

AITKIN COUNTY ENVIRONMENTAL SERVICES

**OPERATING PERMIT FOR WASTEWATER
TREATMENT AND DISPERSAL**

OPERATING PERMIT #: 492

ZONING PERMIT #: 41820

PARCEL #: 11-0-072905

PERMITTEE: Sherwood Forest HOA

MAILING ADDRESS: 21927 US Hwy 169
Aitkin, MN 56431

ORIGINAL DATE ISSUED: 5 /6 /2016

RENEWAL PERIOD:

RENEWAL EXPIRATION: 5 /6 /2018

PROPERTY ADDRESS:

Sherwood Forest HOA
Aitkin, MN 56431

TELEPHONE: (218) 678-2272

LEGAL: Lot 4 In Doc 219738

FEE PAID: 100 **DATE PAID:** 3 /25/2016 **RECEIPT:** 928724 **CK #:** 7204

Aitkin County Environmental Services authorizes the Permittee to operate a wastewater treatment and dispersal system located on the above described property in accordance with the requirements of this permit.

This permit is effective on the issuance date identified above.

This permit and the authorization to treat and disperse from the above system shall expire on the above expiration date. The Permittee is not authorized to discharge after the date of expiration. The Permittee shall submit such information and forms as required by Aitkin County Environmental Services no later than thirty (30) days prior to the expiration date. When the required information is submitted and approved by Aitkin County Environmental Services, the permit may be renewed. This permit is not transferable from owner to owner.

I hereby certify with my signature as the permittee that I understand the provisions of this permit including the 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 use of this system and if I fail to comply with the provisions of this Operating Permit. 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 permit.




Signature of Permittee



Date



Signature of Permitting Authority



Date

If you have any questions regarding this permit, including the specific permit requirements, permit reporting or permit compliance status, please contact Aitkin County Environmental Services at 218-927-7342.

A. DESCRIPTION OF WASTEWATER TREATMENT AND DISPERSAL SYSTEM
3FT MOUND. 3FT SAND 1FT ROCKBED 4 SEPRATE 10X100 ROCKBED ZONES

B. PERFORMANCE STANDARD REQUIREMENTS:

During the period beginning on the effective date (issuance date) of this permit and lasting until this permit's expiration date, the Permittee is authorized to discharge from the wastewater treatment unit to subsurface dispersal. No surface discharge is permitted. The following parameters must be monitored and the results must be found within the compliance limits.

PARAMETER	COMPLIANCE LIMIT	SAMPLE LOCATION	SAMPLE FREQUENCY	SAMPLE TYPE	REPORTING FREQUENC
					ANNUALLY
Flow	1200 GPD	Water Meter	Annually	Record on a Log Sheet	Annually

C. MAINTENANCE REQUIREMENTS:

PARAMETER	LOCATION	FREQUENCY
Check Mound Zones	Dispersal System	EVERY 6 MONTHS

D. MONITORING AND REPORTING REQUIREMENTS:

Monitoring results obtained during each calendar year shall be submitted no later than May 31st of that year to:

Aitkin County Environmental Services
209 2nd Street NW, Room 100
Aitkin, MN 56431

The monitoring reports shall be signed by the Permittee. Copies are to be retained by the Permittee.

The Permittee shall notify Aitkin County Environmental Services within thirty (30) days when monitoring results do not meet the monitoring plan requirements of this permit.

Monitoring plans may be modified as necessary and reapproved by Aitkin County Environmental Services.

Sampling and laboratory testing procedures shall be performed in accordance with Standard Methods and shall be performed by a Minnesota Department of Health approved laboratory. All sampling and testing costs shall be the responsibility of the Permittee.

Monitoring will be performed by: Ronald Straka

E. MITIGATION PLAN:

Repair any area as needed by stopping pumping to that zone.

**MAINTENANCE SERVICE, MONITORING AND INSPECTION
CONTRACT
FOR INDIVIDUAL SEWAGE TREATMENT SYSTEM**

It is hereby agreed this 6 day of MAY, 2016 by and between
R&R SEPTIC (RON STRAKA) (Inspector) and SHERWOOD FOREST (Client)

(Client) Name & Address

SHERWOOD FOREST OWNERS ASSOCIATION

Street Address 21927 US HWY 169 AITKIN

City, State, Zip AITKIN MN 56431

That in consideration of the payments provided herein, the Inspector shall provide services to perform Preventative Maintenance, Monitoring and Inspection of the Individual Sewage Treatment System (ISTS) located at the property described in the Aitkin County Operating Permit.

Each inspection includes an examination of the ISTS followed by a written report to the client. This inspection report shall contain recommendations for operation and maintenance for failure-preventative measures, if any are deemed appropriate by the inspector and a list of recommended corrective measures or replacement parts. The Inspector is authorized to submit a copy of the report to the Aitkin County Environmental Services Department.

This contract does not assume any responsibilities or obligations, which are normally the responsibilities of the Client, as related to parts or labor and does not extend to cover any costs that may be associated with any recommendations made under this contract.

The Inspector can only contract or subcontract for parts or labor after authorization. Billings for service calls shall be made on a case by case basis. This contract only covers maintenance, monitoring and inspection services per current Aitkin County Operating Permit and does not cover alarm calls of any kind.

The Inspector shall be provided access to the site and the system in order to perform the following services:

SEPTIC TANK AND LIFT STATIONS INSPECTION

(check the boxes needed to fill the requirements of the Operating Permit)

Check septic tank and compartments for solids buildup and general appearance. If necessary, have tanks pumped (cost of pumping is the responsibility of the client).

Check effluent filter for buildup and clean, if applicable.

Check pumping system, including control panel and floats.

Record and date the readings of the elapsed time meter and cycle counter(s), if applicable.

Check dosing settings (in the control panel, if applicable).

Other: _____

**If the septic tank or lift stations need pumping to be in compliance with the operating permit the cost of the pumping is the responsibility of the Client.

TREATMENT DEVICE

Inspect pretreatment unit (aerobic tank, sand filter, etc.) per manufacturer's recommendations, if applicable.

Inspect and clean any parts per manufacturer's recommendations.

Inspect and clean laterals, if applicable.

Inspect the appearance of the wastewater inside the unit for color, turbidity and examination of odors.

Sample effluent per Operating Permit monitoring requirements.

(Cost of sampling and analysis is the responsibility of the Client)

Other: _____

DISPERSAL FIELD

Inspect for visible signs of failure (surface discharge, soggy ground, wet spots, settling, etc.)

If liquid level monitors are installed, levels will be observed and recorded.

Flush filters and clean cartridges, if applicable.

Check field control unit solenoid operations or manual control, if applicable.

Other: _____

In no event shall the Inspector be responsible for special or consequential damages, including but not limited to, loss of time, injury to personal property or any other consequential damages or incidental or economic loss due to equipment failure or for any other reason. This contract does not assume any responsibilities or obligations, which are normally, the responsibility of the Client or as, related to parts or labor and does not extend to cover any costs that may be associated with any recommendations made under this contract.

This contract shall be effective: Beginning NOV 2016
and Ending DEC 31 2019

Cost for Maintenance Service, Monitoring and Inspection Contract is:

\$ 200 /yr. For 3 years totaling \$ 600⁰⁰

The Inspector agrees to provide inspection, monitoring and routine maintenance service only under this contract. The Client remedies for breach of this contract shall be limited to refund of any of the amounts paid in advance for service. This contract may be renewed 30 days from the ending date.

Payment for all services shall be paid R&R SEPTIC

Client:
Sign: [Signature]

Inspector:
Sign: _____

Print: _____

Print: _____

Date: _____

Date: _____