



090506000

090506000



Becker County Planning & Zoning
915 Lake Ave
Detroit Lakes, MN 56501
(218) 846-7314
www.co.becker.mn.us

Certificate of Compliance Inspection Report - Permit #: SS2019-181

Owner & Property Information

Owner Name:	CLAUDE OPPEGARD	Site Address:	37204 FISHERMAN'S WHARF RD
Mailing Address:	CLAUDE OPPEGARD 8483 28TH AVE N GLYNDON MN 56547	Township - Sec/Twp/Rng:	EAGLE VIEW - 03/142/039
Parcel #:	090506000	Legal Description:	FISHERMAN'S WHARF LOT 8
Secondary Parcel #:		Designer:	Muff's Trenching LLC, L576 (Ronald Muff)
		Installer:	Muff's Trenching LLC, L576 (Ronald Muff)

Inspector Verified Specifications

Insp- Effluent Screen Installed:	No	Insp- Tank Nbr/Size:	1/500 low profile
Insp- Alarm Required:	Yes	Insp- Drainfield Type:	Mound
Insp- Lift Pump in System:	Yes	Insp- Drainfield Size:	10' X 30' rock bed (300 sq ft)
Insp- Number of Bedrooms:	2	Insp- Soil Verification:	#1:See attached log 8/7/2019 #2:N/A #3:N/A

Inspector Verified Setbacks

Insp- Tank Dist to Road	100+	Insp- Drainfield Dist to Road	100+
Insp- Tank Dist to Nearest Prop Line	30+	Insp- Drainfield Dist to Nearest Prop Line	24
Insp- Tank Dist to Nearest Structure	15 - garage	Insp- Drainfield Dist to Nearest Structure	60' - garage
Insp- Tank Dist to Well	125+	Insp- Drainfield Dist to Well	150+
Insp- Tank Dist to OHW	100+	Insp- Drainfield Dist to OHW	100+
Insp- Tank Dist to Pond/Wetland		Insp- Drainfield Dist to Pond/Wetland	
Insp- Tank Dist to Pressure Line		Insp- Drainfield Dist to Pressure Line	20+

Certificate of Compliance

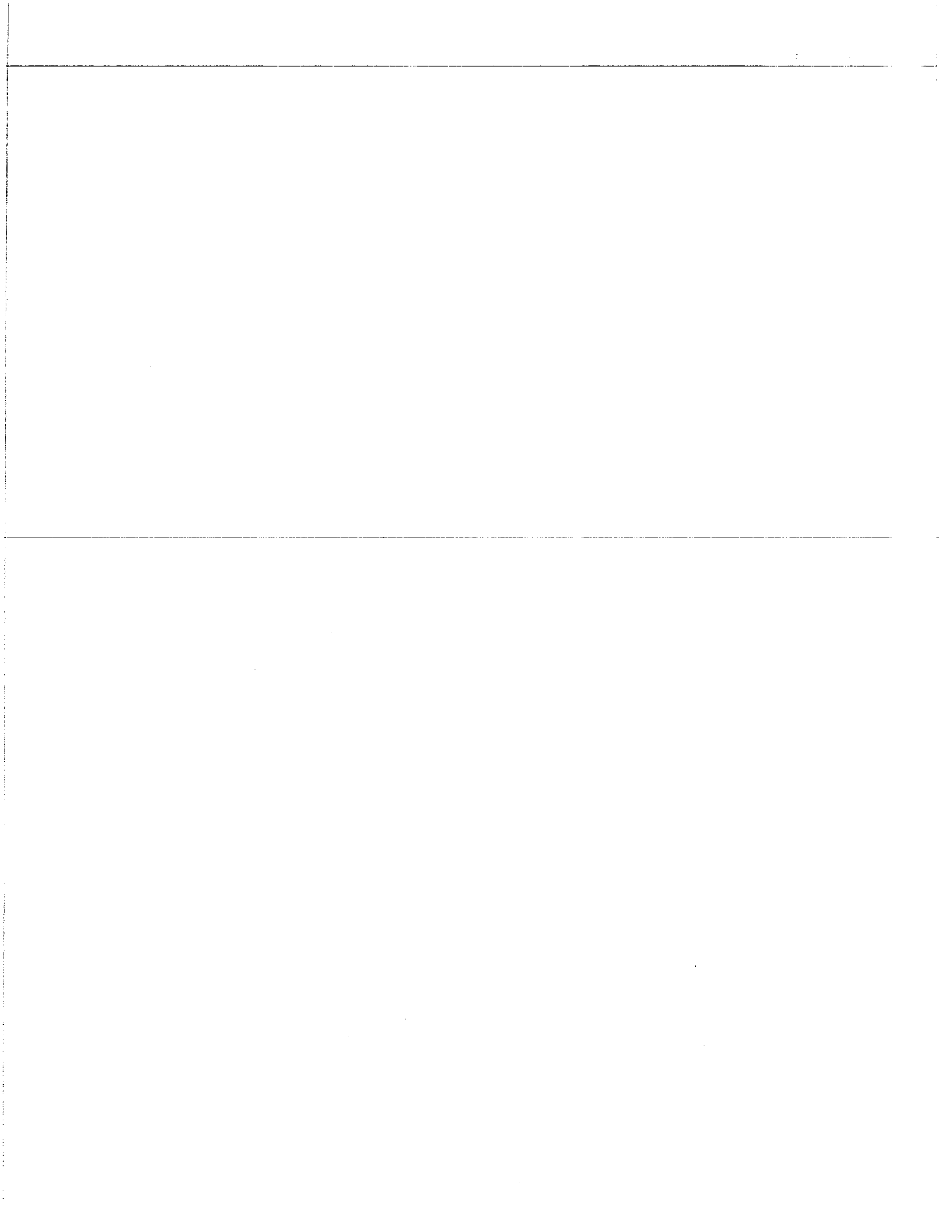
(Yes) Certificate is hereby granted based upon the application, addendum from, plans, specifications and all other supporting data. With proper maintenance, this system can be expected to function satisfactory, however this is not a guarantee.
Certification Date: 8/7/2019

Zoning Office Signature:

Denise Gubrud

Denise Gubrud - ISTS Inspector

* Certificate of Compliance is not valid unless signed by a Registered Qualified Employee *



Field Review Form

Permit # SS2019-181

Property and Owner

Owner: CLAUDE OPPEGARD	Parcel Number: 090506000
Site Address: 37204 FISHERMAN'S WHARF RD	Secondary Parcel:

Home Information

Does the structure contain any of the following elements?	Designer submitted	Inspector verified
	Garbage disposal: No Dishwasher: Yes Grinder pump: No Lift pump in bsmt: No	Garbage disposal? Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Dishwasher? <input checked="" type="checkbox"/> N <input type="checkbox"/> Grinder pump? Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Lift pump in basement? Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Number of bedrooms: 2	Review - Number of bedrooms: 2	
Effluent screen	Effluent screen installed? Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Mfr:	
Alarm: Yes Type: Alderon power post	Review - Alarm? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Type & Mfr: Alderon	
Lift pump in system: Yes	Review - Lift pump in system? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Mfr: Zoller 1/2	

Component Information

Tank size: 500 gallon <i>500 LP</i>	Review - Tank nbr: 1 size: 500 Mfr: Thelen
Drainfield type: Mound	Review - Drainfield type:
Drainfield size: Full size - 300 Reduced/warr. size -	Review - Drainfield status: none / installed / next spring Review - Drainfield size:
Absorption area size: 6 inches	Review - Absorption area size: 10 x 30
Chamber type/num: Trench sqft/chamber -	Review - Chamber type: Num: Review - Trench sqft/chamber:
Drainfield rock depth: 6 inches	Review - Rock depth: 24" sand.

Soil Verification

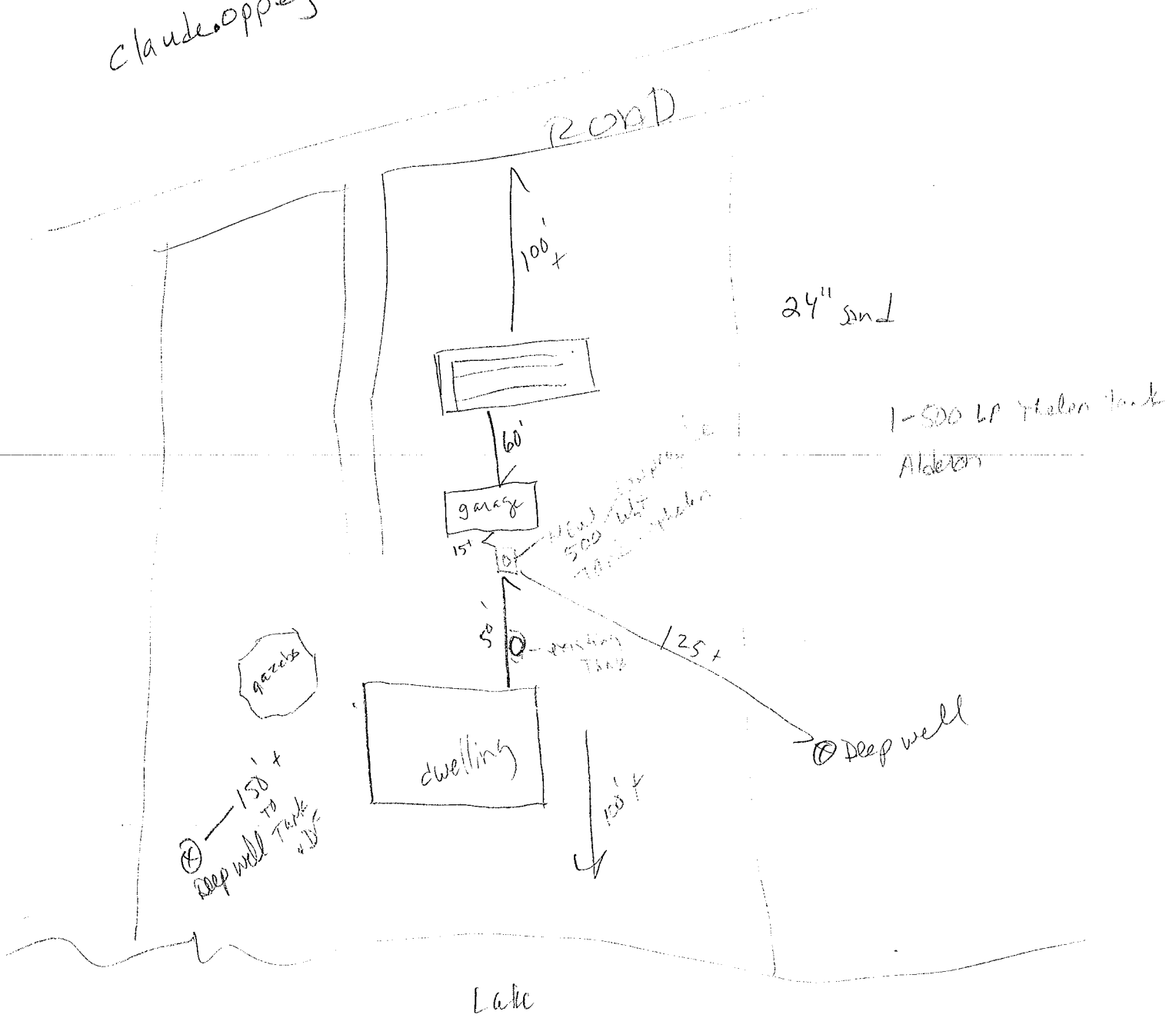
Vertical separation verified	Boring #1: Boring #2: Boring #3:
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Setback Verification

