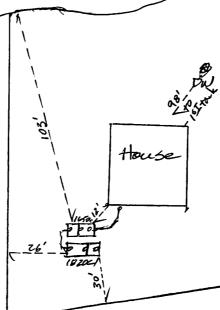
AITKIN COUNTY		
CERTIFICATE OF INSTALLATION/NOTICE OF NONCOMPLIANCE		

This certificate of installation/notice of noncompliance has been issued this				
day of, 20 to certify compliance\ noncompliance with Aitkin County's Subsurface Sewage Treatment System Ordinance.				
Aitkin County's Subsurface Sewage Treatment System Ordinance.				
The premises covered by this certificate are legally described as:				
Section Township Range Lake PERMIT NO Owner Name				
PERMIT NO. Owner Name				
Address				
Installer Name				
Installer Name Type of System Inspected				
Parcel Number				
The certificate of installation/ notice of noncompliance was based on No of the following:				
1) Inspection of the installation or construction as in accordance with the above				
referenced permit and application design.				
referenced permit and application design.				
2) Review of as built plans submitted in accordance with Subdivision 0.2 D of				
2) Review of as-built plans submitted in accordance with Subdivision 9.2 D of				
Aitkin County's Subsurface Sewage Treatment System Ordinance.				
If the choice normitted subsurface courses treatment eveters is in non-coursilence with				
If the above permitted subsurface sewage treatment system is in noncompliance with				
Aitkin County's Subsurface Sewage Treatment System Ordinance, then the following				
shall serve as a Notice of Violation:				
1) Statement of the findings of fact through inspections or investigations:				
2) List of specific violations of Ordinance:				
3) Requirements for correction or removal of violations:				
4) Time schedule for compliance:				
Failure to correct or remove the above violation(s) will result in this matter being				
turned over to the Aitkin County Attorney's Office for further legal action, which may				
result in revocation of licenses or registrations, fines and/or imprisonment.				
INSPECTOR SIGNATURE				

SUBSURFACE SEWAGE TREATMENT SYSTEM INSPECTION FORM AITKIN COUNTY, MINNESOTA

×

Township Farm Island Date of Inspection	zoz3-0250 6/5/2023 App. Number <u>47671</u>	
Owner Jason + Amy Michael Parcel Number 07-1-096700		
Project Address <u>29236</u> 412 th P1.	Installer <u>Ritter Exc.</u>	
City Aitkin Zip Code 564:	31 T2 HT	
New Repair	DIST. or DROP BOX & TYPE	
SETBACKS:	TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:	
Buildings to tank(s) <u>l0'+</u>	Trench/Bed depth	
Buildings to drainfield	Trench/Bed length	
Well(s) 50' or 100'_ <u>DW: 50'+</u>	Trench/Bed bottom w <u>idth</u>	
Lake/Creek/Wetland Spirit Lake: 100'+	Trench spacing	
	Drainfield rock below pipe	
SEPTIC TANKS: New Existing	Size of gravelless pipe	
Number of tanks installed _/	Depth of backfill	
Liquid capacity and type 1820 Jac. combon	Absorption area: square feet/	
Type of baffle <u>Plastic</u>	lineal feet/	
Inspection pipes	MOUNDS:	
Manholes size <u>Z4"</u>	Percent slope	
Manhole to grade Yes <u>/ No</u>	Upslope sand width	
	Downslope sand width	
PUMPS: New Existing	Sideslope sand width	
Tank capacity and type/	Drainfield rock below pipe	
Pump manufacturer & model #	Depth of sand below rock	
Horsepower & GPM	Perforation size & spacing	
Feet of head	Pipe size & spacing	
Gallons per cycle	Dimensions of rock bed	
Size of discharge line	Dimensions of sand base/	
Type & location of alarm <u>Manual popup</u>	Final cover	
Water meter		
DRAWING OF SYSTEM: (include soils)	ivit he N	



Inspector's Comments: 1650 HT on site. There is an Chisting 18200 added to the too age Bit Ngran Installer's Signature <u></u>5-Inspector's Signature ta h 698 - 11 Yellow - Applicant Rev:1/13 White – County / Pink - Installer





