



100032000

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

Compliance Inspection Form

RECEIVED

Existing Subsurface Sewage Treatment System (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): 10/2/2020

- Compliant - Certificate of Compliance**
- Noncompliant - Notice of Noncompliance**

(Valid for 3 years from report date, unless shorter time frame outlined by Local Ordinance.)

(See upgrade requirements on page 3)

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

RECEIVED
OCT - 2 2020
ZONING

Property Information

Parcel ID# or Sec/Twp/Range: 10.0032.000

Property address: 21017 County Hwy. 32 - Rochert, MN 56578

Reason for inspection: County Check

Property owner: Jon Sabo

Owner's phone: 218.790.2809

or

Owner's representative: _____

Representative's phone: _____

Local regulatory authority: Becker County

Regulatory authority phone: 218.846.7314

Brief system description: Gravity from house to 1000 Gallon Septic Tank and Gravity to 375 SF Drainfield from Septic

Comments or recommendations:

[Empty box for comments or recommendations]

Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of the 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: Michael Hough

Certification number: 2006

Business name: Hough, Inc of Detroit Lakes

License number: 770

Inspector signature: _____

Phone number: 218.849.2201

Necessary or Locally Required Attachments

- Soil Boring Logs
- System/As-Built Drawings
- Forms Per Local Ordinance
- Other Information (list): _____

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 that the system is an imminent threat to public health and safety.

Verification method(s)

- Searched for surface outlet
- Searched for seeping in yard/backup into 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)

Comments/Explanation:

2. Tank Integrity - Compliance component #2 of 5

Compliance Criteria:

System consists of 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 that the system is failing to protect groundwater.

Verification method(s)

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

Comments/Explanation:

Previous inspection information.

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 groundwater for other conditions as determined by the inspector Yes* No

***System is failing to protect groundwater**

Explain:

4. Soil Separation - Compliance component #4 of 5

Date of installation: 5/12/1980 Unknown
(mm/dd/yyyy)

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.

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.

- 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:

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

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

Indicate depths or elevations

A. Bottom of distribution media	30"
B. Periodically saturated soil/bedrock	>66"
C. System separation	>36"
D. Required compliance separation*	36"

"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.

*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 system operating under an Operating Permit? Yes No If "yes", A below is required.

Is the system required to employ 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: _____ Have the Operating Permit requirements been met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the required nitrogen BMP in place and properly functioning?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Any "no" answer above 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 groundwater, 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.



218-847-7391 • Fax 218-847-2380
houghinc.com

Cotton Lake

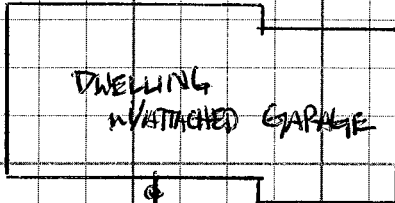
DATE: 02 OCT 2020

PROJECT: SABO, JON

PAGE 1 OF 1

POUT
HOLE

VEEF WELL

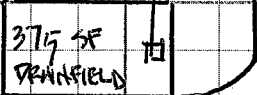


DWELLING
w/ ATTACHED GARAGE

⊕



1000 GAL
SEPTIC
TANK



375 SF
DRAINFIELD

⊕ SB

KEEP PROFILE TO RIGHT
MARGIN



8" TOP SOIL
TOP' LOAM

SAND TO
66"

SOIL BORING

CSAH 32



NORTH 1" = 30'

LEGAL DESCRIPTION AND LOCATION: Pt Lot 6 Beg 525 ft W and 98.09 ft N of SE Sec 20 with SE 1/4 Hwy. 80.14 ft N 202.99 ft NW 1/4 to 1/4 Beg and 2 211.92 ft to Beg 286 Cotton Rd 3 139 40 Erie