Distance to...	Designer submitted		Inspector verified	
	Tank	Drainfield	Tank	Drainfield
Road	> 300 ft	> 300 ft	100'	100'
Nearest prop line	35 ft	40 ft	30'	24'
Nearest structure	10 ft	150 ft	15-garage	100-garage
Well	60 ft	> 150 ft	125'	150'
OHW	130 ft	> 200 ft	100'	100'
Pond/Wetland				
Pressure line	N/A	N/A	20'	20'

Date System Installed: **8-7-19** Installer: **Ron Muff** Inspector: **Denise Gubrud**
08923

claude.oppengard@sanfordhealth.org



1-SDO LP Helon Tank Alderson

NEW SUPPLY TO 500 WAT 2002 ALDERSON

existing TANK

9-7-19

certify Denise Gubrud 18952

45

CR 143
muff TST



Becker County Planning & Zoning
 915 Lake Ave
 Detroit Lakes, MN 56501
 (218) 846-7314
 www.co.becker.mn.us

8-7-19
3:00

Septic Permit

Permit #: SS2019-181

Owner & Property Information

Owner Name:	CLAUDE OPPEGARD	Parcel #:	090506000
Mailing Address:	CLAUDE OPPEGARD 8483 28TH AVE N GLYNDON MN 56547	Secondary Parcel #:	
Phone #:	701-361-4607	Site Address:	37204 FISHERMAN'S WHARF RD
Lake/River(1000/300):	Yes	Township - Sec/Twp/Rng:	EAGLE VIEW - 03/142/039
Lake/River Name:	Tulaby (Eagle View) [RD]	Designer:	Muff's Trenching LLC, L576 (Ronald Muff)
Pond/Wetland(50):	No	Installer:	Muff's Trenching LLC, L576 (Ronald Muff)

Specifications

Tank to be Installed:	Existing Tank with New Lift Station	Type of Drainfield:	Mound
Total # Tanks Installed:	1	Full Size of Drainfield:	300
System Status:	Replacement System	Reduced/Warrantied Size:	
System Serves:	Dwelling	Absorbtion Area Size:	10' by 30'
Number of Bedrooms:	2	Rock Depth:	6 inches
Design Flow/GPD:	300	Chamber Type and Number:	
Garbage Disposal?	No	Chamber Trench SqFt/Chamber:	
Size of Lift Pump:	1/2 HP	Is System Pressurized?	Yes
Size of Lift Line:	1 1/2 inch	Alarm?	Yes
Soil Sizing Factor:	.83	Type of Alarm:	Alderon power post

Setbacks

Road Type:	Private Easement	Right of Way Marked:	No
Tank Dist to Road:	> 300 ft	Drainfield Dist to Road:	> 300 ft
Tank Dist to Closest Prop Line:	35 ft	Drainfield Dist to Closest Prop Line:	35 ft
Tank Dist to Nearest Structure:	10 ft	Drainfield Dist to Nearest Structure:	150 ft
Tank Dist to Well:	60 ft	Drainfield Dist to Well:	> 150 ft
Tank Dist to OHW:	130 ft	Drainfield Dist to OHW:	> 200 ft
Tank Dist to Pond/Wetland:		Drainfield Dist to Pond/Wetland:	
Tank Dist to Pressure Line:	N/A	Drainfield Dist to Pressure Line:	N/A

Other Information

Date Approved:	8/1/2019
Permit Fee:	225.00
Receipt Number:	163406-718408
Date Paid:	8/6/2019
Notes:	Utilize existing septic tank, add a 500 gallon lift tank, a mound with a 20" sand lift, 10' X 30' rock bed. 1.5" laterals with 1/4" perfs at 2.5' spacing

Zoning Office Signature:

Denise Gubrud

PERMIT MUST BE POSTED AT JOB SITE. PERMIT EXPIRES ONE YEAR FROM DATE PAID.
 ** Please schedule for inspection prior to installation! **

Becker County Restrictive Layer Verification

Client: Claude Oerengard Parcel: 09 05 06 000 Date: 8-7-19

Address: 37204 Fishermans way

Vegetation: Lawn

Weather Conditions/Time of Day: Pt cldy 3:00 Observation#/Location/Method:

Depth (in)	Texture	Matrix Color(s)	Mottle Color(s)
19"	LS	10yr 5/5	10yr 7/1

Comments/Notes:

19" to Whiting Layer

Certified Statement: I hereby certify that I have completed this work in accordance with all applicable ordinance, rules and laws.

(Designer) <u>Ron Muff</u>	(Inspector) <u>Rewse Gudrud</u>	(License #) <u>C 8452</u>	(Date) <u>8-7-19</u>
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COUNTY OF BECKER

Planning and Zoning

915 Lake Ave, Detroit Lakes, MN 56501
Phone: 218-846-7314 ~ Fax: 218-846-7266

May 20, 2019

FATHER JOSEPH D RICHARDS
37204 FISHERMAN'S WHARF RD
WAUBUN MN 56589

COPY

Re Property: 09.0506.000

Dear Mr/Mrs Richards,

A compliance inspection form was submitted into our office 05/8/19 stating the existing septic system servicing the property is noncompliant per inspection conducted 4/30/19.

The existing septic system is to be upgraded, repaired or replaced per State and County regulations. You have 10 months from the date of non-compliance to update the system.

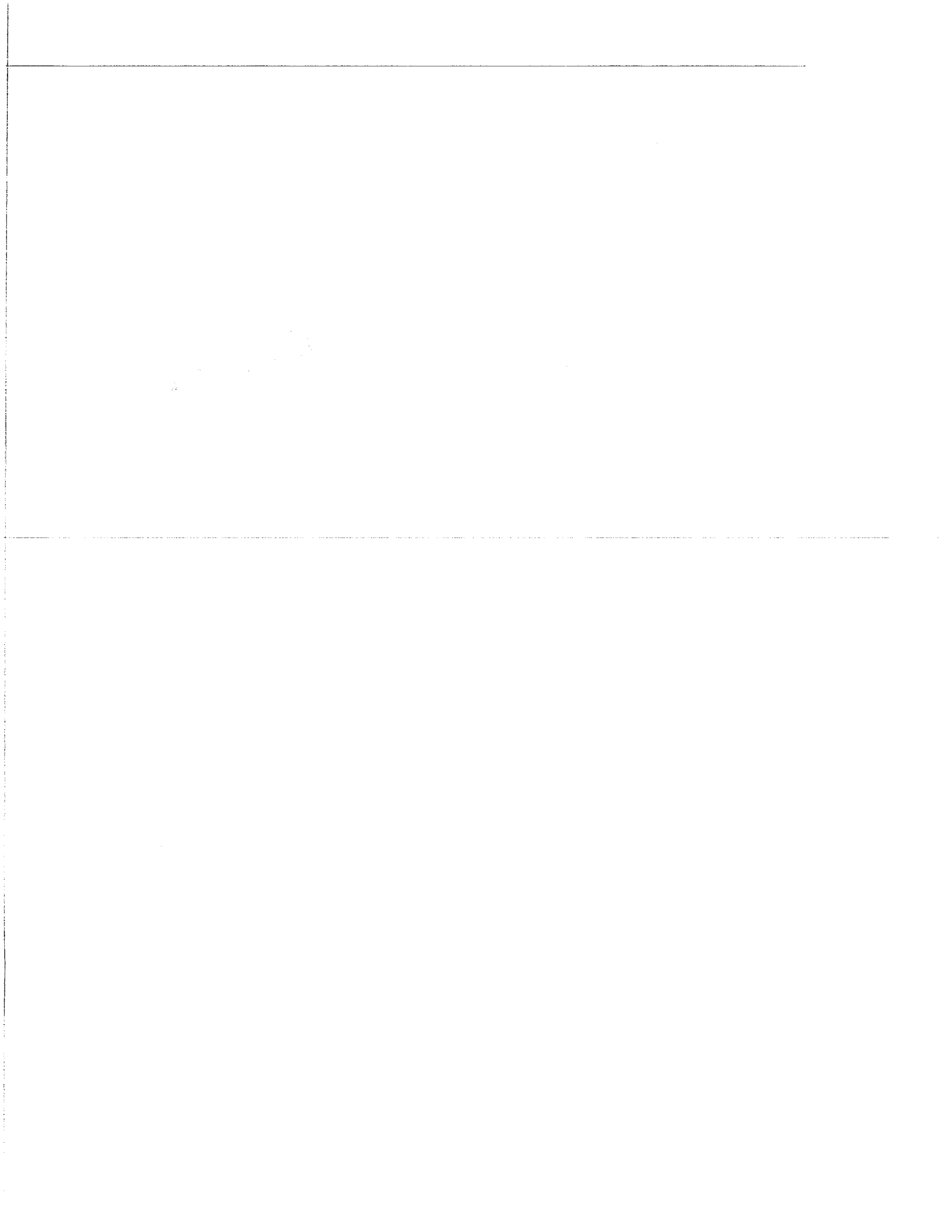
Enclosed is a list of ISTS contractors. An application for an upgraded system must be submitted into the office, with the installation completed within 10 months.

