



Septic System Compliance Inspection – Existing System

Date: 11-9-23

Property Owner: Trotter, Cory & Katie

Ordered By: Trotter, Cory

Address: 39067 455th Place Aitkin, MN 56431

Property ID: 01-0-010101

Inspector: Tim Woodrow

A compliance inspection was performed at the above location. Previous evaluations were used to determine the level of seasonal saturated soil. The Soil Treatment Area (Drain field) was also inspected to ensure there was no ponding or leaking. The septic tank was pumped and inspected. This onsite system was found to be **Compliant**.

- **Impact On Public Health:**
System is Compliant
- **Tank Integrity:**
Tank(s) are compliant
- **Other Compliance Conditions:**
None
- **Soil Separation**
Soils are compliant
- **Operating Permit and Nitrogen BMP**
NA

I have included a copy of the compliance documents for your record. I have also sent a copy to Aitkin County for their records. If you have any questions, please do not hesitate to give us a call.

Thanks!

Tim Woodrow
Owner

218-927-6175

218-927-6175

1037 1st St. NW Aitkin, MN 56431

WWW.TIMBERLAKESSEPTIC.COM



DISCLAIMER:

The septic system inspection conducted for this property meets MPCA requirements for existing systems.

We recommend this system to be serviced and evaluated at least every 36 months by a septic professional.

Any additions to the home or increased use of the home may require an increase in system capacity.

1. Compliance Requirements evaluated as part of this inspection include the verification that the system tanks do not leak below the designed operating depth, the required separation between the bottom of the subsurface distribution medium and the seasonally saturated soils if applicable, no discharge of septage/effluent to the ground surface or surface water and no imminent safety hazards exist. Timber Lakes Septic Inc does not inspect interior pumps, plumbing, or associated components.
2. Certification of this system does not warranty future use beyond the date of inspection. Any system, new or old, can be hydraulically overloaded and discharge to ground surface as a result of increase use (more people in house, faulty plumbing fixtures, change in habits, groundwater infiltration etc), improper maintenance, tree roots, freezing conditions, surface drainage problems, etc. The system can also stop working simply due to its age. The life expectancy of a system is variable and dependent upon the items previously listed. Proper maintenance and water conservation will help contribute to a longer system life.
3. A compliance inspection is not meant to be a test or inspection of longevity of the system. A compliance inspection is for the purpose of verifying if the system is protective of public health and safety as well as protecting the ground water at the date and time the inspection was performed. This inspection is not intended to determine if the system was originally designed or installed to past or present MPCA/Local Government Unit Code requirements. This inspection is not intended to determine if the system was designed and/or installed to support the anticipated flow from buildings as the use of the buildings may have changed since the original design was completed. These changes may include additional bedrooms, occupants, increased use, etc. In addition, this inspection is not intended to determine the quality of the original system design, quality of the construction practices during installation, or quality of materials used.
4. Timber Lakes Septic Inc. has not been retained to warranty, guarantee, or certify the proper functioning of the ISTS system for any period of time beyond the date of inspection or into the future. There are numerous factors which may affect the proper operation of a ISTS System and the inability of Timber Lakes Septic to supervise or monitor the use or maintenance of the ISTS System, the Compliance Report shall not be construed as a warranty or guarantee of future system performance.
5. By accepting this report, the client understands that Timber Lakes Septic will not be responsible for any monetary damages exceeding the fee for services provided.
6. This Report is prepared for the person or rep of the person providing payment for the fees charged.

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS)

Doc Type: Compliance and Enforcement

Instructions: Inspector must submit completed form to Local Governmental Unit (LGU) and system owner within 15 days of final determination of compliance or noncompliance. Instructions for filling out this form are located on the Minnesota Pollution Control Agency (MPCA) website at <https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf>.

Property information

Local tracking number: _____

Parcel ID# or Sec/Twp/Range: 01-0-010101 Reason for Inspection Permit

Local regulatory authority info: Aitkin County

Property address: 39067 455th Place Aitkin, MN 56431

Owner/representative: Cory Trotter Owner's phone: Via text

Brief system description: 1000/500 septic, 750 lift, 3 manholes surfaced to a 10x38 Mound.

System status

System status on date (mm/dd/yyyy): 11/9/2023

Compliant – Certificate of compliance*

Noncompliant – Notice of noncompliance

(Valid for 3 years from report date unless evidence of an imminent threat to public health or safety requiring removal and abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.)

Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.

An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance or under section 145A.04 subdivision 8.

***Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.**

Reason(s) for noncompliance (check all applicable)

- Impact on public health (Compliance component #1) – *Imminent threat to public health and safety*
- Tank integrity (Compliance component #2) – *Failing to protect groundwater*
- Other Compliance Conditions (Compliance component #3) – *Imminent threat to public health and safety*
- Other Compliance Conditions (Compliance component #3) – *Failing to protect groundwater*
- System not abandoned according to Minn. R. 7080.2500 (Compliance component #3) – *Failing to protect groundwater*
- Soil separation (Compliance component #5) – *Failing to protect groundwater*
- Operating permit/monitoring plan requirements (Compliance component #4) – *Noncompliant - local ordinance applies*

Comments or recommendations

Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Business name: Timber Lakes Septic Service Certification number: C7644

Inspector signature: Tim Woodrow License number: L455

(This document has been electronically signed) Phone: 218-927-6175

Necessary or locally required supporting documentation (must be attached)

- Soil observation logs
- System/As-Built
- Locally required forms
- Tank Integrity Assessment
- Operating Permit
- Other information (list): _____

Property Address: 39067 455th Place Aitkin, MN 56431

Business Name: Timber Lakes Septic Service

Date: 11/9/2023

1. Impact on public health – Compliance component #1 of 5

Compliance criteria:

System discharges sewage to the ground surface	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No

Any "yes" answer above indicates the system is an imminent threat to public health and safety.

Describe verification methods and results:

Attached supporting documentation:

- Other: _____
- Not applicable

2. Tank integrity – Compliance component #2 of 5

Compliance criteria:

System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
If yes, which sewage tank(s) leaks:	

Any "yes" answer above indicates the system is failing to protect groundwater.

Describe verification methods and results:

Attached supporting documentation:

- Empty tank(s) viewed by inspector
- Name of maintenance business: _____
- License number of maintenance business: _____
- Date of maintenance: _____
- Existing tank integrity assessment (Attach)
- Date of maintenance 11/8/2023
(mm/dd/yyyy): (must be within three years)
- (See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))
- Tank is Noncompliant (pumping not necessary – explain below)
- Other: _____

3. Other compliance conditions – Compliance component #3 of 5

3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?

Yes* No Unknown

3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety? Yes* No Unknown

**Yes to 3a or 3b - System is an imminent threat to public health and safety.*

3c. System is non-protective of ground water for other conditions as determined by inspector? Yes* No

3d. System not abandoned in accordance with Minn. R. 7080.2500? Yes* No

**Yes to 3c or 3d - System is failing to protect groundwater.*

Describe verification methods and results:

Attached supporting documentation: Not applicable

4. Operating permit and nitrogen BMP* – Compliance component #4 of 5 Not applicable

Is the system operated under an Operating Permit? Yes No **If “yes”, A below is required**

Is the system required to employ a Nitrogen BMP specified in the system design? Yes No **If “yes”, B below is required**

BMP = Best Management Practice(s) specified in the system design

If the answer to both questions is “no”, this section does not need to be completed.

Compliance criteria:

a. Have the operating permit requirements been met? Yes No

b. Is the required nitrogen BMP in place and properly functioning? Yes No

Any “no” answer indicates noncompliance.

Describe verification methods and results:

Attached supporting documentation: Operating permit (Attach)

5. Soil separation – Compliance component #5 of 5

Date of installation 9/10/2003 Unknown
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging? Yes No

Attached supporting documentation:

- Soil observation logs completed for the report
- Two previous verifications of required vertical separation
- Not applicable (No soil treatment area)
- _____

Compliance criteria (select one):

5a. For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment: Yes No*

Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.

5b. Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage, or lodging establishment: Yes No*

Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*

5c. "Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules 7080. 2350 or 7080.2400 (Intermediate Inspector License required ≤ 2,500 gallons per day; Advanced Inspector License required > 2,500 gallons per day) Yes No*

Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Indicate depths or elevations

A. Bottom of distribution media	
B. Periodically saturated soil/bedrock	
C. System separation	
D. Required compliance separation*	

*May be reduced up to 15 percent if allowed by Local Ordinance.

**Any "no" answer above indicates the system is failing to protect groundwater.*

Describe verification methods and results:

Upgrade requirements: (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

Purpose: This form *may* be used to certify the compliance status of the sewage tank components of the SSTS. **This form is not a complete SSTS inspection report, only a tank integrity assessment, and may only certify sewage tank compliance status when entirely completed and signed by a qualified professional.** SSTS compliance inspection report forms can be found at: <https://www.pca.state.mn.us/water/inspections>.

Instructions: This form may be completed, and signed, by a Designated Certified Individual (DCI) of a licensed SSTS inspection, maintenance, installation, or service provider business who personally conducts the necessary procedures to assess the compliance status of each sewage tank in the system. Only a licensed maintenance business is authorized to pump the tank for assessment. A copy of this information should be submitted to the system owner and be maintained by the licensed SSTS business for a period of five (5) years from the assessment date.