Lake No. Lake Name Lake Classif. Sec. TWP Range TWP Name

IDENTIFICATION: Please Print All Information

Owner	Last Name: <u>Sabo</u> First: <u>James P.</u> Initial: <u></u>	Mailing Address-- No. Street, City and State: <u>Box 164 Glyndon, Minn. 56547</u>	Zip No. <u>56547</u>	Tel. No. <u></u>
Contractor	Name: <u></u>			

TYPE OF IMPROVEMENT: <input checked="" type="checkbox"/> New Building <input type="checkbox"/> Alteration Other: <u>House</u>	RESIDENTIAL PROPOSED USE: <input checked="" type="checkbox"/> One Family Dwelling <input type="checkbox"/> Multiple Dwelling _____ Units	NON-RESIDENTIAL PROPOSED USE: Specify: _____ Size: _____
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ESTIMATED COST OF IMPROVEMENT \$ 31,000.00 Construction Starting Date: _____

PRINCIPAL TYPE OF FRAME: <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Other - Specify _____	TYPE OF SEWAGE DISPOSAL: <input type="checkbox"/> Public <input type="checkbox"/> Individual Septic Tank, etc. WATER SUPPLY: <input type="checkbox"/> Public <input type="checkbox"/> Individual Well MECHANICAL EQUIPMENT: Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Air Conditioning: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Central <input type="checkbox"/> Unit	DIMENSIONS: Basement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Stories above basement: <u>one</u> Sq. feet (outside dimension) <u>28x44 ft.</u> Bedrooms <u>3</u> Baths <u>1</u> HEATING: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Coal <input type="checkbox"/> None Other: <u>Gas</u>
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SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE	DRAIN FIELD
Capacity	<u>1000</u> Gls.	<u>375</u> Sq. Ft.	Sq. Ft.
Distance from nearest well	<u>over 50</u> Ft.	<u>over 50</u> Ft.	Ft.
Distance from lake or stream	<u>over 75</u> Ft.	<u>over 75</u> Ft.	Ft.
Distance from occupied building	<u>over 10</u> Ft.	<u>over 10</u> Ft.	Ft.
Distance from property line	<u>over 10</u> Ft.	<u>over 10</u> Ft.	Ft.
Distance from bottom to Water Table	Ft.	<u>over 4</u> Ft.	Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS:

Lot Area is 80x211.92 square feet. Water frontage is 80 feet.

Building set back from high water mark is 80 feet. (Building Line)

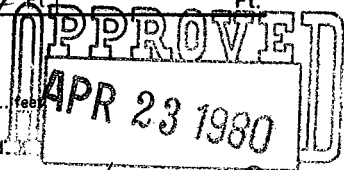
Land height above high water mark at building line is 10 feet.

Building set back from State highway is _____ feet - from road or street is 65 feet. from R.O.W.

Side yard is 10 ft and 120 feet. Rear yard is 100 feet.

Building will be located 35 feet from septic tank (Sewage System Permit must be obtained before installation).

Building will be located 155 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.

