

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

Township _____ Date of Inspection _____ Permit Number _____

Owner _____ Parcel Number _____

Project Address _____ Installer _____

City _____ Zip Code _____

New Repair

SETBACKS:

Buildings to tank(s) _____

Buildings to drainfield _____

Well(s) 50' or 100' _____

Lake/Creek/Wetland _____

SEPTIC TANKS: New _____ Existing _____

Number of tanks installed _____

Liquid capacity and type _____

Type of baffle _____

Inspection pipes _____

Manholes size _____

Manhole to grade Yes _____ No _____

PUMPS: New _____ Existing _____

Tank capacity and type _____

Pump manufacturer & model # _____

Horsepower & GPM _____

Feet of head _____

Gallons per cycle _____

Size of discharge line _____

Type & location of alarm _____

Water meter _____

DRAWING OF SYSTEM: (include soils)

DIST. or DROP BOX & TYPE _____

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 _____

MOUNDS:

Percent slope _____

Upslope dike width _____

Downslope dike width _____

Sideslope dike width _____

Drainfield rock below pipe _____

Depth of sand below rock _____

Perforation size & spacing _____

Pipe size & spacing _____

Dimensions of rock bed _____

Dimensions of sand base _____

Final cover _____

Inspector's Comments: _____

Inspector's Signature _____ Installer's Signature _____

AITKIN COUNTY
CERTIFICATE OF INSTALLATION/~~NOTICE OF NONCOMPLIANCE~~

This certificate of installation/~~notice of noncompliance~~ has been issued this _____ day of _____, 20____ to certify compliance/~~noncompliance~~ with Aitkin County's Subsurface Sewage Treatment System Ordinance.

The premises covered by this certificate are legally described as: _____

Section _____ Township _____ Range _____ Lake _____
PERMIT NO. _____ Owner Name _____
Address _____
Installer Name _____
Type of System Inspected _____
Parcel Number _____

The certificate of installation/~~notice of noncompliance~~ was based on No ___ of the following:

- 1) Inspection of the installation or construction as in accordance with the above referenced permit and application design.

- 2) Review of as-built plans submitted in accordance with Subdivision 9.2 D of Aitkin County's Subsurface Sewage Treatment System Ordinance.

If the above permitted subsurface sewage treatment system is in noncompliance with Aitkin County's Subsurface Sewage Treatment System Ordinance, then the following shall serve as a Notice of Violation:

- 1) Statement of the findings of fact through inspections or investigations:

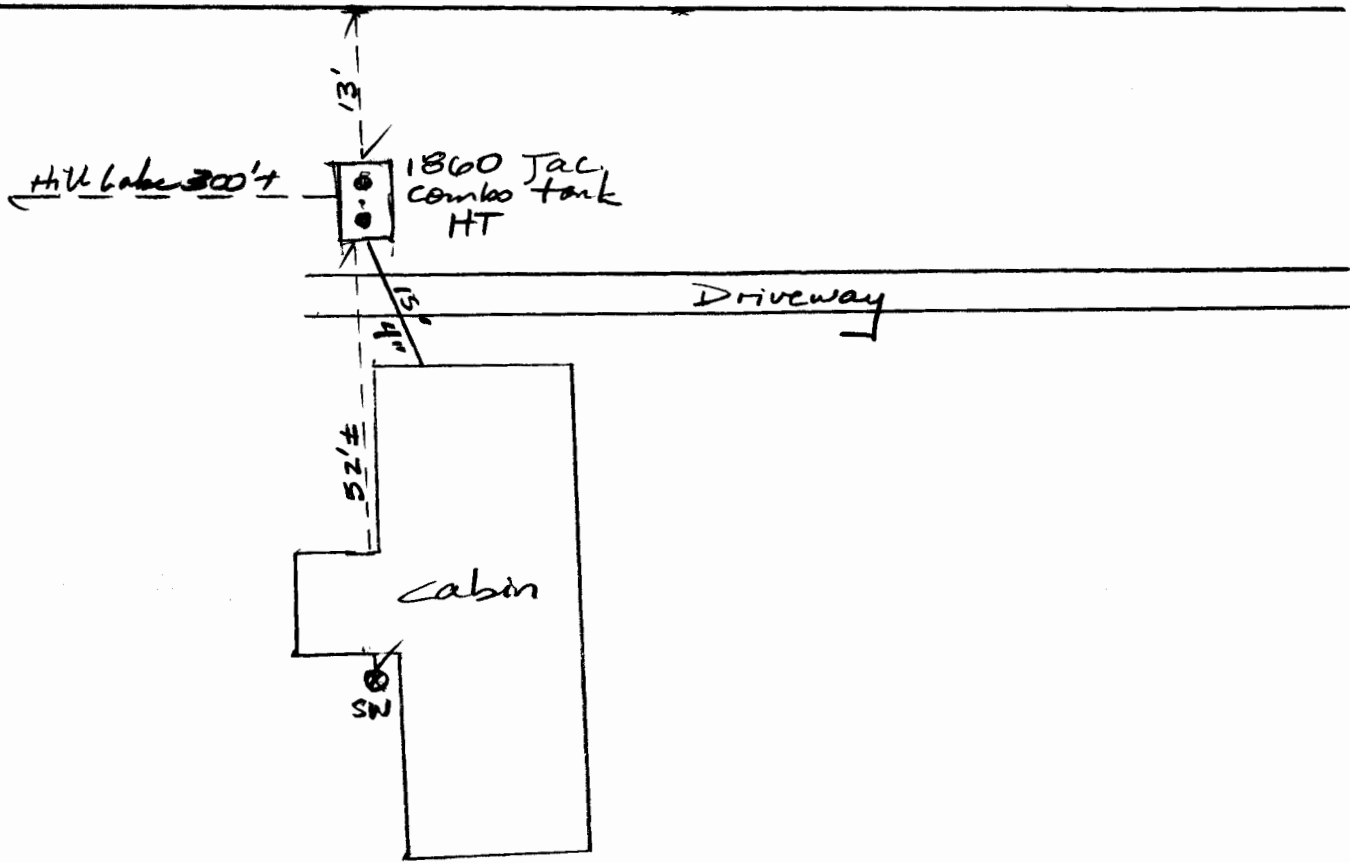
- 2) List of specific violations of Ordinance: _____

- 3) Requirements for correction or removal of violations: _____

- 4) Time schedule for compliance: _____

Failure to correct or remove the above violation(s) will result in this matter being turned over to the Aitkin County Attorney's Office for further legal action, which may result in revocation of licenses or registrations, fines and/or imprisonment.

INSPECTOR SIGNATURE _____



5/16/2016
12-0-003611
T2 Holding Tank
Dave Large-Inst.

Lang Nursery

5-11-16



Jacobson Precast Concrete, LLC

PO Box 290

Aitkin, MN 56431

TANK INSTALLATION INSTRUCTIONS

Model # 1820 Date Built: 9.4.15 Gallons: 1820

SITE CONDITION:

The site must be accessible to large, heavy trucks. Free of items like trees, stumps, overhead wires, etc. That could interfere with delivery or installation and allows trucks to within 3 to 5 ft of placement excavation.

EXCAVATION:

Excavation should be approximately 12" minimum larger than tank size to allow for adequate back fill. This may vary with soil conditions. Excavation shall have a level bottom so the weight bears on the outside walls of the tank.

BEDDING:

Each tank should be placed on about 6" of proper bedding material leveled, and should be compacted to minimum 95% compaction if tested, to ensure the life of the tank structure. Bedding must be capable of bearing the weight of the tank. Bedding material shall have the ability of 100% to pass through a 1/2" screen.

WATER TABLE:

When tanks are being placed where water levels can potentially be higher than the elevation of the tank cover, an alternate location should be considered. If water table is high insister must also consider the tank my float, if this is a possibility tank must be tied down before backfilling.

BACKFILL MATERIAL:

Sidewall of tanks require dry backfill materials that have the ability of 100% to be able to pass through a 2" screen and a minimum of 12" on all sides from the bottom to top of tank. Backfill material shall be placed to avoid impact loads on sidewall of the tank.

COVER MATERIAL:

Cover material shall be dry soil, material that has the ability of 100% to be able to pass through a 2" screen. Cover material shall be mounded over tank and around risers to direct run-off away from both.

INLET & OUTLET:

Pipe not to exceed 1" past the interior wall of tank where a baffle is used.

BURIAL DEPTH: Tanks to be installed according to model's maximum bury recommendations:

520P model is 2 ft bury depth. All other models have a 4 ft maximum bury depth.

except the 1000 gallon models at 3.25 ft.