

# Preliminary & Field Evaluation Form

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| Owner Information   |                            |                               |                      |
|---------------------|----------------------------|-------------------------------|----------------------|
| Date                | <u>9/20/2023</u>           | Sec / Twp / Rng               | <u>S.8 T.49 R.23</u> |
| Parcel ID           | <u>29-0-017602</u>         | LUG (county, city, township)  | <u>Aitkin County</u> |
| Property Owner:     | <u>Arthur Smith</u>        | Owners address (if different) |                      |
| Property Address:   | <u>20802 508th Ln.</u>     | <u>17885 Impala Path</u>      |                      |
| City / State / Zip: | <u>McGregor, MN. 55760</u> | <u>Lakeville, MN. 55044</u>   |                      |


| Flow Information and Waste Type / Strength |            |                             |   |
|--|------------|-----------------------------|---|
| Estimated Design flow                      | <u>600</u> | Anticipated Waste strength  | <input type="checkbox"/> Hi Strength <input checked="" type="checkbox"/> Domestic |
| Comments:                                  |            | Any Non-Domestic Waste      | <input type="checkbox"/> Yes (class V) <input checked="" type="checkbox"/> No     |
|  |            | Sewage ejector/grinder pump | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No               |
|  |            | Water softener              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No               |
|  |            | Garbage Disposal            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No               |
|  |            | Daycare / In home business  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No               |

| Site Information  |   |                             |   |
|---|---|-----------------------------|---|
| Existing & proposed lot improvements located (see site map) | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Well casing depth <u>&lt;50'</u>  |
| Easements on lot located (see site map)                     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Drainfield w/in 100' of residential well <input type="checkbox"/> Yes <input type="checkbox"/> No                                 |
| Property lines determined (see site map)                    | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Site w/in 200' of transient noncommunity water supply (TNCWS) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Req'd setbacks determined (see site map)                    | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Site w/in an inner wellhead mgmt zone (CWS/NTNCWS) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            |
| Utilities located & identified (gopher state one call)      | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Buried water supply pipe w/in 50' of system <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                   |
| Access for system maintenance (shown on site map)           | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Site located in Shoreland (w/in 1000' of lake, 300' of river) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Soil treatment area protected                               | <input type="checkbox"/> Yes            | <input type="checkbox"/> No | Site map prepared with previous items included <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                |
| Construction related issues                                 | <hr/> <hr/>                             |                             |   |

## Soil Information

|  |   |  |  |
|--|---|--|--|
|  |   |  | Evidence of site:<br>Cut <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Filled <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Compacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Disturbed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Original soils   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |  |
| Soil logs completed and attached                                     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Perk test completed and attached (if applicable)               | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| Soil loading rate (gpd/ft <sup>2</sup> )                             | _____   | Percolation rate (if applicable)                               | _____  |
| Depth/elev to SHWT   | _____   | Flooding or run-on potential (comments)                        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| Depth to system bottom maximum (or elev minimum)                     | _____   | Flood elevation (if applicable)                                | _____  |
| Depth/elev to standing water (if applicable)                         | _____   | Elevation of ordinary high water level (if applicable)         | _____  |
| Depth/elev to bedrock (if applicable)                                | _____   | Floodplain designation and elev - 100 yr/10 yr (if applicable) | _____  |
| Soil Survey information determined (see attachment)                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |  |
| Differences between soil survey and field evaluation (if applicable) | _____<br>_____  |  |  |

*I hereby certify this evaluation was completed in accordance with MN 7080 and any local req's.*

  
 \_\_\_\_\_  
 Designer Signature

R.H. Inspection & Design  
 \_\_\_\_\_  
 Company

3847  
 \_\_\_\_\_  
 License #

# Holding tank Design

Property Owner: Arthur Smith Date: 9/20/2023

Site Address: 20802 508th Ln. PID: 29-0-017602

Comments: Existing tank is compliant, add 1820 gal. tank.

instructions:   = site specific input   = adjust if desired  = self-calculated (DO NOT ADJUST)

1) 4 bedroom Type II Residential System

2) 600 GPD design flow

No Lift station to holding tank (lift basket < 100 gal treat as sewer line, > 100 gal treat as tank)

3) 1820 Gallon Holding tank (minimum) at 15.80 gpi

4) 86 inches from bottom of tank to "Hi Level" float (75% full when alarm activates)

5) 455 gallons reserve capacity (after High Level Alarm is activated)

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



Designer Signature

R.H. Inspection & Design  
Company

3847  
License#

9/20/2023  
Date

# INSPECTOR CHECK LIST - Holding Tank

20802 508th Ln.

- WELL setbacks: 20' to pressure tested sewer line (5 psi for 15 min)  
50' to everything
- PROPERTY LINES setback: 10' to everything
- Road setback: outer ditch, or 33' from center of township road, or 65' from center of cnty road
- LAKE / BLUFF setback: 20' for bluff. Lakes: GD \_\_\_\_, RD \_\_\_\_, NE \_\_\_\_\_. Protected wetland \_\_\_\_.
- Building setbacks: 10' for everything.
- WATER LINE under pressure se 10' to tank & sewer line. (else sewer line > 12" below)
- Sewer line & baffle connection (no 90's, 3' between 45's, slope min 1" in 8', max 2" in 8')  
(no depth req's, clean out every 100', Sch 40 D2665 or F891)
- No Lift station to Holding tank (lift basket < 100 gallons treat as sewer line, >100 gal treat as tank)
- Holding tank and risers (water tight, insulated, proper depth, existing verified by pumping)  
mfg\_\_ Jacobson 1820 gallons
- Riser within 12" of grade, 6"+ access pipe to grade.
- High Level Alarm (set at 75% capacity) (electrical or mechanical) 86 inches from bottom of tank
- Water tight testing form
- Re-use existing tank certification
- Abandon existing system if necessary
- monitoring plan and type \_\_\_\_\_
- well abandonment form if necessary

# Soil Observation Log

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## Owner Information

Property Owner / project: Arthur Smith

Date 9/20/2023

Property Address / PID: 20802 508th Ln.