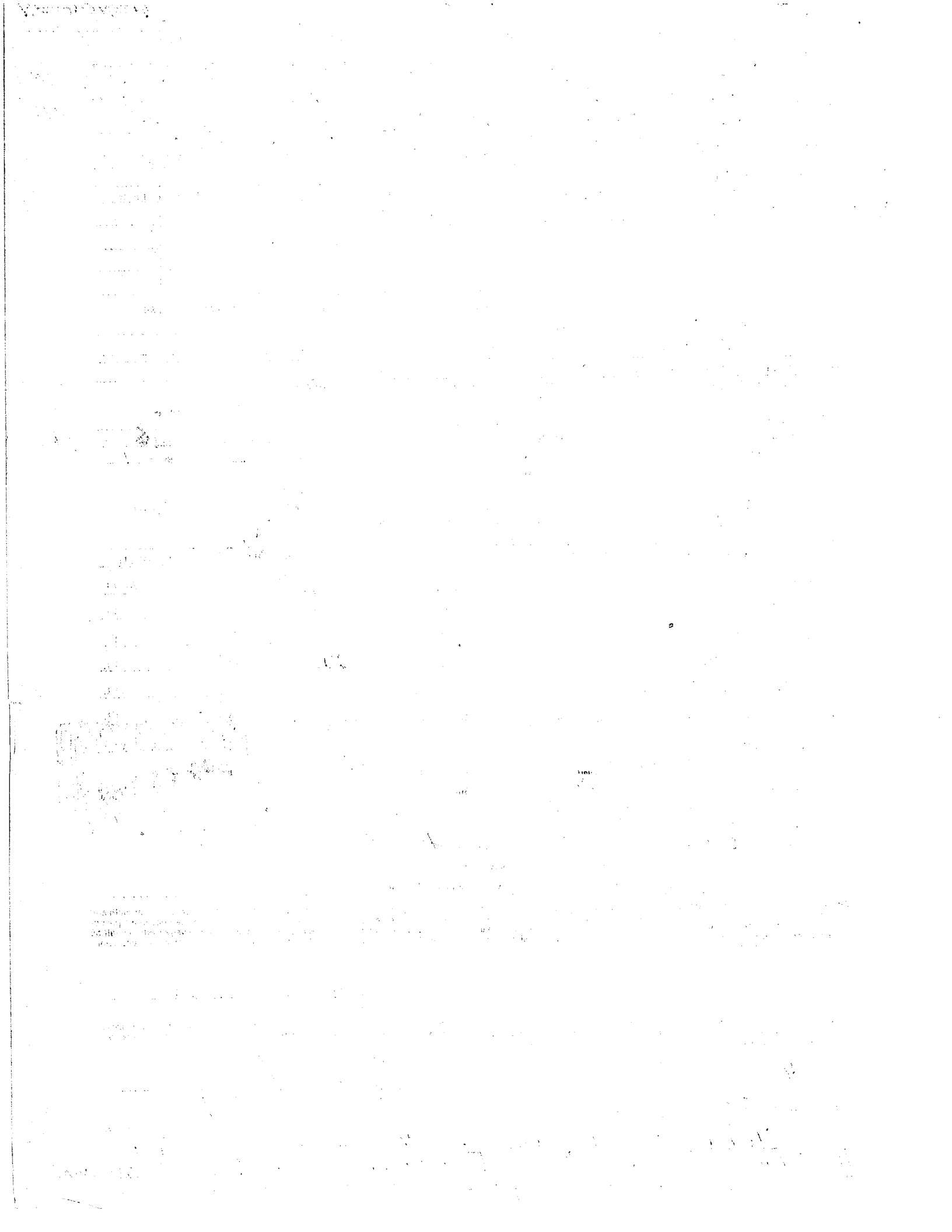
Dated _____ Signature of Owner: James Sabo

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 4-22-80 Signature of Zoning Administrator: Floyd Sweeney
 Permit Fee \$ 36.00 State Surcharge \$.50

Comments: Checked 5-25-79. I was here at 10:58 AM - waited till 11:55 AM. Not one showed up - I went to home to eat. Mark checked again after lunch, had a sewer system rep there too. was there this time. well.

