

# Sewage tank integrity assessment form

## Subsurface Sewage Treatment Systems (SSTS) Program

Doc Type: Compliance and Enforcement

**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 218 Septic: Kohl, Raini - Rep

Property address: 45188 310<sup>th</sup> St, Aitkin, MN 56431

Local Regulatory Authority: Aitkin County

Parcel ID: 07-0-037502

### System status

System status on date (mm/dd/yyyy): 5/30/2024

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."

Yes\*  No

The SSTS has a sewage tank that leaks below the designed operating depth - "Failure to Protect Groundwater."

Yes\*  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."

Yes\*  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

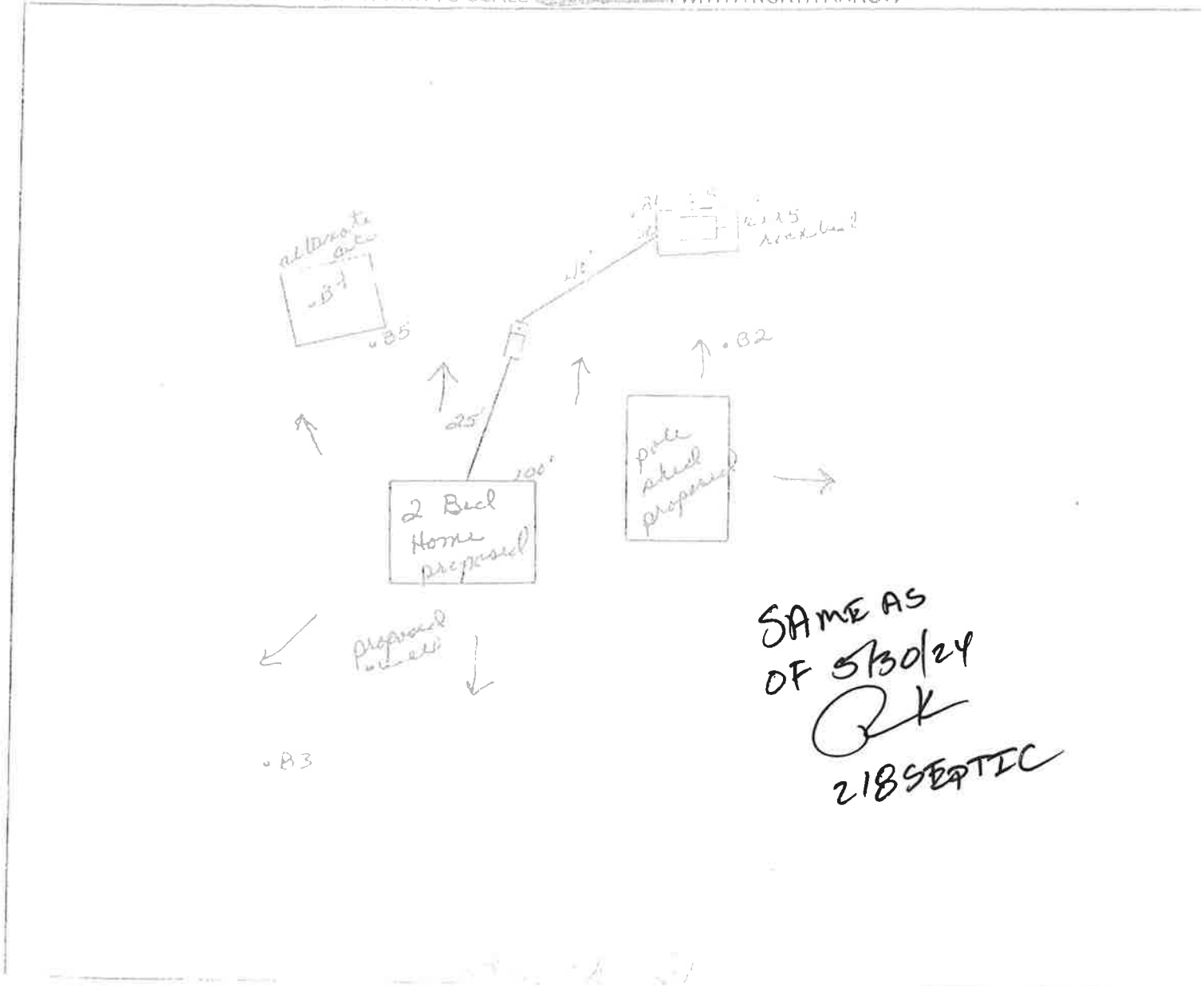
*(This document has been electronically signed.)*

