

**AITKIN COUNTY ENVIRONMENTAL SERVICES  
OPERATING PERMIT FOR WASTEWATER  
TREATMENT AND DISPERSAL RENEWAL**

ISSUANCE DATE: 5 /31/2014  
RENEWAL PERIOD: ANNUALLY

OPERATING PERMIT #: 381  
ZONING PERMIT #: 34096  
PARCEL #: 01-0-077707

PERMITTEE: Mary Giesler

TELEPHONE:

MAILING ADDRESS:  
1133 Sunrise Dr.  
Woodbury, MN 55125-

PROPERTY ADDRESS:  
44476 349th Ln.  
Aitkin, MN 56431

LEGAL DESCRIPTION: .39 AC OF LOT 1 IN DOC 199622

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 is valid through the renewal period identified above. The Permittee is not authorized to discharge after the renewal period. 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.

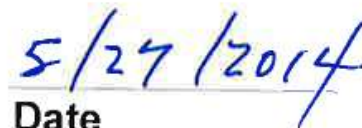
I hereby certify with my signature as the permittee that I understand the provisions of this permit including the maintenance and monitoring requirements. I agree to indemnify and hold Aitkin County harmless from all loss, damages, costs and charges that may be incurred by use of this system and if I 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



Signature of Permitting Authority



Date



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.

Date: 6/5/14 CK# 10217 Receipt# 199276 Amount: \$100.00

**A. DESCRIPTION OF WASTEWATER TREATMENT AND DISPERSAL SYSTEM**

Multi-flow aerobic treatment system dispersing into a 12' x 32 pressure bed sized for 2 bedrooms.

**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
Separation	2 Feet	Drainfield			ANNUALLY OK ✓
<del>Fecal Coliform</del>	<10000 mg/l	ATU/Pump tank	EVERY 6 MONTHS	Grab	ANNUALLY 5 year ✓
Flow	300/gpd	Water Meter	MONTHLY	Record on Log Sheet	ANNUALLY OK ✓

**C. MAINTENANCE REQUIREMENTS:**

PARAMETER	LOCATION	FREQUENCY
Flow	Water Meter	MONTHLY annually ✓
<del>Pressurization of Laterals</del>	Multi-flo	EVERY 6 MONTHS annually ✓
Pumps, Floats & Alarms	Tanks	ANNUAL good ✓
Sludge/Scum Level	Septic tank(s)	ANNUAL none ✓
Vegetative Cover	Total System	ANNUAL good ✓

ATU - eff. should be clean? clear? colorless? check socks - clean if nec.

~~every~~ every 5<sup>th</sup> yr sample coliform.

6/10/14  
OK to move to 5yr - need annual contract w/maintainer  
OK per Mark.