When this form is signed by a qualified certified professional, it becomes *necessary supporting documentation* to an Existing System Compliance Inspection Report: *Compliance inspection form - Existing system (wq-wwists4-31b)*. This form can be found on the MPCA website at <https://www.pca.state.mn.us/water/inspections>.

The information and certified statement on this form is **required** when existing septic tank compliance status is determined by an individual other than the SSTS Inspector that submits an inspection report. This form represents a third party assessment of SSTS component compliance and is allowable under Minn. R. 7082.0700, subp. 4(B)(1). This form is valid for a period of three years beyond the signature date on this form unless a new evaluation is requested by the owner or owner's agent or is required according to local regulations. Additional Administrative Rule references for this activity can be found at Minn. R. 7082.0700, subp. 4(B),(C), and (D) and; Minn. R. 7083.0730(C).

Owner information

Owner/Representative Trotter, Cory
 Property address: 39067455th Pl, Aitkin, MN 56431
 Local Regulatory Authority: Aitkin County Parcel ID: 01-0-010101

System status

System status on date (mm/dd/yyyy): 11/8/2023

Certificate of sewage tank compliance **Notice of sewage tank non-compliance**

Compliance criteria:

The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit - "Failure to Protect Groundwater."	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
The SSTS has a sewage tank that leaks below the designed operating depth - "Failure to Protect Groundwater."	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
The SSTS presents a threat to public safety by reason of structurally unsound (damaged, cracked, or weak) maintenance hole cover(s) or lids or any other unsafe condition - "Imminent Threat to Public Health or Safety."	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No

Any "yes" answer above indicates sewage tank non-compliance.

Company information

Company name: Timber Lakes Septic Service Inc
 Business license number: L455

Designated Certified Individual (DCI) information

Print name: Dan Swanson
 Certification number: C6023

I personally conducted the work described above as a Designated Certified Individual of a Minnesota-licensed SSTS inspection, maintenance, installation, or service provider Business. I personally conducted the necessary procedures to assess the compliance status of each sewage tank in this SSTS.

By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Designated Certified Individual's signature: Dan Swanson Date (mm/dd/yyyy): 11/8/2023
(This document has been electronically signed.)

INDIVIDUAL SEWAGE TREATMENT SYSTEM INSPECTION FORM

AITKIN COUNTY, MINNESOTA

Township Aitkin Date of Inspection 9/14/03 Permit Number 30683
 Owner C. Trotter Parcel Number 01-0-010100
 Project Address Blk N 330' of lots 10 & 9 Installer Dale Lundquist
 City _____ Zip Code _____ New Repair

SETBACKS:

Buildings to tank(s) 40'
 Buildings to drainfield 100'
 Well(s) 50' or 100' 58'
 Lake/Creek/Wetland 150'

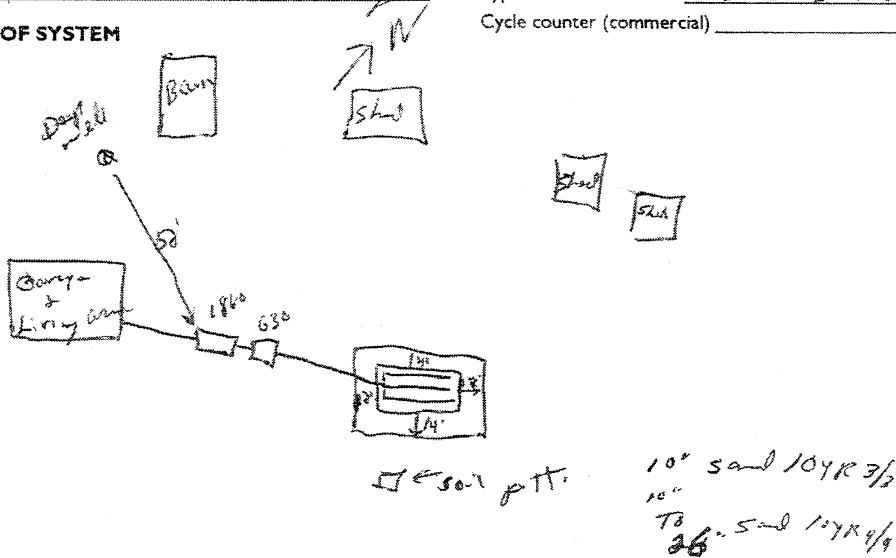
SEPTIC TANKS:

Liquid capacity 1860
 Manufacturer & type Jac pre-cast
 Type of baffle plastic
 Inspection pipes 1-4 1-6"
 Manholes access 2
 No. & height of risers 1/2 1 1/2

MOUNDS:

Percent slope 8
 Upslope dike width 12'
 Downslope dike width 14'
 Sideslope dike width 14'
 Drainfield rock below pipe 9"
 Depth of sand below rock 12"
 Perforation size & spacing 1/4 - 3'
 Pipe size & spacing 1 1/2 - 3' alternate
 Dimensions of rock bed 10 x 38
 Dimensions of sand base 38 x 62
 Final cover 16" in center 10" on rock edge

DRAWING OF SYSTEM



DIST. or DROP BOX & TYPE

TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:

Trench depth _____
 Trench length _____
 Trench bottom width _____
 Trench bottom level _____
 Trench spacing _____
 Drainfield rock below pipe _____
 Size of gravelless pipe _____
 Depth of backfill _____
 Absorption area: square feet _____
 lineal feet _____

PUMPS:

Tank capacity 630
 Tank manufacturer & type Jac pre-cast
 No. & height of risers 2 1/2
 Pump manufacturer & model# Grundfos
 Horsepower & GPM 1/3 -
 Feet of head 12
 Cycles per day 5
 Gallons per cycle 100
 Size of discharge line 2"
 Type of electrical hookup pes
 Type & location of alarm elec. Indoor
 Cycle counter (commercial) _____

Inspector's Comments _____

Corrective Action Required _____

Inspector's Signature [Signature] White-County
 Installer's Signature [Signature] Yellow-Applicant Pink-Installer

FIELD EVALUATION SHEET

PRELIMINARY EVALUATION DATE 6/28/03, FIELD EVALUATION DATE 6/28/03
PROPERTY OWNER: Cory Trotter PHONE _____
ADDRESS: 455 PL CITY, STATE, ZIP: 56431
LEGAL DESCRIPTION: _____
PIN# _____ SEC _____ T _____ R _____ TWP NAME Atkin
FIRE# _____ LAKE/RIVER Mississippi River LAKE CLASS _____ OHWL _____ FT.

DESCRIPTION OF SOIL TREATMENT AREAS

	AREA #1	AREA #2	REFERENCE BM ELEV. <u>100.0</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>Concrete under Silo</u>
FLOODING	YES ___ NO <u>X</u>	YES ___ NO <u>X</u>	_____
RUN ON POTENTIAL	YES ___ NO <u>X</u>	YES ___ NO <u>X</u>	_____
SLOPE %	<u>0</u>	_____	_____
DIRECTION OF SLOPE	_____	_____	_____
LANDSCAPE POSITION	_____	_____	_____
VEGETATION TYPES	<u>Grass</u>		

DEPTH TO STANDING WATER OR MOTTLED SOIL: BORING# 1 36", 1A 36", 2 36", 2A 36"

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

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

CONSTRUCTION RELATED ISSUES: _____

LIC# 730 SITE EVALUATOR SIGNATURE: Dale R. Lundquist

SITE EVALUATOR NAME: Dale R. Lundquist TELEPHONE# 218-927-3933

FLUG REVIEW _____ DATE _____

Comments: _____

SOIL BORING LOGS ON REVERSE SIDE

Cong Trotter

SOILS CHARTS FOR BOTH PROPOSED AND ALTERNATE SITES

1 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-10"	Top Soil	
10-25"	S-4	
25-30"	S-3	
36"	Mottling	

2 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-10"	Black Dirt	
10-25"	S-4	
25-30"	S-3	
36"	Mottling	

1 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-14"	Black Dirt	
14-25"	S-4	
25-30"	S-3	
36"	Mottling	

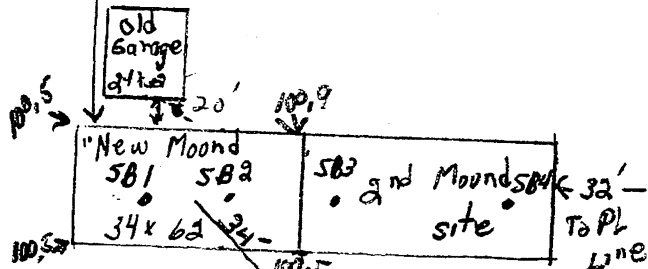
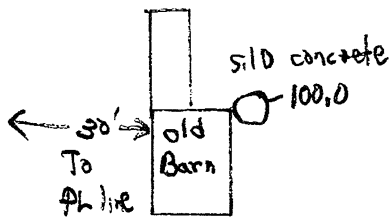
2 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-14"	Black Dirt	
14-25"	S-4	
25-30"	S-3	
36"	Mottling	

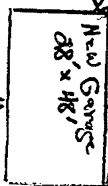
ADDITIONAL SOIL BORINGS MAY BE REQUIRED

Mississippi River

Cony Trotter



1860 Combs Tank



Old tank To be Pumped + Filled

New Well

Drive way

172' To PL line

130'

South PL Line

850+