Any questions, please contact our office at 218-846-7314. Thank you.

Rachel Bartee

Rachel Bartee

Zoning Technician



Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.

Submit completed form to Local Unit of Government (LUG) and system owner within 15 days

For local tracking purposes:

System Status

System status on date (mm/dd/yyyy): 4/30/2019

Compliant – Certificate of Compliance
(Valid for 3 years from report date, unless shorter time frame outlined in Local Ordinance.)

Noncompliant – Notice of Noncompliance
(See Upgrade Requirements on page 8.)

Reason(s) for noncompliance (check all applicable)

- Impact on Public Health (Compliance Component #1) – Imminent threat to public health and safety
- Other Compliance Conditions (Compliance Component #3) – Imminent threat to public health and safety
- Tank Integrity (Compliance Component #2) – Failing to protect groundwater
- Other Compliance Conditions (Compliance Component #3) – Failing to protect groundwater
- Soil Separation (Compliance Component #4) – Failing to protect groundwater
- Operating permit/monitoring plan requirements (Compliance Component #5) – Noncompliant

Property Information

Parcel ID# or Sec/Twp/Range: 090506000

Property address: 37204 Fishermans Wharf Rd, Wauban, MN 56589 Reason for inspection: Sale

Property owner: Joseph Richards Owner's phone: _____

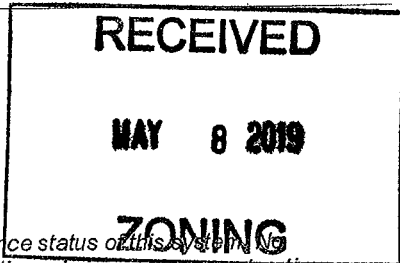
or
Owner's representative: _____ Representative phone: _____

Local regulatory authority: Becker County Regulatory authority phone: 218-846-7314

Brief system description: 1000 gal. tank to 300 sq. ft. seepage bed

Comments or recommendations:

Soil Separation under drainfield did not meet state requirement of 36 inches



Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

Inspector name: Phil Stoll Certification number: 7526

Business name: Stoll Inspections License number: 2982

Inspector signature:  Phone number: 218-839-1849

Necessary or Locally Required Attachments

- Soil boring logs
- System/As-built drawing
- Forms per local ordinance
- Other information (list): _____

UNIVERSITY

CHOS B YAN

1950

1. Impact on Public Health – Compliance component #1 of 5

Compliance criteria:

System discharges sewage to the ground surface.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Any "yes" answer above indicates the system is an imminent threat to public health and safety.

Comments/Explanation:

Verification method(s):

- Searched for surface outlet
- Searched for seeping in yard/backup in home
- Excessive ponding in soil system/D-boxes
- Homeowner testimony (See Comments/Explanation)
- "Black soil" above soil dispersal system
- System requires "emergency" pumping
- Performed dye test
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

2. Tank Integrity – Compliance component #2 of 5

Compliance criteria:

System consists of a seepage pit, cesspool, drywell, or leaching pit. <i>Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance.</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth. If yes, which sewage tank(s) leaks:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Any "yes" answer above indicates the system is failing to protect groundwater.

Comments/Explanation:

Verification method(s):

- Probed tank(s) bottom
- Examined construction records
- Examined Tank Integrity Form (Attach)
- Observed liquid level below operating depth
- Examined empty (pumped) tanks(s)
- Probed outside tank(s) for "black soil"
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

3. Other Compliance Conditions – Compliance component #3 of 5

- a. Maintenance hole covers are damaged, cracked, unsecured, or appear to be structurally unsound. Yes* No Unknown
- b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety. Yes* No Unknown
***System is an imminent threat to public health and safety.**

Explain:

- c. System is non-protective of ground water for other conditions as determined by inspector. Yes* No
***System is failing to protect groundwater.**

Explain:



4. Soil Separation – Compliance component #4 of 5

Date of installation: _____ Unknown
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging? Yes No

Compliance criteria:

For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment: Yes No

Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.

Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage, or lodging establishment: Yes No

Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*

"Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080.2350 or 7080.2400 (Advanced Inspector License required) Yes No

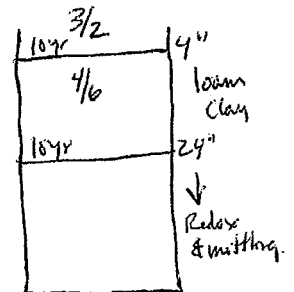
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Verification method(s):

Soil observation does not expire. Previous soil observations by two independent parties are sufficient, unless site conditions have been altered or local requirements differ.

- Conducted soil observation(s) (Attach boring logs)
- Two previous verifications (Attach boring logs)
- Not applicable (Holding tank(s), no drainfield)
- Unable to verify (See Comments/Explanation)
- Other (See Comments/Explanation)

Comments/Explanation:



Indicate depths or elevations

A. Bottom of distribution media	24"
B. Periodically saturated soil/bedrock	24"
C. System separation	0
D. Required compliance separation*	36"

*May be reduced up to 15 percent if allowed by Local Ordinance.

Any "no" answer above indicates the system is failing to protect groundwater.

5. Operating Permit and Nitrogen BMP* – Compliance component #5 of 5 Not applicable

Is the system operated under an Operating Permit? Yes No If "yes", A below is required

Is the system required to employ a Nitrogen BMP? Yes No If "yes", B below is required

BMP = Best Management Practice(s) specified in the system design

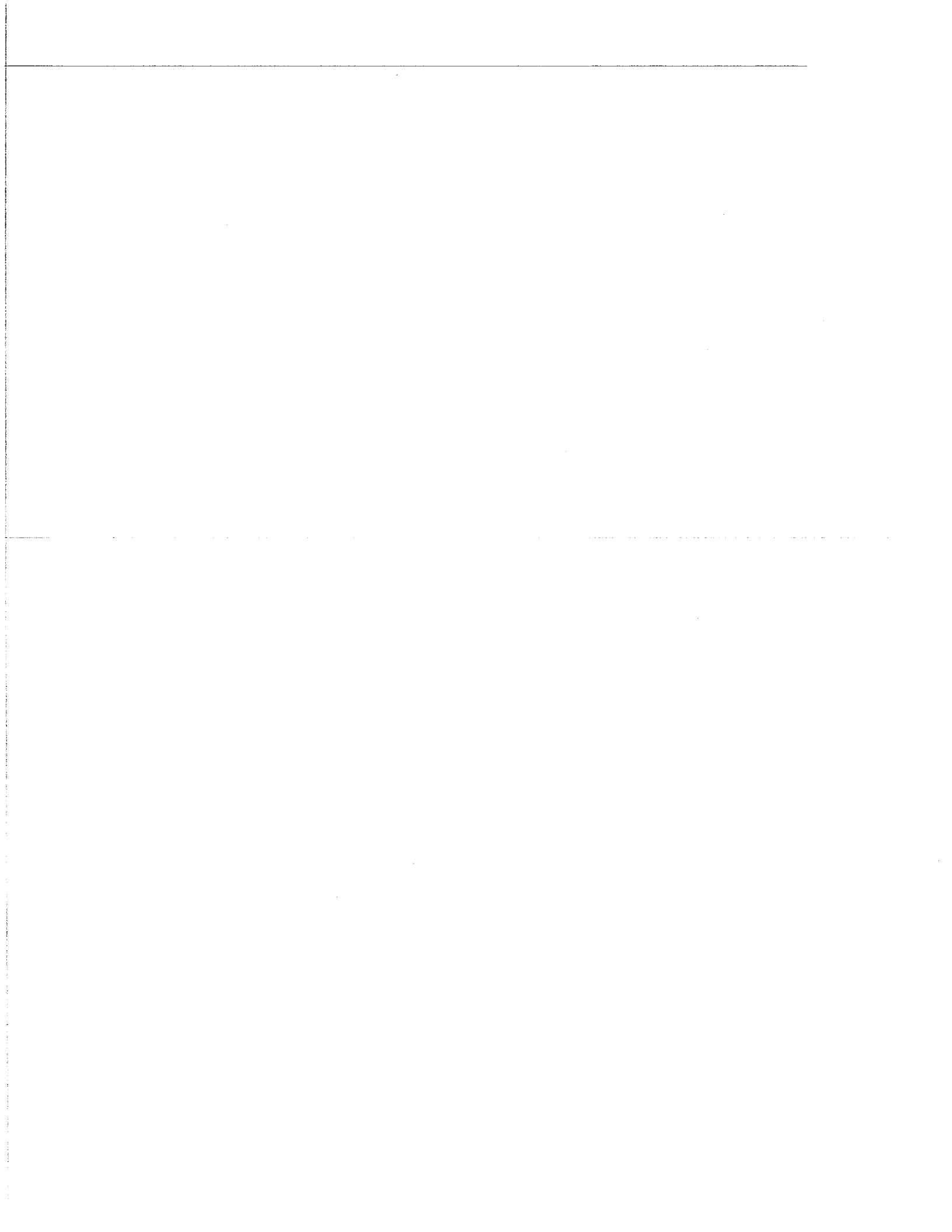
If the answer to both questions is "no", this section does not need to be completed.

