



Aitkin County Environmental Services - Planning & Zoning

307 2nd St. NW, Room 219

Aitkin, MN 56431

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06/20/2024

Kelly & Amie Mayo
9163 Woodland Dr
Minnetrista, MN 55735

Re: Operating Permit #OP 2024-31
2024-001484
Parcel # 11-1-113300

Dear Permittee:

This letter is to inform you that your Operating Permit has been renewed until 09/30/2029.

Please adhere to your monitoring and maintenance contract including monitoring your water use. Failure to do so would violate the agreement to operate your system and could void the operating permit. You should contact your Service Provider/Inspector directly with questions that you may have during the year.

Thank you for your good stewardship and we hope that your system continues to operate well, protecting groundwater for you and the environment.

Sincerely,

Aitkin County Planning & Zoning

Subsurface Sewage Treatment System Operating Permit

PERMITTEE NAME	<u>Kelly & Amie Mayo</u>	OPERATING PERMIT#	<u>OP 2024-31</u>
MAILING ADDRESS	<u>9163 Woodland Dr, Minnetrista, MN 55735</u>	APPLICATION #	<u>2024-001484</u>
PROPERTY ADDRESS	<u>44655 237th Ln AITKIN, MN 56431</u>	PARCEL #	<u>11-1-113300</u>
SYSTEM TYPE	<u>Type 4</u>	DATE ISSUED	<u>2024-06-20</u>
TREATMENT LEVEL	<u>A</u>	EXPIRATION DATE	<u>2029-09-30</u>
SYSTEM DESIGN FLOW (GPD)	<u>450</u>		
RESIDENTIAL/COMMERCIAL	<u>Residential</u>		

SYSTEM COMPONENTS

1600 reverse flow septic / treatment tank, 1000 gallon flow eq tank, 10' x 38' - 1' clean sand lift mound

SERVICE PROVIDER Septic Check

MONITORING REQUIREMENTS

Parameter	Effluent Limits	Frequency	Location
*Design Flow (gpd)	450 GPD	Monthly	Event Counter
*Ponding/Surfacing in Soil Treatment	None Allowed	Annually	Drainfield
CBOD5 (mg/L)	15 mg/l	Annually	Pump Tank
TSS (mg/L)	15 mg/l	Annually	Pump Tank
Fecal Coliform Bacteria (#/100mL)	1000 cfu/100 mg/l	Annually	Pump Tank

MAINTENANCE REQUIREMENTS

System Component	Maintenance	Frequency
*Septic Tank/Trash Tank	Inspect and pump if needed	Annually
*Pump Tank and Controls	Inspect and calibrate if needed	Annually
*Soil Treatment and Dispersal	Check for surfacing/ponding	Annually
Advanced Treatment Product	Check functionality	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 Septic Check 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 Kelly & Amie Mayo **DATE** 2024/06/20 04:35 PM

PERMITTING AUTHORITY Shannon Wiebusch **DATE** 2024/06/20 04:35 PM