



Preliminary Evaluation Worksheet



v 04.01.2021

1. Contact Information

Property Owner/Client:  Date Completed:

Site Address:  Project ID:

Email:  Phone:

Mailing Address:  Alt Phone:

Legal Description:

Parcel ID:  SEC:  TWP:  RNG:

2. Flow and General System Information

A. Client-Provided Information

Project Type:  New Construction  Replacement  Expansion  Repair

Project Use:  Residential  Other Establishment:

Residential use: # Bedrooms:  Dwelling Sq.ft.:  Unfinished Sq. Ft.:

# Adults:  # Children:  # Teenagers:

In-home business (Y/N):  If yes, describe:

Water-using devices:  Garbage Disposal/Grinder  Dishwasher  Hot Tub\*  
 Sewage pump in basement  Water Softener\*  Sump Pump\*  
 Large Bathtub >40 gallons  Iron Filter\*  Self-Cleaning Humidifier\*  
 Clothes Washing Machine  High Eff. Furnace\*  Other:

\* Clear water source - should not go into system

Additional current or future uses:

Anticipated non-domestic waste:

The above is complete & accurate:

Client signature & date

B. Designer-determined flow Information

Attach additional information as necessary.

Design Flow:  GPD Anticipated Waste Type:

BOD:  mg/L TSS  mg/L Oil & Grease  mg/L

3. Preliminary Site Information

A. Water Supply Wells

#	Description	Mn. ID#	Well Depth (ft.)	Casing Depth (ft.)	Confining Layer	STA Setback	Source
1	Deep			>50'			Owner
2							
3							
4							

Additional Well Information:

## Monitoring Protocol

Any sampling and laboratory testing procedures shall be performed in accordance with the proprietary treatment product's protocol, Standard Methods, and at a Minnesota Department of Health approved laboratory. Results shall be submitted to the permitting authority at: Aitkin County Environmental Services, 307 2<sup>nd</sup> St NW, Room 219, Aitkin, MN 56431 no later than the expiration date listed.

## Contingency Plan

In the event the wastewater treatment system does not meet required performance requirements as contained in this operating permit, the owner shall notify Aitkin County Environmental Services within thirty (30) days of receiving non-compliant information. The owner is responsible to obtain the services of a Minnesota Pollution Control Agency (MPCA) licensed Service Provider or other qualified practitioner to complete the required corrective measures.

## Authorization

Aitkin County Environmental Services authorizes the Permittee to operate a wastewater treatment and dispersal system at the address named above in accordance with the requirements of this operating permit, attached Management Plan and contract with the Service Provider/Inspector.

This permit is effective on the issuance date identified above. This permit and the authorization to treat and disperse wastewater shall expire on the expiration date identified above. The Permittee is not authorized to discharge after the above date of expiration. The Permittee shall submit monitoring information on forms as required by Aitkin County Environmental Services no later than thirty (30) days prior to the above date of expiration for operating permit renewal. This permit is not transferable.

The owner is required to obtain the services of a Minnesota Pollution Control Agency (MPCA) licensed and trained: 1) Service Provider or Inspector to provide ongoing system operation, maintenance, and monitoring and 2) Maintainer to pump the system's sewage tanks and components. The owner is responsible to provide the name of the Service Provider or Inspector business prior to the issuance of this operating permit. The owner has secured the services of \_\_\_\_\_ as the Service Provider or Inspector for this system. The Service Provider or Inspector is hereby authorized to provide the required monitoring data and routine maintenance service records to both Aitkin County Environmental Services.

[For systems that generate high strength wastewater, the following items should be added to the operating permit: "If there is a change of use within the facility (i.e., change in menu, increase in food capacity, change in water use fixtures, etc.), the permittee is required to notify Aitkin County Environmental Services and the Service Provider before any changes occurs. Changes to the facility that could potentially impact performance of the wastewater treatment and dispersal system shall not take place until appropriate evaluation has been completed."]

I hereby certify with my signature as the Permittee that I understand the provisions of the wastewater treatment and dispersal system operating permit including maintenance and monitoring requirements. I agree to indemnify and hold Aitkin County harmless from all loss, damages, costs and charges that may be incurred by the use of this system. If I fail to comply with the provisions of this operation permit, I understand that penalties may be issued. If I sell this property during the life of the permit, I will inform the new owner(s) of the permit requirements and the need to renew the operating permit.

The Operating Permit is hereby granted to: Prairie River Retreat - Sheryl Ruhnke

Permittee

(please print):

Sheryl Ruhnke

Permitting Authority

(please print):

TOM ESPERSON  
AITKIN COUNTY

Title:

OWNER

Date:

6/5/2023

Title:

CONTRACT INSPECTOR

Date:

7/6/23

Permittee

Signature:

X Sheryl Ruhnke

Permittee Signature

Permitting

Authority

Signature:

X Tom Esperson

Aitkin County Representative Signature