(Office Use Only)

Operating Permit # 877

Application #

Application #

2022-009224

Date issued:

12/15/2023 |-22-2024

**Expiration date:** 

9/30/2026

Renewal due:

9/30/2026

Renewal period:

Annual

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

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

## Facility Information

Permittee name:	HILL CITY BAPTIST CHURC	CH C/O L						
Mailing address:	PO BOX 129	City:	HILL CIT	HILL CITY		MN	Zip:	55748
Email:				Phone:	218-256	3-2574		
Property ID number	12-0-037702							
Property address:	36043 HWY 200, HILL CI	TY, MN	55748					
System type:	Туре 3		and the second section is the	Treatment	level:			
System design flow (gpd):	450 GPD			Residential/Commercial			DOMESTIC TYPE WASTE	
System components	TYPE 3, 3 BEDROOM MC			. SAND LIF	T DUE TO	MOTT	TLED SO	IL AT LES

Monitoring Requirements

Parameter	Effluent limits	Frequency	Location		
Design flow (gpd)	450 GPD	Record water use Monthly	Event Counter/Water Meter		
Ponding/Surfacing in soil treatment	None allowed	Inspect Annually	Drainfield area		

#### Monitoring Requirements Comment Field:

\*Owner will record water use at the event counter once a month or when present. Owner will send monthly readings report to Aitkin Co. once a year at renewal.

#### Maintenance Requirements

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

System component	Maintenance	Frequenc	су		
Septic tank/Trash tank	Check components/ buildup / leaking	Annually	Thon	7-27	-2023
Effluent filter (if exists)	Check and clean	Annually	11	11	11
Pump tank and controls	Check components, wiring & settings	Annually	11	10	1/
Soil treatment and dispersal	Inspect for signs of failure/check effluent levels	Annually	11	10	j ·
Soil treatment and dispersal	Check control unit/flush & clean filters	Annually	l,	**	N
	moond	V	11	16	L

& SYSTEM INSTALLED AUG 2, 2012

WIR Needed We CAN INSTALL A Water METER This Sommer

218-927-7342

## **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 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 **LARRY HOLMQUIST** 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 ioss, 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:

HILL CITY BAPTIST CHURCH

Permittee (please print):

Larry Hocmquist

Permitting Authority (please print):

Planning & Zoning/Shannon Wiebusch

Title: ENSPECTEDA

Date: 1-10-24

Title:

Office Assistant

Date: -12/15/2023

1-22-2024

Permittee

Permitee Signature

Permitting Authority Signature:

Aitkin County Representative Signature

# Subsurface Sewage Treatment System Flow Readings Report

Permittee Name:	HILL C	ZITY	Baptist	Church	1 do Lo	NNIe	Lee	
Operating Permit #:	877	,						***
Property ID #:	12-0-	¢377	02					
Property Address:	P.O. Box	129	, ItILL	CITY	City: 14 14	- dity	Zip:	55748

**Directions:** A requirement of the operating permit is to have a flow measuring devise (event counter, water meter, etc.) installed on your septic system and monitored on a Monthly basis. If the property is seasonal and is not used during certain months, please note. Report this log of readings to Aitkin County Environmental Services or your Service Provider/Inspector when the operating permit is due for renewal.

Date	Reading	Date	Reading	Date	Reading
· INSTALLED	Aug 2, 8	1022			
o Well 1	NSTALLED (	Prilled AT S	Ame Time)	Bent Fai	L TU
INSTITLL	water M	erel			
· AlDeron	INDUST M	es Power	Post Alara	INSTALL	e ar that
Time - No	Event Coon	Men - Every	thing we	is hard	To get
at That	Time ( Moc	Pec # 1+DG6	wws)		
o If W	e STILL	weed Som	ething we	can TAb	le Care
OF IT in	Summer	months of	2024		
· Check	mooned -	nd water	IN INSP	ection pipe	or
Leakage					
· ONLY	About 18 TO	20 People	e on Suno	20,0	
e ONLY	Alorst 11-	13 Peaple	on Thouse	lar NITE	FOR
BIBLE STO	dy				
* I r	eachy do	di See,	Any pres	1 TO M	on itoh
IT IN TI	ie Future				

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