Date (mm/dd/yyyy): 5/30/2024

CLIENT: Morrison

DATE: 10-2-14

MAP DRAWN TO SCALE WITH A NORTH ARROW



SAME AS  
OF 5/30/24  
PK  
218 SEPTIC

CHECK OFF LIST-HAVE ALL OF THE FOLLOWING BEEN DRAWN ON THE MAP??

- SHOW EXISTING OR PROPOSED
- WATER WELLS WITHIN 100 FT OF TREATMENT AREAS
  - PRESSURE WATER LINES WITHIN 10 FT OF TREATMENT AREAS
  - STRUCTURES
  - ALL SOIL TREATMENT AREAS
  - HORIZONTAL AND VERTICAL REFERENCE
  - POINT OF SOIL BORINGS
  - LOT EASEMENTS
  - DISTURBED/ COMPACTED AREAS
  - SITE PROTECTION-LATHE AND RIBBON EVERY 15 FT
  - ACCESS ROUTE FOR TANK MAINTENANCE
  - REQUIRED SETBACKS
  - STRUCTURES
  - CHWL
  - LOT IMPROVEMENTS
  - ALL LISTS COMPONENTS
  - DIRECTION OF SLOPE
  - ALL LOT DIMENSIONS
  - PROPERTY LINES

INDICATE ELEVATIONS

- BENCHMARK 100
- ELEVATION OF SEWER LINE @ HOUSE 99
- ELEVATION @ TANK INLET 97
- ELEVATION @ BOTTOM OF ROCK LAYER 98
- ELEVATION @ BOTTOM OF BORING OR RESTRICTIVE LAYER 95
- ELEVATION OF PUMP 91
- ELEVATION OF DISTRIBUTION DEVICE

COMMENTS:

DESIGNER SIGNATURE Lauren Maschke

LICENSE# 2264

DATE 10-2-14

# SOILS CHARTS FOR BOTH PROPOSED AND ALTERNATE SITES

1 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-5	Topsoil	10YR 3/3
5-9	clay loam	10YR 3/3
9"	clay loam	10YR 9/2

*all borings 5-8 1/2" gray silt-loam clay*

2 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR

1 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR

2 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR

ADDITIONAL SOIL BORINGS MAY BE REQUIRED

**INDIVIDUAL SEWAGE TREATMENT SYSTEM INSPECTION FORM  
AITKIN COUNTY, MINNESOTA**

Township Farm Island 46-27 Date of Inspection 10/28/2014 7/24/2014 Final Permit Number 410790

