

## Subsurface Sewage Treatment System Operating Permit

<b>PERMITTEE NAME</b>	<u>David Bristol</u>	<b>OPERATING PERMIT #</b>	<u>OP 827</u>
<b>MAILING ADDRESS</b>	<u>15020 RIVER BIRCH CT, PUNTA CONDA, FL 33955</u>	<b>APPLICATION #</b>	<u>App-2024-000185</u>
<b>PROPERTY ADDRESS</b>	<u>39545 STATE HWY 18 AITKIN, MN 56431</u>	<b>PARCEL #</b>	<u>36-0-046200</u>
<b>SYSTEM TYPE</b>	<u>Type 3</u>	<b>DATE ISSUED</b>	<u>2023-06-16</u>
<b>TREATMENT LEVEL</b>	<u>A</u>	<b>EXPIRATION DATE</b>	<u>2025-09-30</u>
<b>SYSTEM DESIGN FLOW (GPD)</b>	<u>300</u>	<b>RENEWAL PERIOD</b>	<u>2 Years</u>

**RESIDENTIAL/COMMERCIAL** Residential

**SYSTEM COMPONENTS** Type 3 constructed on fill soils and disturbed soils. 2 Bedroom mound with 12? washed sand under rockbed.

**SERVICE PROVIDER** Ritter Sewer and Excavating Inc

**MONITORING REQUIREMENTS**

Parameter	Effluent Limits	Frequency	Location
*Design Flow (gpd)	300 gpd	Monthly	Event Counter
*Ponding/Surfacing in Soil Treatment	None allowed	Annually	Drainfield

\*Owner will read event counter once a month or when present. Owner will send monthly readings report to Aitkin Co. or the contracted inspector once a year.

**MAINTENANCE REQUIREMENTS**

System Component	Maintenance	Frequency
*Septic Tank/Trash Tank	Check components/check buildup	Annually
*Pump Tank and Controls	Check components, settings, calibrate	Annually

System Component	Maintenance	Frequency
*Soil Treatment and Dispersal	Check for failure/check components	Annually
Effluent Screen	Check and clean	Annually

**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 2nd 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 Ritter Sewer and Excavating Inc 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:**

**PERMITTEE**

David Bristol

**DATE**

2024/01/29 09:23 AM

**PERMITTING AUTHORITY**

Shannon Wiebusch

**DATE**

2024/01/29 09:26 AM