Compliance criteria

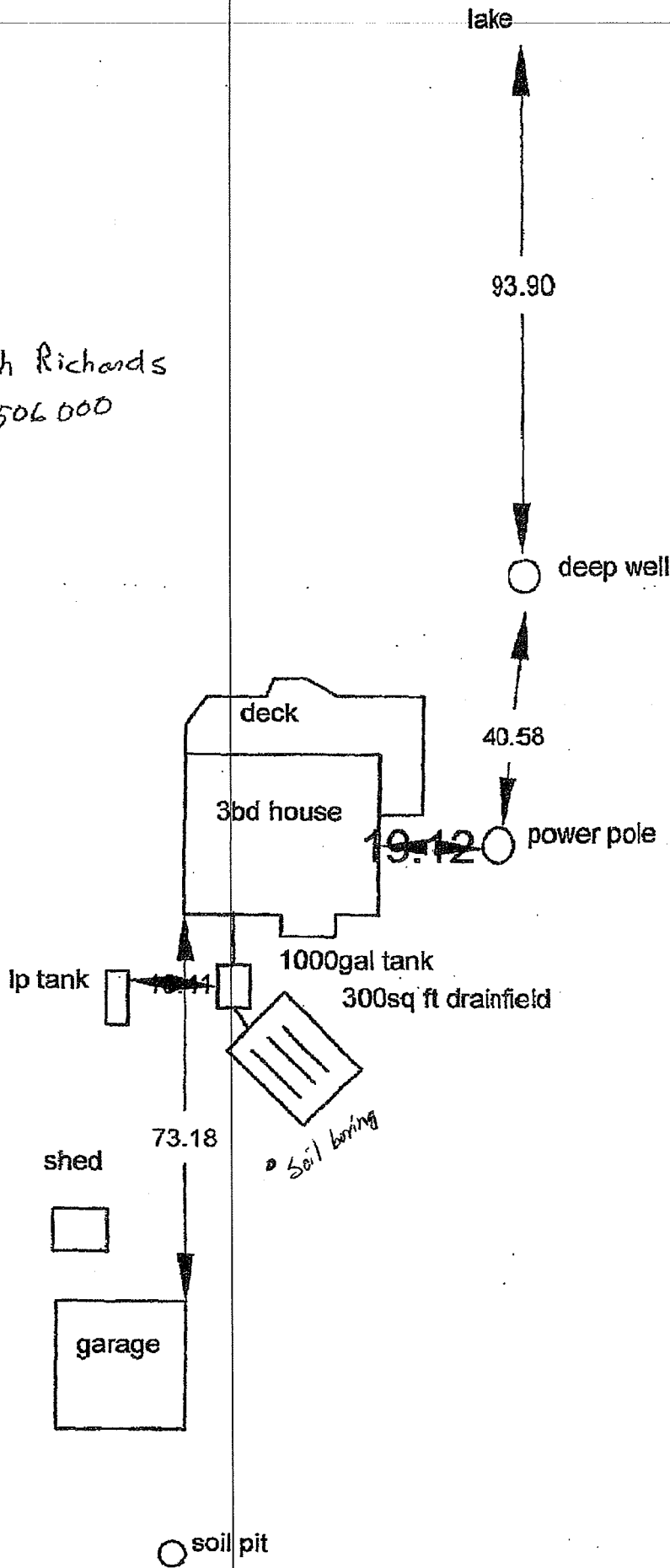
- a. Operating Permit number: _____ Yes No
Have the Operating Permit requirements been met?
- b. Is the required nitrogen BMP in place and properly functioning? Yes No

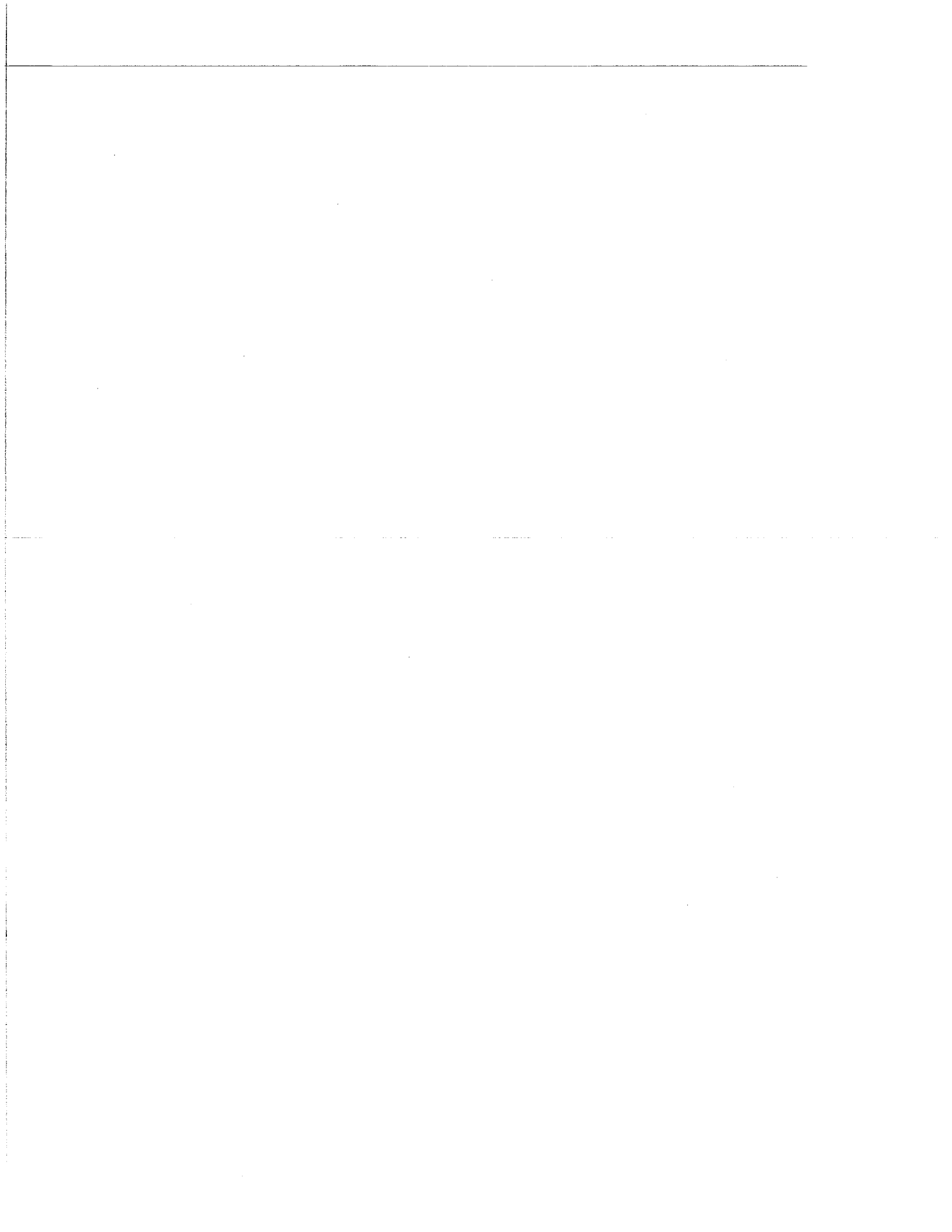
Any "no" answer indicates Noncompliance.

Upgrade Requirements (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.



Joseph Richards
09-8506 000





Tulaby

Minnesota Pollution Control Agency

520 Lafayette Road North
St. Paul, MN 55155-4194

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

Instructions on page 6

Summary Form (Completed form must be submitted to the local unit of government within 30 days)

Parcel number: 09.0506.000

System status: Compliant Noncompliant
(based on all compliance requirements)

For Local Tracking Purposes:
RECEIVED
AUG 25 2011
ZONING

Property Information

Property owner name(s): Joseph Richards Property owner phone: _____

Property address: 37204 Fisherman's Wharf Rd, Wauban MN 56589

Property owner address (if different): 2944 12th Ave South, Moorhead, MN 56560

County: Becker Permitting authority: Becker Zoning & Planning

Date system constructed: 1979 Reason for inspection: repairing Foundation

System Description

Brief system description: 1000 gal septic tank with 300sq ft of drainfield

Local permit number: _____ Number of bedrooms: 2 Design flow rate: 300

Is the system:

- In Shoreland area? Yes No
- In Wellhead Protection Area? Yes No
- An U.S. Environmental Protection Agency (EPA) Class V Injection Well? Yes No
- System serving a Minnesota Department of Health (MDH) licensed facility? Yes No

Compliance Status (Based on state requirements – additional local requirements may also apply.)

Based on the information gathered and reported on attached forms, the compliance status of this system is (check one):

- Certificate of Compliance – valid until (3 years from date of report): 8/25/2014
- Notice of Noncompliance - For Noncompliant systems:

The reason for noncompliance is: _____

This noncompliant system is classified as (check one below):

- Imminent threat to public health & safety
- Failing to protect ground water
- Not in compliance with operating permit

Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

Name: Patricia Stock Certification number: 5663

Business license name and number: A1Septic 2029 or

Name of local unit of government: _____

Signature: Patricia Stock Date: 8-25-11

Required Attachments

- Hydraulic Performance
- Tank Integrity
- Operating Permit Form (if applicable)
- Soil Boring Logs
- Soil Separation
- System drawing/As-built drawing
- Any local requirements that are different from what is required on this form
- Other information (list): _____

Upgrade Requirements (derived from Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

Parcel number: 09.0506.000

System status: Compliant Noncompliant
(as determined by this form)

Hydraulic Performance and Other Compliance – Compliance Inspection Form for Existing SSTS

Compliance Issue #1 of 4

Date of observation: 8-12-11

Reason for observation: repairing Foundation

This form expires upon next inspection or in three years, whichever occurs first: 8-25-14

Compliance questions/criteria: (Required)

(Check the appropriate box)

Does the system discharge sewage to the ground surface? Yes No

Does the system discharge sewage to drain tile or surface waters? Yes No

Does the system cause sewage backup into dwelling or establishment? Yes No

Do other situations exist that have the potential to immediately and adversely impact or threaten public health or safety (electrical, unsafe covers, etc.)? Yes No

Any "yes" answer indicates that the system is an imminent threat to public health and safety.

Does the system pose a threat to ground water for any conditions deemed non-protective as determined by the inspector? Yes No

"Yes" indicates that the system is failing to protect ground water. If "yes", describe the condition noted:

Verification Method*: (Optional)

(Check the appropriate box)

Searched for surface outlet

Performed hydraulic test

Searched for seeping in yard

Checked for backup in home

Excessive ponding in soil system/D-boxes

Homeowner testimony

Examined for surging in tank

"Black soil" above soil dispersal system

System requires "emergency" pumping

Performed dye test

Other: _____

** No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.*

Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Joseph Richards

Property address: 37204 Fisherman's Wharf Rd, Wauban MN 56589

Property owner's address (if different): 2944 12th Ave South, Moorhead, MN 56560

County: Becker

Property owner phone: _____

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Patricia Stock

Certification number: 5663

Business license name and number: A1Septic 2029

or

Name of local unit of government: _____

Signature: Patricia Stock

Date: 8-25-11



Parcel number: 09.0506.000

System status: Compliant Noncompliant
(as determined by this form)

Tank Integrity and Safety Compliance – Compliance Inspection Form for Existing SSTS

Compliance Issue #2 of 4

Date of observation: 8-12-14 Reason for observation: repairing foundation

This form expires on (three years): 8-12-14

Compliance questions/criteria: (Required) (Check the appropriate box)

Does the system consist of a seepage pit*, cesspool, drywell, or leaching pit? Yes No

Do any sewage tank(s) leak below their designed operating depth? Yes No

If yes, identify which sewage tank leaks. _____
Any "yes" answer indicates that the system is failing to protect ground water.