## Soil Survey Information

refer to attached soil survey

Parent matl's:       Till       Outwash       Lacustrine       Alluvium       Organic       Bedrock

landscape position:       Summit       Shoulder       Side slope       Toe slope

soil survey map units:      \_\_\_\_\_      slope 3 %      direction- downhill

## Soil Log #1

Boring

Pit

Elevation \_\_\_\_\_

Depth to SHWT 6"

| Depth (in) | Texture | fragment %            | matrix color | redox color | consistence                       | grade                               | shape   |
|------------|---------|-----------------------|--------------|-------------|-----------------------------------|-------------------------------------|---|
| 0-6        | Fill    | <35                   | 7.5YR3/1     | 7.5YR6/1    | Loose                             | Loose                               | Single grain  |
|            |         | <35<br>35 - 50<br>>50 |              |             | loose<br>friable<br>firm<br>rigid | loose<br>weak<br>moderate<br>strong | single grain<br>granular blocky<br>prismatic platy<br>massive |
|            |         | <35<br>35 - 50<br>>50 |              |             | loose<br>friable<br>firm<br>rigid | loose<br>weak<br>moderate<br>strong | single grain<br>granular blocky<br>prismatic platy<br>massive |
|            |         | <35<br>35 - 50<br>>50 |              |             | loose<br>friable<br>firm<br>rigid | loose<br>weak<br>moderate<br>strong | single grain<br>granular blocky<br>prismatic platy<br>massive |
|            |         | <35<br>35 - 50<br>>50 |              |             | loose<br>friable<br>firm<br>rigid | loose<br>weak<br>moderate<br>strong | single grain<br>granular blocky<br>prismatic platy<br>massive |

Comments: Fill material has been brought in to area.

# HOLDING TANK PUMPING SERVICE AGREEMENT

Permit # \_\_\_\_\_ Address \_\_\_\_\_

THIS AGREEMENT, entered into by and between Aitkin County Registered Septic Tank Pumper, \_\_\_\_\_, hereinafter referred to as "Contractor", and \_\_\_\_\_, hereinafter referred to as "Homeowner".

WHEREAS, Homeowner desires and is required to retain individual sewage treatment system holding tank services to protect the environment and to obtain a certificate of compliance from Aitkin County; and

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

NOW THEREFORE, in consideration of the mutual promises contained herein, Parties do hereby agree as follows:

1. **TERM.** The term of this Agreement shall be from \_\_\_\_\_ to final installation of an Aitkin County 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 Homeowner may occupy the home pursuant to a certificate of compliance to be issued by the Aitkin County Environmental Services Department upon execution of this Agreement. Homeowner further agrees that at the earliest possible date, Homeowner shall have a permanent sewage treatment system installed in accordance with the Aitkin County Subsurface Sewage Treatment System Ordinance and as approved by the Aitkin County Environmental Services Department or connect to a Municipal Sewage Treatment System. Upon approval by the County of Aitkin of the individual sewage treatment system or connection to a municipal sewer, or approval by Aitkin County Environmental Services of an amended or different contract, 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 in accordance with the following:

- Tank size (gal.) \_\_\_\_\_ / (number of household occupants multiplied by 75 gallons per day) = frequency of pumping: or
- Within 24 hours of indication by tank alarm of lack of capacity (applicable only if system has a functional alarm):
- Whichever is greater

Contractor agrees to provide pumping services according to the regular pumping schedule or as needed to prevent discharge. Homeowner shall compensate Contractor as agreed by the parties for pumping services rendered.

3. **INSPECTION.** Holding tanks will be inspected by a licensed pumper at the time of servicing for leaks below the operating depth and whether tank tops, riser joints, and connections leak through visual evidence of major defects.

4. **REPORTING.** Grievances of Homeowner or Contractor shall be reported to the Aitkin County Environmental Services Department by Homeowner or Contractor. 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.

\_\_\_\_\_  
Contractor

\_\_\_\_\_  
Homeowner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

# Subsurface Sewage Treatment System Management Plan

Property Owner: ARTHUR SMITH Phone: 952-240-9576 Date: 9/20/23  
Mailing Address: 17885 IMPALA PATH City: LAKEVILLE, MN. Zip: 55044  
Site Address: 20802 SOBTA LN. 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 36 months.  
Local Government: Recommends SSTS check every 36 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: 10/30/2023

Designer Signature:  Date: 20 SEP 2023

See Reverse Side for Management Log

## Maintenance Log

| Activity                                   | Date Accomplished |
|--|-------------------|
| <b><i>Check frequently:</i></b>            |                   |
| 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 _____) |                   |
| <b><i>Check annually:</i></b>              |                   |
| 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: \_\_\_\_\_

\_\_\_\_\_

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20802 508TH LN.  
MCGREGOR, MN.  
55760