Owner Susie Morrison Parcel Number 07-0-037502

Project Address 45188 310<sup>th</sup> St Installer Scott Excavating

City Aitkin Zip Code 56431 Shepard

New  Repair

DIST. or DROP BOX & TYPE \_\_\_\_\_

**SETBACKS:**  
Buildings to tank(s) 46'  
Buildings to drainfield 25'  
Well(s) 50' or 100' 105'  
Lake/Creek/Wetland -

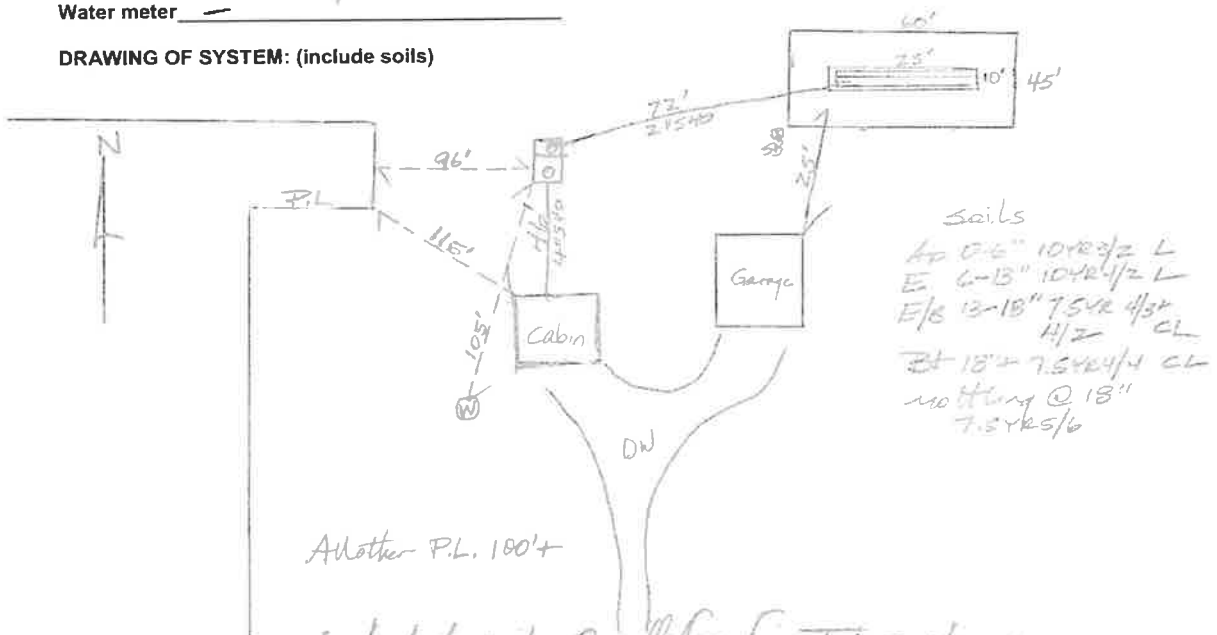
**TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:**  
Trench depth \_\_\_\_\_  
Trench length \_\_\_\_\_  
Trench bottom width \_\_\_\_\_  
Trench spacing \_\_\_\_\_  
Drainfield rock below pipe \_\_\_\_\_  
Size of gravelless pipe \_\_\_\_\_  
Depth of backfill \_\_\_\_\_  
Absorption area: square feet \_\_\_\_\_  
lineal feet \_\_\_\_\_

**SEPTIC TANKS:** New  Existing \_\_\_\_\_  
Number of tanks installed 1  
Liquid capacity and type Satter 1500 Combo  
Type of baffle Metal  
Inspection pipes 1  
Manholes size 24"  
Manhole to grade Yes  No \_\_\_\_\_  
3' riser

**MOUNDS:**  
Percent slope 1%  
Upslope dike width 20'  
Downslope dike width 20'  
Sideslope dike width 20'  
Drainfield rock below pipe 9" of 12" total  
Depth of sand below rock 24"  
Perforation size & spacing 0.25"  
Pipe size & spacing 1.5" 36" sp.  
Dimensions of rock bed 10' x 25'  
Dimensions of sand base 50' x 6.5'  
Final cover 12" : 4" R2 6" TS

**PUMPS:** New  Existing \_\_\_\_\_  
Tank capacity and type 300 part of combo  
Pump manufacturer & model # Grundfos  
Horsepower & GPM 1/2 HP 25 GPM min  
Feet of head 13.5' min  
Gallons per cycle \_\_\_\_\_  
Size of discharge line 2"  
Type & location of alarm Light + Alod. on tank  
Water meter -

**DRAWING OF SYSTEM: (include soils)**



Inspector's Comments: Looked at soils. Qualifies for TT system

Inspector's Signature \_\_\_\_\_ installer's Signature \_\_\_\_\_