* Seepage pits meeting 7080.2550 may be compliant if allowed in ordinance by local permitting authority.

Verification Method** (Optional) (Check the appropriate box)

- Probed tank bottom
- Observed low liquid level
- Examined construction records
- Examined empty (pumped) tank
- Probed outside tank for "black soil"
- Pressure/vacuum check
- Other: _____

** No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.

Safety Check

- 1. Are maintenance hole covers damaged, cracked, or appeared to be structurally unsound? Yes* No
- 2. Were maintenance hole covers replaced in a secured manner (e.g., screws replaced)? Yes No*
- 3. Was secondary access restraint present (safety pan, second cover, or safety netting) – highly recommended. Yes No
- 4. Are other safety/health issue present? Yes* No

Explain: _____

***System is an imminent threat to public health and safety.**

Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) **Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems**. Observations, interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Joseph Richards

Property address: 37204 Fisherman's Wharf Rd, Wauban MN 56589

Property owner's address (if different): 2944 12th Ave South, Moorhead, MN 56560

County: Becker Property owner phone: _____

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Patricia Stock Certification number: 5663

Business license name and number: A1Septic 2029 or

Name of local unit of government: _____

Signature: Patricia Stock Date: 8-25-11



Parcel number: 09.0506.000

System status: Compliant Noncompliant
(as determined by this form)

Soil Separation Compliance and Other Compliance – Compliance Inspection Form for Existing SSTS Compliance Issue #3 of 4

Date of observation: 8-12-14

Reason for observation: repair foundation

This information on this form does not expire.

Compliance questions/criteria: (Required) (Check the appropriate box)

For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:

Does the system have at least a two-foot vertical separation distance from periodically saturated soil or bedrock?

Yes No

For non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage or lodging establishment:

Does the system have a three-foot vertical separation distance from periodically saturated soil or bedrock?*

Yes No

For reduced separation distance systems (i.e., "performance" systems under old 7080.0179 or Type IV or V system under new 7080.2350 or 7080.2400):

Does the system meet the designed vertical separation distance from periodically saturated soil or bedrock?*

Yes No

Any "no" answer indicates that the system is failing to protect ground water.

Verification Method** (Optional)

(Check the appropriate box)

Conducted soil observation(s) (attach boring logs)

Two previous verifications (attach boring logs)

Other: dug soil pit

Soil observation does not expire. Previous observations by two independent parties are sufficient, unless site conditions have been altered.

* *May be reduced by up to 15 percent if allowed in local ordinance.*

** *No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.*

Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) **Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems**. Observations, interpretations, and conclusions must be completed by an inspector or designer. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Joseph Richards

Property address: 37204 Fisherman's Wharf Rd, Wauban MN 56589

Property owner's address (if different): 2944 12th Ave South, Moorhead, MN 56560

County: Becker

Property owner phone: _____

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Patricia Stock

Certification number: 5663

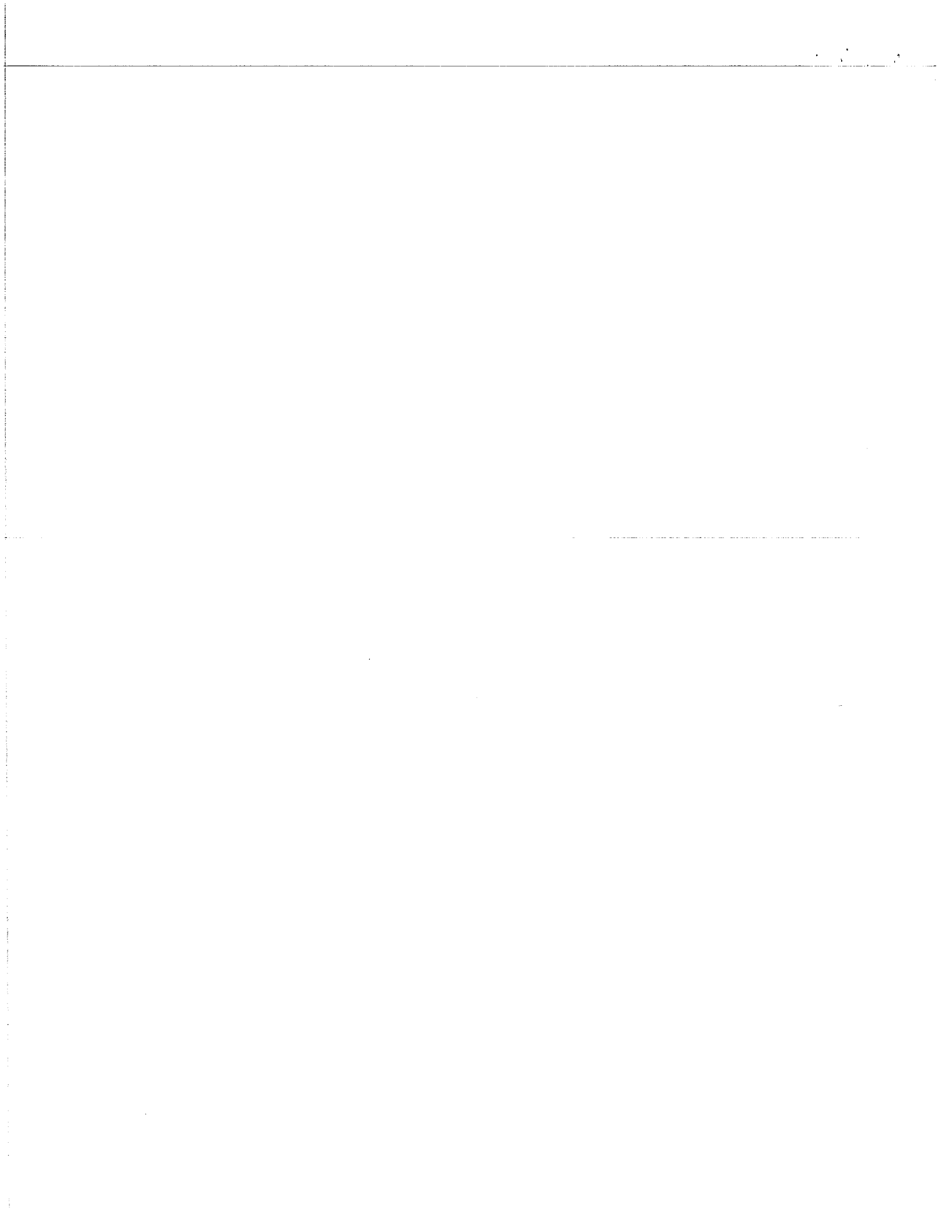
Business license name and number: A1Septic 2029

or

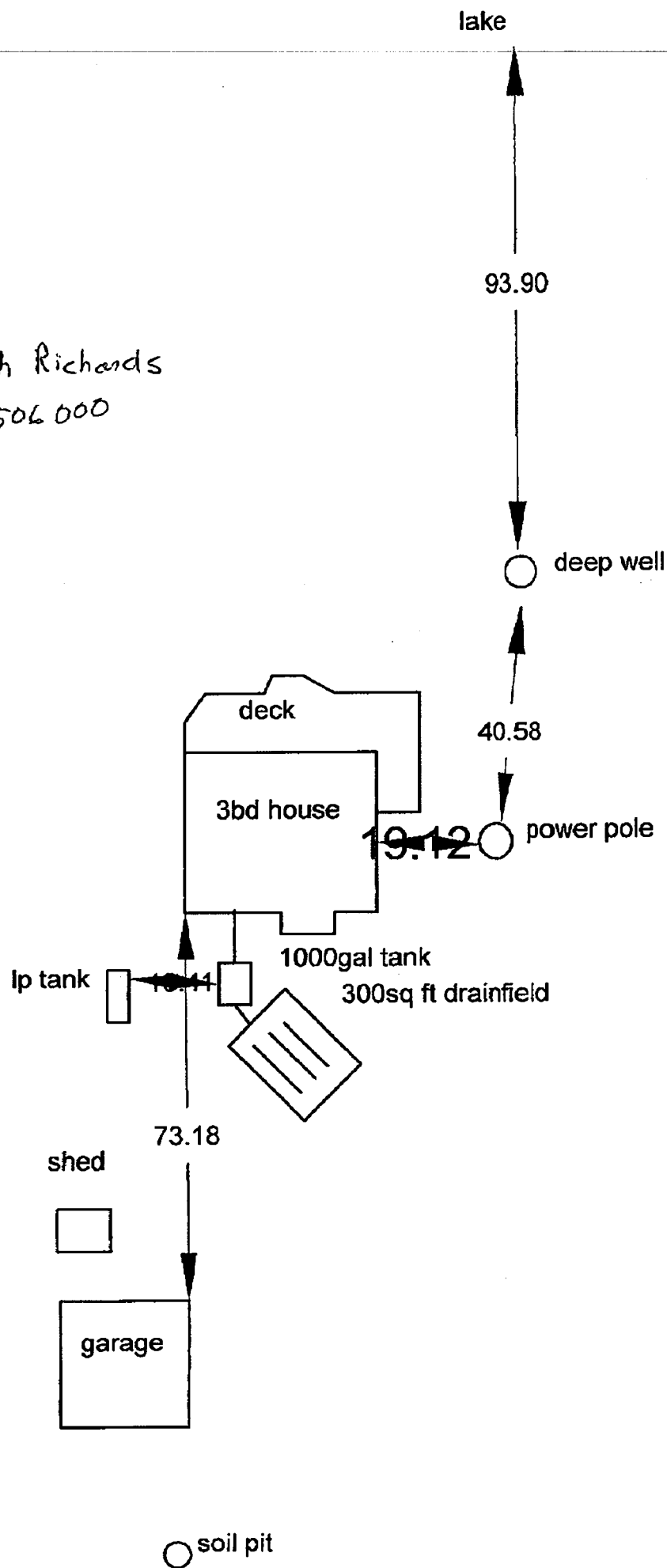
Name of local unit of government: _____

Signature: Patricia Stock

Date: 8-25-11



Joseph Richards
09 0506 000





UNIVERSITY OF MINNESOTA

Onsite Sewage Treatment Program Soil Boring Log



Client/ Address:

