

Subsurface Sewage Treatment System Operating Permit

Aitkin County Environmental Services
Planning & Zoning
 307 Second St. NW, Room 219
 Aitkin, MN 56431
 218-927-7342
 aitkinpz@co.aitkin.mn.us

(Office Use Only)	
Operating Permit #	
Application #	
Date issued:	
Expiration date:	
Renewal period:	

Facility Information

Use this form to apply for a Type 3 system operating permit

Permittee name:	Steve Hanna				
Mailing address:	14607 130th Pl	City:	Finlayson	State:	MN Zip: 55735
Email:		Phone:	612-201-4519		
Property ID number:	3A-0-013500				
Property address:	14607 130th PL. Finlayson, MN 55735				
System type:	Type 3	Treatment level:	C		
System design flow (gpd):	600 gpd	Residential/Commercial:	Residential		
System components:	2,000 combo tank, type #1 mand				

Monitoring Requirements

Parameter	Effluent limits	Frequency	Location
Design flow (gpd)	600	1, 2, 3, 6, 9, 12, 24 mon	event center
Average flow (gpd)	420	1, 2, 3, 6, 9, 12, 24 mon	event center
Ponding/Surfacing in soil treatment	600	3, 6, 9, 12, 24 mon	mound area

Monitoring Requirements Comment Field:

The system should be monitored the first two years. Then determine if necessary after that.

Maintenance Requirements

Maintenance requirements shall be performed as specified in the Management Plan as prepared by the system's Designer.

System component	Maintenance	Frequency
Septic tank/Trash tank	Pumping	24 months
Pump tank and controls	Pumping	24 months
Effluent screen	Clean	6 months or as needed
Soil treatment and dispersal	Inspect	3, 6, 9, 12, 24 months then reevaluate

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 and term 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 and maintenance information on forms as required by Aitkin County Environmental Services prior to the above date of expiration for operating permit renewal. If not renewed within ninety (90) calendar days of the expiration date, it may be required that the system be abandoned in accordance with MN Rule 7080.2500. This permit is not transferable as to person or place.

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 Soderstrom Septic LLC 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 (please print):				Permitting Authority (please print):	
Title:		Date:		Title:	Date:
Permittee Signature:	X			Permitting Authority Signature:	X
	Permittee Signature				Aitkin County Representative Signature