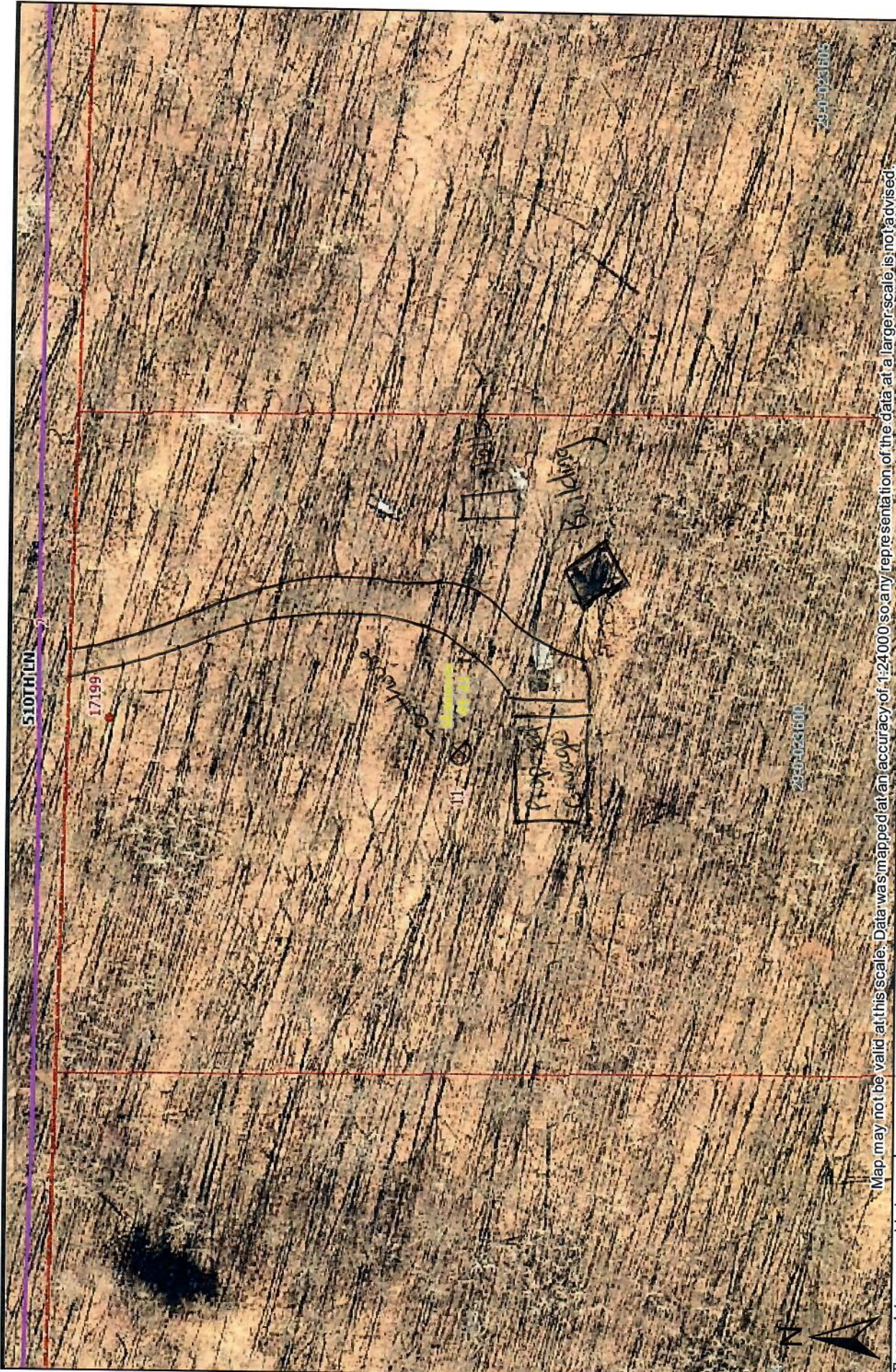
COMMENTS:

INDICATE ELEVATIONS

- Tank will be buried about 24" down
- BENCHMARK _____
- ELEVATION OF SEWER LINE @ HOUSE _____
- ELEVATION @ TANK INLET _____
- ELEVATION @ BOTTOM OF ROCK LAYER _____
- ELEVATION @ BOTTOM OF BORING OR RESTRICTIVE LAYER _____
- ELEVATION OF PUMP _____
- ELEVATION OF DISTRIBUTION DEVICE _____

DESIGNER SIGNATURE Ernie Daska
 LICENSE# 910

DATE 5-19-22



These data are provided on an "AS-IS" basis, without warranty of any type, expressed or implied, including but not limited to any warranty as to their performance, merchantability, or fitness for any particular purpose.

ArcGIS Web Map

Web AppBuilder for ArcGIS

1:1,128 0 0.005 0.01 mi 1 inch = 94 feet

Aitkin County

Date: 5/22/2022

Subsurface Sewage Treatment System Management Plan

Property Owner: Michael Podvalnyy Phone: 763-439-2637 Date: 5-19-22
Mailing Address: 11224 Georgia Ave. City: Champlin, MN Zip: 55316
Site Address: 17199 510th Lane City: McGregor, MN Zip: 55760

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 ____ months.**

Pump out tank as needed. No field. Just outhouse tank.
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: Ernie Dauter Date: 5-19-22

See Reverse Side for Management Log

DARLOW PUMPING SERVICE

ERNIE DARLOW JR. ~ 48237 LAKE AVE. ~ MCGREGOR MN 55760
Phone (218) 426-4320 ~ Fax (218) 426-4664

HOLDING TANK SERVICE AGREEMENT

Permit # _____ Address(property) 17199 510th Lane McGregor, MN
This agreement, entered into by and between Aitkin (county/city)

and registered Septic Tank Pumper, Darlow Pumping Service, hereinafter referred to as "Contractor" and
Michael Podvalnyy (homeowner) hereinafter referred to as "Homeowner."

Whereas, Homeowner desires and is required to retain individual sewage treatment system holding tank service to protect the environment and to obtain a certificate of compliance from county/city listed above and

Whereas, Contractor desires to provide sewage treatment system pumping services to the homeowner as necessary and in accordance with the terms and conditions outlined herein.

Now therefore, in consideration of the mutual promises contained herein, parties hereby agree to the following.

- 1.) **TERMS:** The terms of this agreement shall be from _____ to final installation of an approved sewage treatment system or connection to a Municipal Sewage Treatment System unless earlier terminated as provided herein. The parties understand and agree that this agreement is intended to arrange for the provision of pumping services so that the homeowner may occupy a seasonal dwelling pursuant to a certificate of compliance to be issued by the county/city listed above Environmental Services Department upon execution of this agreement. Upon approval to a municipal sewer, or homeowner entering into an agreement with another MN state registered Septic Tank Pumper, this agreement shall terminate.
- 2.) **FREQUENCY OF PUMPING:** Homeowner agrees that he/she shall not allow the holding tank to overflow or discharge in any manner. Contractor and homeowner agree that the holding tank shall be pumped within 24 hours of indication of lack of capacity by a mechanical indicator. A float indicator needs to be installed prior to completion of the approved system, it shall be the responsibility of the homeowner to monitor and make pumping arrangements with the registered Septic Tank Pumper listed above.
- 3.) **REPORTING:** Grievances of the homeowner or contractor shall be reported to the county/city listed above Environmental Services Department. Homeowner and contractor understand that failure to have holding tank pumped as herein specified or the discharge of any contents from the holding tank, regardless of fault, may result in the suspension, cancellation, or revocation of the certificate of compliance, and the homeowner may be required to vacate the premises.

Ernie Darlow Jr. - 5-19-22
Darlow Pumping Service Date

Homeowner Date