Legal Description/GPS:

Date:

Joseph Richards

37204 Fisherman's Wharf Rd, Wabasha MN, 56589

Soil Parent Material(s): T111

Outwash Lacustrine Alluvium Loess Organic Matter Bedrock

(circle all that apply)

Vegetation:

Soil Survey Map Unit(s):

Slope (%): 2%

Weather conditions/Time of Day: Sunny 12:30 pm

Elevation:

Depth (in)	Texture	Coarse Frag %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Saturated Soil Indicator(s) (see back)	Shape	Structure	Consistence
0-8	Loam		10YR 2/1		Concentrations Depletions Gleyed		Granular platy blocky prismatic single grain massive	Weak Moderate Strong Loose	Loose Friable Firm Extremely Firm Rigid
9-48	Sandy loam		10YR 5/3 Reddish brown		Concentrations Depletions Gleyed		Granular platy blocky prismatic single grain massive	Weak Moderate Strong Loose	Loose Friable Firm Extremely Firm Rigid
49-52	Sandy clay loam		5YR 4/3 Reddish brown		Concentrations Depletions Gleyed		Granular platy blocky prismatic single grain massive	Weak Moderate Strong Loose	Loose Friable Firm Extremely Firm Rigid
53-72	Clay loam		5YR 6/3 light reddish brown	5YR 6/1 green	Concentrations Depletions Gleyed		Granular platy blocky prismatic single grain massive	Weak Moderate Strong Loose	Loose Friable Firm Extremely Firm Rigid
					Concentrations Depletions Gleyed		Granular platy blocky prismatic single grain massive	Weak Moderate Strong Loose	Loose Friable Firm Extremely Firm Rigid

Comments/Certified Statement: I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.



CERTIFICATE OF COMPLIANCE
SEWAGE SYSTEM

This certificate has been issued this 27th day of JULY 1979

to certify compliance with regulations of Zoning Ordinance, Becker County, Minnesota.

The premises covered by this certificate are legally described as:

Lake No. 3 Sec. 3 Twp. 142 Range 39 Twp. Name MADIE GROVE
FISHERMANS WHARF LOT 8

Septic tank 1000 gls., 75 ft. from nearest well, 130 ft. from lake or stream, 12 ft. from occupied building, over 10ft. from property line, seepage bed (15 x 20 ft) 300 sq. ft., 90 ft. from nearest well, 150 ft. from lake or stream, 25 ft. from occupied building, over 10ft. from property line, 4 ft. from bottom to water table

Owner: Name DARVI HILL

Address HAMTON, MN 58240

Zip No.

Permit No. SP

Signed by:

Thygesen

Zoning Administrator
Becker County, Minnesota

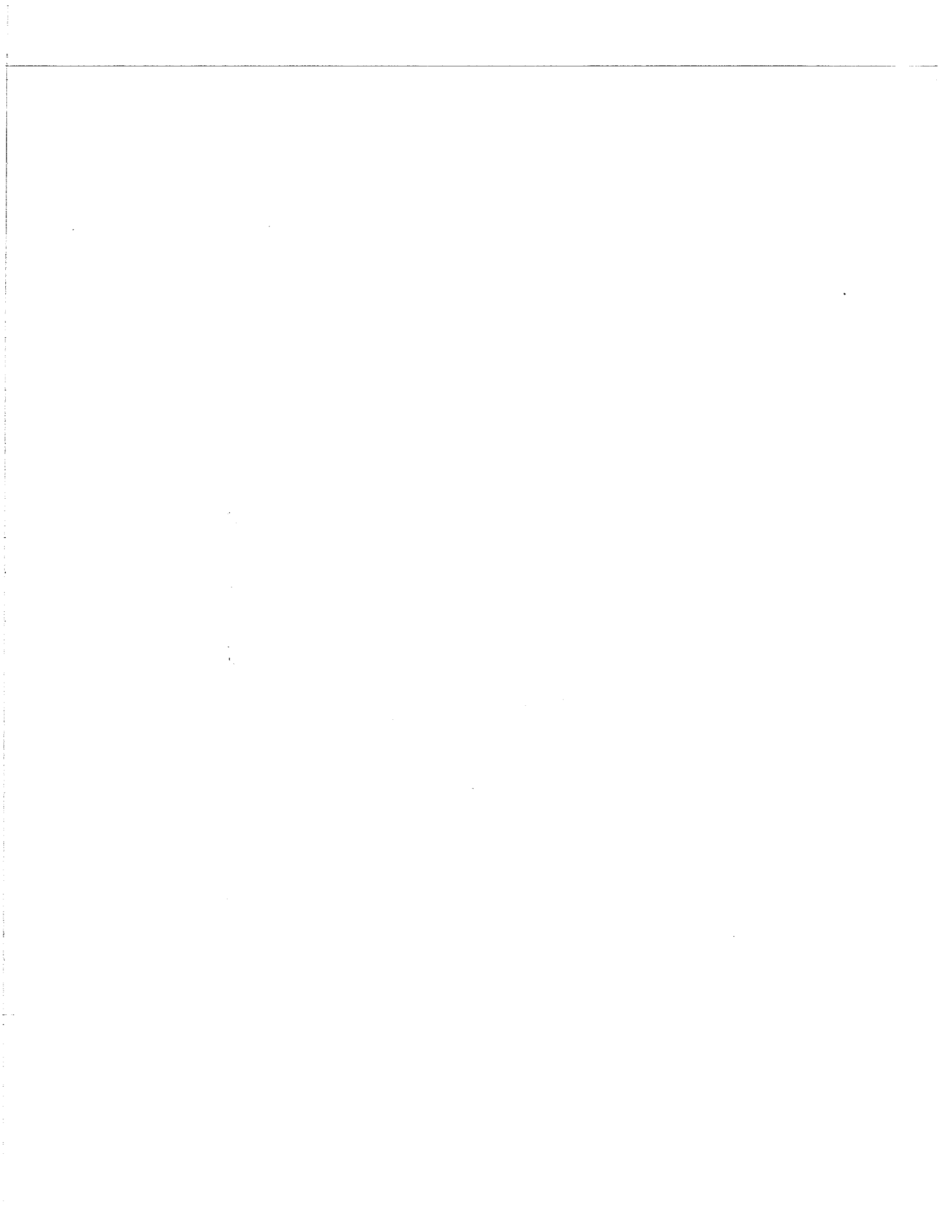


09.0506.000

FR. RICHARDS

THE SEWER SYSTEM WAS INSTALLED IN 1979. THERE IS A 1000 GALLON TANK AN A SEEPAGE BED THAT IS 300 SQUARE FEET. THE TANK IS 15 FEET FROM THE HOSUE AND THE HOUSE IS 100 FEET FROM THE LAKE.

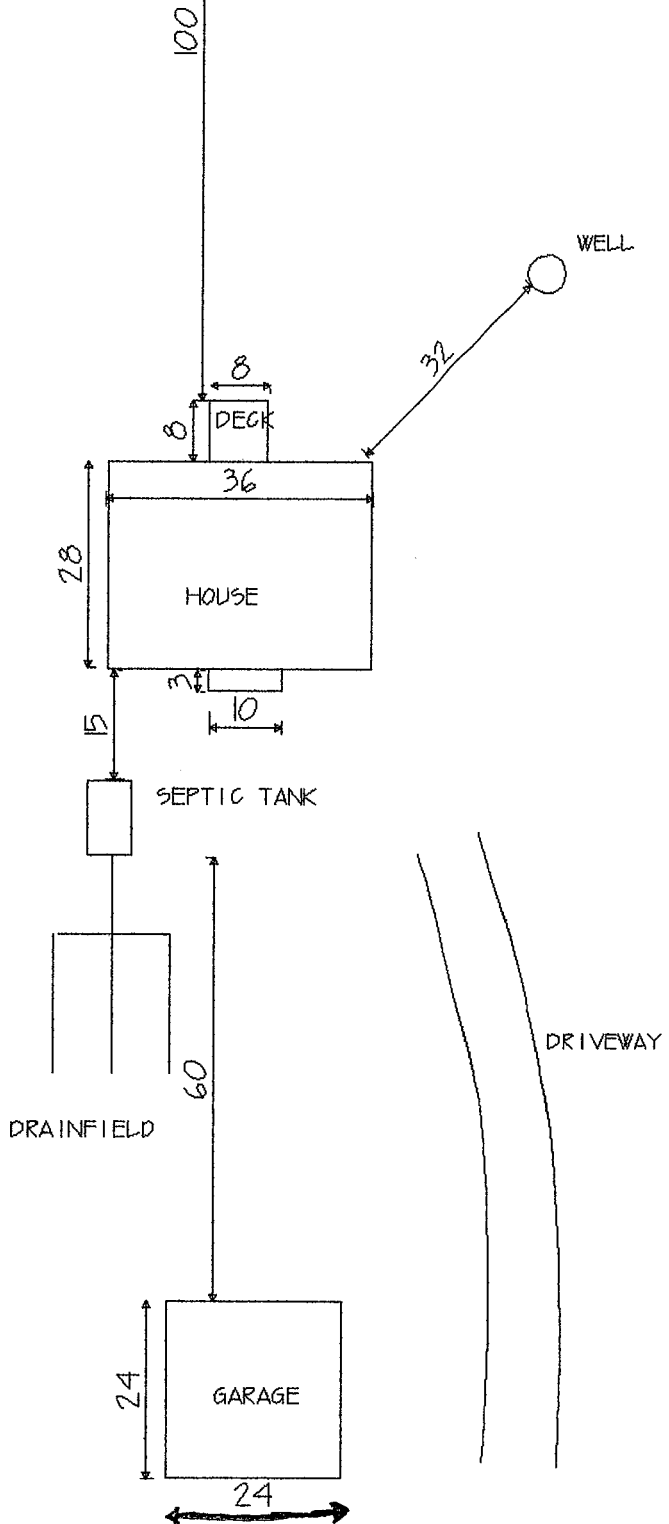
INSPECTED BY JASON FLATAU 5-25-95

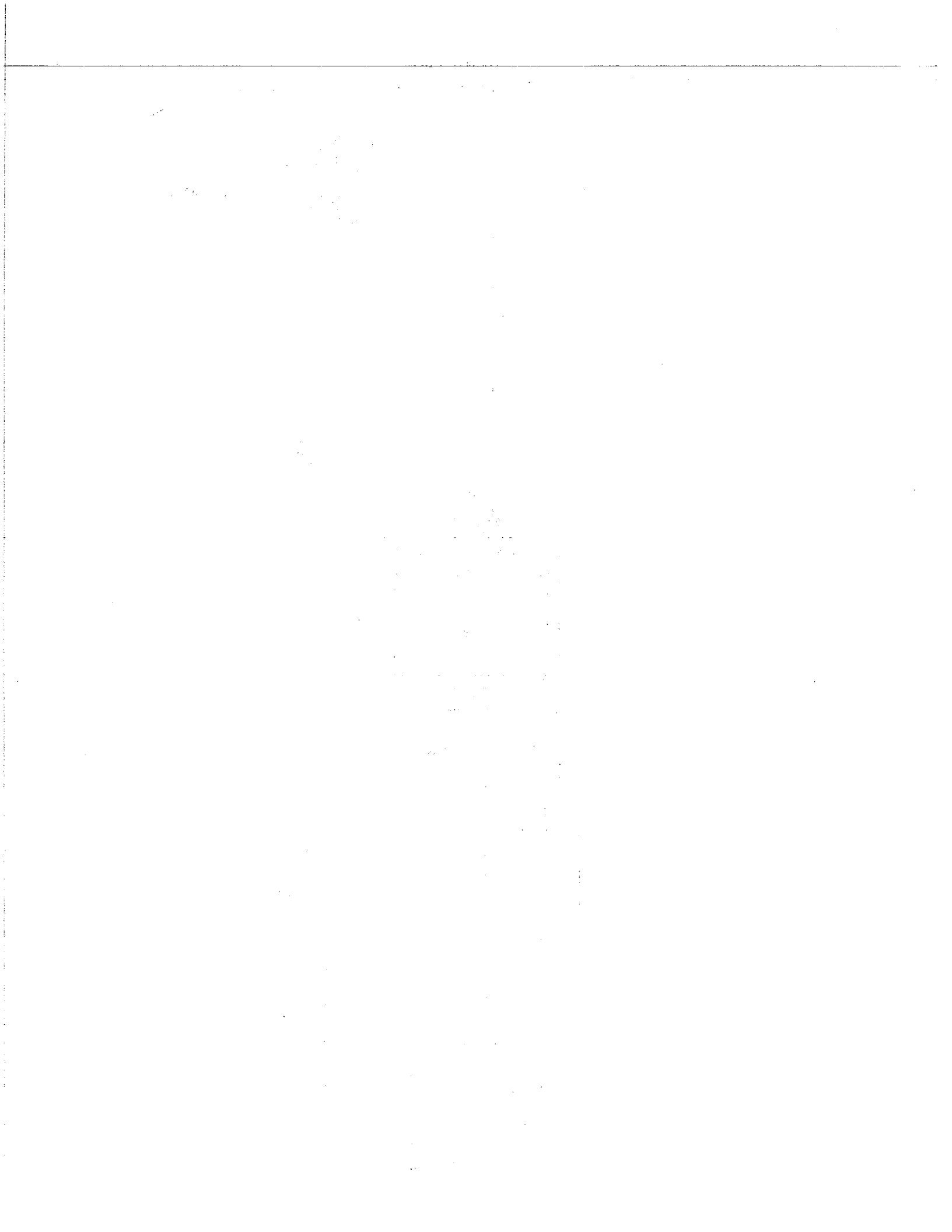


TULABY LAKE

09.0506.000
FR. RICHARDS
TULABY LAKE

INSPECTED BY JASON FLATAU
BECKER COUNTY
5-25-95





Permit No. 17-4104
 Date 7-8-77

3/10/82

LEGAL DESCRIPTION AND LOCATION: Fisherman's Wharf Lot 8
 44-3 Tulaby R.D. 3 142 39 Maple Grove(s)
 Lake No. Lake Name Lake Classif. Sec. TWP Range TWP Name

IDENTIFICATION: Please Print All Information
 Owner: Hill, Daryl Hutton, N.D. 58240
 Contractor Name: Self

TYPE OF IMPROVEMENT: New Building Alteration
 Other: Cabin
 RESIDENTIAL PROPOSED USE: One Family Dwelling Multiple Dwelling
 NON-RESIDENTIAL PROPOSED USE: Specify: 28x36ft. Size: 28x36ft.

ESTIMATED COST OF IMPROVEMENT \$ 25,000. Construction Starting Date:

PRINCIPAL TYPE OF FRAME: Wood Frame
 TYPE OF SEWAGE DISPOSAL: Individual Septic Tank, etc.
 WATER SUPPLY: Individual Well
 MECHANICAL EQUIPMENT: Elevator: Yes No
 Air Conditioning: Yes No
 DIMENSIONS: Basement: Yes No
 Stories above basement: 1
 Sq. feet (outside dimension): 28x36ft.
 Bedrooms: 3 Baths: 1
 HEATING: Electric Gas Oil
 Coal None
 Other: Fireplace
 Type of Roof: asphalt

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity	1000 Gls.	Sq. Ft.	375 Sq. Ft.
Distance from nearest well	over 50	Ft.	over 50
Distance from lake or stream	over 75	Ft.	over 75
Distance from occupied building	over 10	Ft.	over 10
Distance from property line	over 10	Ft.	over 10
Distance from bottom to Water Table	Ft.	Ft.	over 7

All distances are shortest distance between nearest points

CHARACTERISTICS: Lot Area is 100 x 446 feet. Water frontage is 100 feet.
 Building set back from high water mark is 115 feet. (Building Line) 100' (6)
 Land height above high water mark at building line is over 10 feet. Top over 45 from R.O.W.
 Building set back from State highway is over 10 feet and over 10 feet. Rear yard is over 10 feet.
 Side yard is over 10 feet and over 10 feet.
 Building will be located over 10 feet from septic tank (Sewage System Permit must be obtained before installation).
 Building will be located over 10 feet from soil absorption system (Cesspool, Drainfield, etc.).

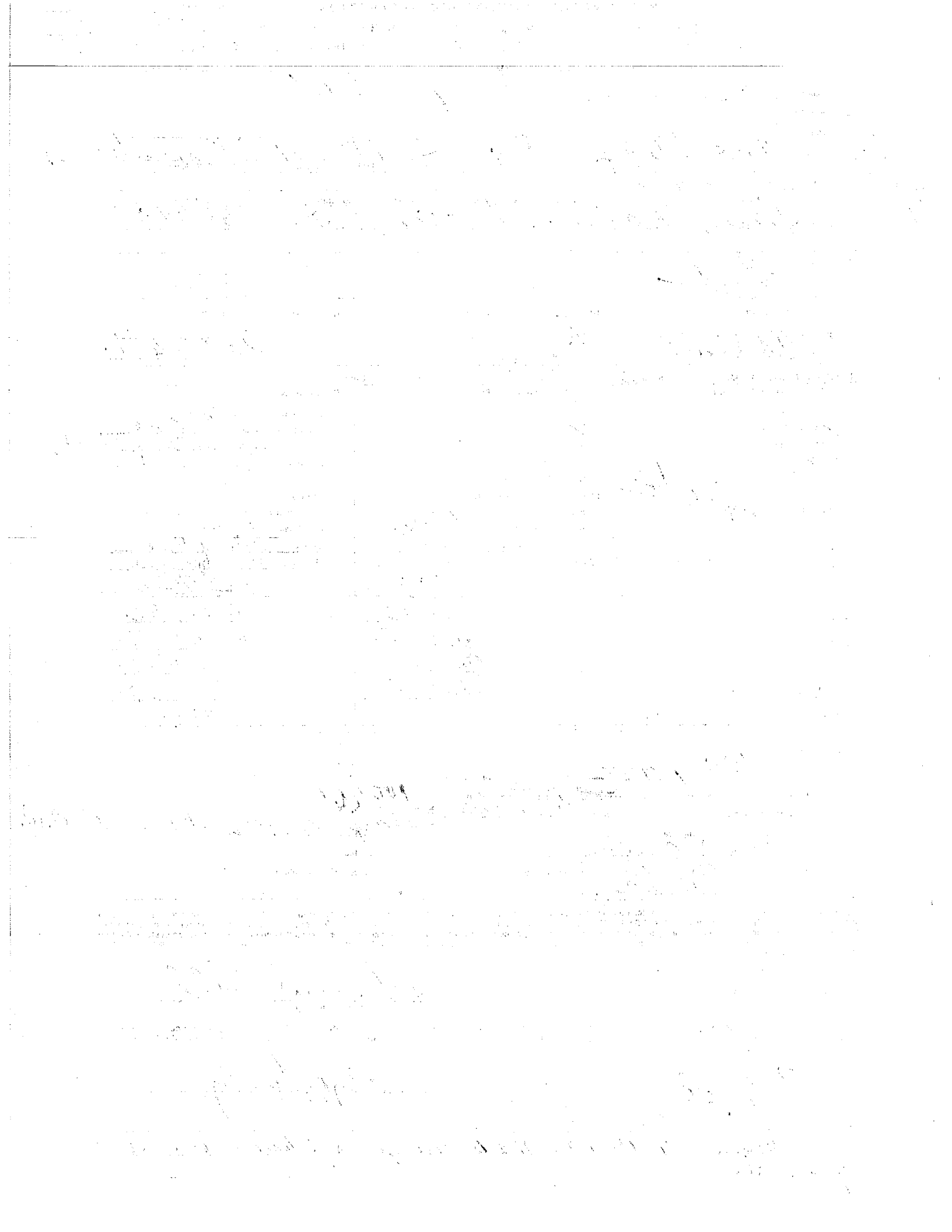
Agreement: I hereby certify that the information contained herein is correct and agree to do the proposed work in accordance with the description above set forth and according to the provisions of the ordinances of Becker County, Minnesota. I further agree that any plans and specifications submitted herewith shall become a part of this permit application. I also understand that this permit is valid for a period of six (6) months. Applicant further agrees that no part of the sewage system shall be covered until it has been inspected and accepted. It shall be the responsibility of the applicant for the permit to notify the County Zoning Administrator, 48 hours before the job is ready for inspection.

Dated 7-8-77 Signature of Owner: Daryl Hill

Permit: Permission is hereby granted to the above named applicant to perform the work described in the above statement. This permit is granted upon the express condition that the person to whom it is granted, and his agent, employees and workmen shall conform in all respects to the ordinances of Becker County, Minnesota. This permit may be revoked at any time upon violation of said ordinances.

Dated 7-8-77
 Permit Fee \$ 30.00 State Surcharge \$ 50
 Becker County Zoning Administrator: Floyd Sweeney

Comments: Checked 7-11-77 - Mark changed set backs since I found them



INSPECTOR'S CHECK LIST
Make all measurements and computations

	ACTUAL IS ↓	MINIMUM Shall Be ↓	Sq. Ft.
Building Set Back from High Water Mark			
Building Set Back from State Highway			
Side Yard	&	&	
Rear Yard			
Elevation at Building Line above High Water Mark			

205
100
200

SEWAGE DISPOSAL SYSTEM STATISTICS

15 x 20

CATEGORY	SEPTIC TANK		SEEPAGE PIT		DRAIN FIELD	
	Actual	Should be	Actual	Should be	Actual	Should be
Capacity	1000 Gls		300 SF			
Distance from Nearest Well	75 F		90 F	75 F		50 F
Distance from Lake or Stream	130 F		150 F			
Distance from Occupied Building	12 F	10 F	25 F	20 F		20 F
Distance from Property Line	10 F	10 F	10 F	10 F		10 F
Distance from Bottom to Water Table			4 F	4 F		4 F

Inspector's Comments: *Long pipe installed Sandy clay soil*

INTERPRETATION OF ABBREVIATIONS

- Gls — Gallons
- SF — Square Feet
- F — Linear Feet

Mark Kealey
 Inspector's Signature

Inspection Dated: *1-27-19-79*

Title _____
 Agency _____

LOCATION _____
 LOCATION _____
 Lake No. _____ Lake Name _____ Lake Classif. _____ Sec. _____ TWP. _____ Range _____ (W.P. Name) _____

IDENTIFICATION Please Print All Information

Owner	Last Name	First	Initial	Mailing Address — No., Street, City and State	Zip No.	Tel. No.
Contractor	Name	Address			City	State

TYPE OF IMPROVEMENT	RESIDENTIAL PROPOSED USE	NON-RESIDENTIAL PROPOSED USE
() New Building () Alteration Other _____	() None Family Dwelling () Multiple Dwelling _____ Units	Specify _____ Specify _____

ESTIMATED COST OF IMPROVEMENTS	Construction Starting Date:	
PRINCIPAL TYPE OF FRAME	TYPE OF SEWAGE DISPOSAL:	DIMENSIONS:
() Masonry () Wood Frame () Structural Steel () Other — Specify _____	() Public () Individual Septic Tank, etc. WATER SUPPLY: () Public () Individual Well MECHANICAL EQUIPMENT: Elevator () Yes () No Air Conditioning () Yes () No () Central () Unit	Basement () Yes () No Stories above basement _____ Sq. feet (outside dimension) _____ Bedrooms _____ Baths _____
Type of Roof:		HEATING: () Electric () Gas () Oil () Coal () None Other _____

SEWAGE DISPOSAL SYSTEM DATA	SEPTIC TANK	SEEPAGE PITS	DRAINFIELD
Capacity _____	Gls _____	Sq. Ft. _____	Sq. Ft. _____
Distance from nearest well _____	Ft. _____	Ft. _____	Ft. _____
Distance from lake or stream _____	Ft. _____	Ft. _____	Ft. _____
Distance from occupied building _____	Ft. _____	Ft. _____	Ft. _____
Distance from property line _____	Ft. _____	Ft. _____	Ft. _____
Distance from bottom to Water Table _____	Ft. _____	Ft. _____	Ft. _____

All distances are shortest distance between nearest points

CHARACTERISTICS:

Floor area is _____ square feet. Water frontage is _____ feet.
 Building setback from high water mark is _____ feet. (Building line)
 Land height above high water mark in building line is _____ feet.
 Building setback from State Highway is _____ feet. (from road or stream) _____ feet.
 Side yard is _____ feet. Rear yard is _____ feet.
 Building will be located _____ feet from septic tank (Sewage System Permit must be obtained before installation).
 Building will be located _____ feet from soil absorption system (Cesspool, Drainfield, etc).

Agreement: I hereby certify that the information contained herein is correct and agree to do the proposed work in accordance with the description above set forth and according to the provisions of the ordinances of Becker County, Minnesota. If I further agree that any plans and specifications submitted herewith shall become a part of this permit application. It is understood that this permit is valid for a period of six (6) months. Applicant further agrees that no part of the sewage system shall be covered until it has been inspected and accepted. It shall be the responsibility of the applicant for the permit to notify the County Zoning Administrator 24 hours before the job is ready for inspection.

Dated _____ Signature of Owner _____

Permit: Permission is hereby granted to the above named applicant to perform the work described in the above statement. This permit is granted upon the express condition that the person to whom it is granted and his agents, employees and workmen shall conform in all respects to the ordinances of Becker County, Minnesota. This permit may be revoked at any time upon violation of said ordinances.

Dated _____ Becker County Zoning Administrator _____

Permit Fee \$ _____ State Surcharge \$ _____

Comments _____

Grid equals _____ feet/inches.

GRID PLOT PLAN SKETCHING FORM

Application for Building Permit Dated _____ 19 _____

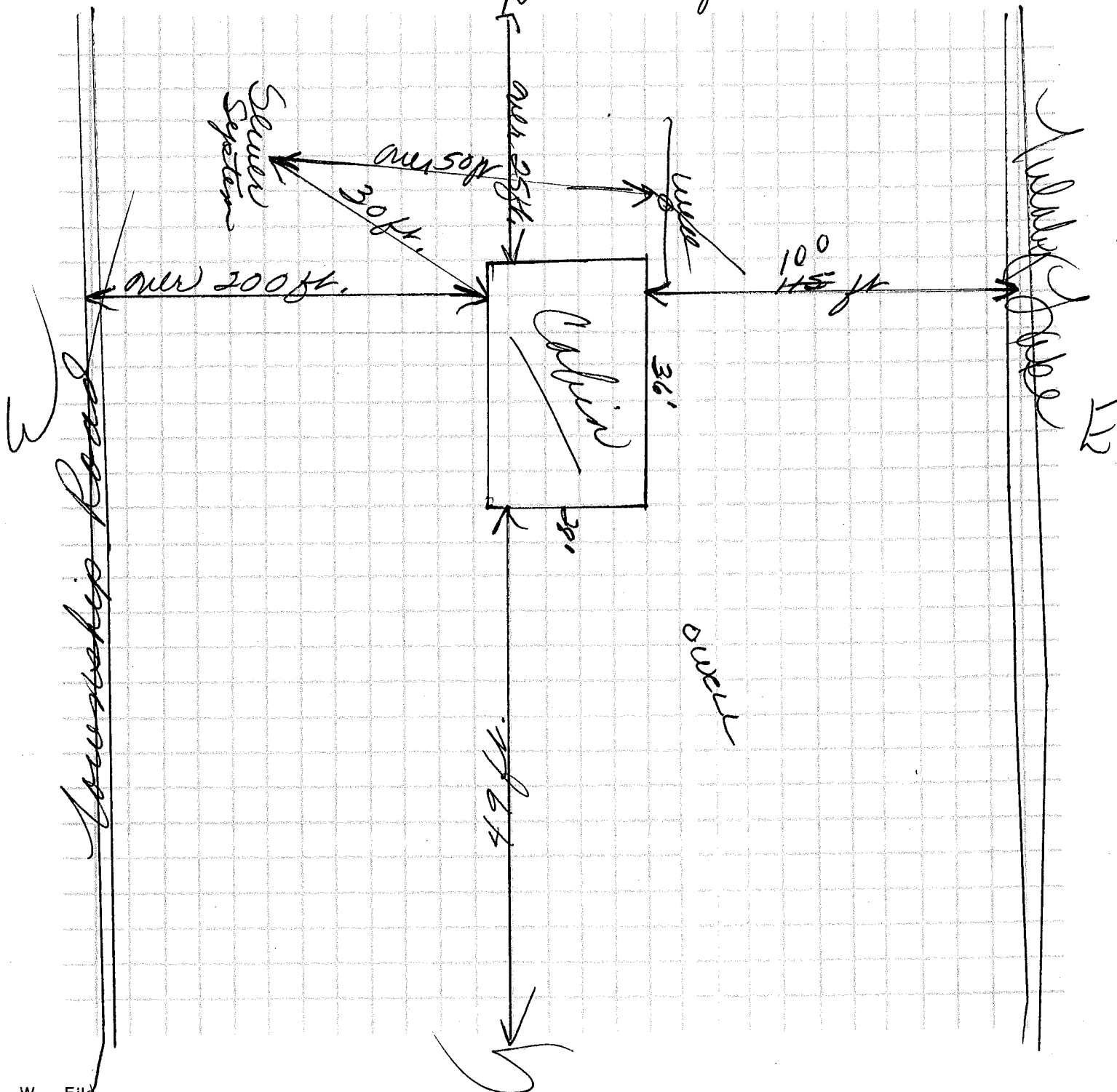
Application for Sewage System Permit Dated _____ 19 _____

Building Permit Number _____ Sewage System Permit Number _____

Applicant agrees that this plot plan is a part of application (s) indicated above.

Dated _____ 19 _____

Randy Hill
Signature



- W — File
- Y — Owner
- B — Building Inspector

INVESTIGATION REPORT

NAME: [Faint Name]

ADDRESS: [Faint Address]

CITY: [Faint City]

DATE: [Faint Date]