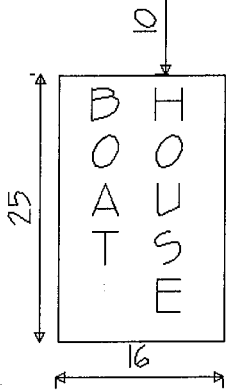
4973



10.0032.000
JON SABO

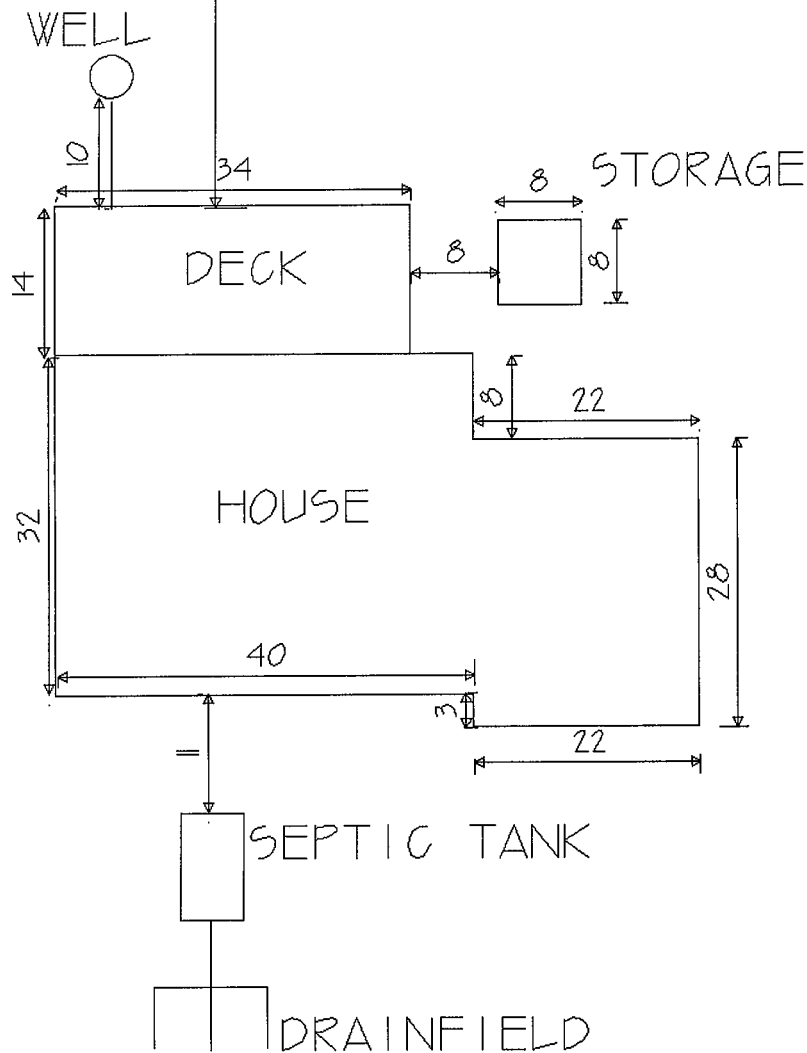
LOCATED ON COTTON LAKE ALONG HIGHWAY #32. THE SEWER SYSTEM
WAS INSTALLED IN 1980. THE SEPTIC TANK HAS A CAPACITY OF
1000 GALLONS AND THE DRAINFIELD IS 375 SQUARE FEET. THE
SEPTIC TANK IS 11 FEET FROM THE HOUSE AND THE HOUSE IS 75
FEET FROM THE LAKE. THIS IS A CONFORMING SYSTEM.
CHECKED 7-21-94
JASON FLATAU

COTTON LAKE



10.0032.000
JON SABO
COTTON LAKE
ERIE TOWNSHIP

JASON FLATAU, INSPECTOR
BECKER COUNTY
7-21-94



APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

LEGAL DESCRIPTION AND LOCATION
 (Lake No., Lake Name, Lot No., Sec., TWP., Range, Township Name)

IDENTIFICATION: Please Print All Information
 Owner: Last Name Sabo, First S, Initial S, Mailing Address No. Street, City and State, Zip No., Tel. No.
 Contractor: Name

TYPE OF IMPROVEMENT: () New Building, () Alteration, Other
 RESIDENTIAL PROPOSED USE: () One Family Dwelling, () Multiple Dwelling Units
 NON-RESIDENTIAL PROPOSED USE: Specify, Size

ESTIMATED COST OF IMPROVEMENT'S
 PRINCIPAL TYPE OF FRAME: () Masonry, () Wood Frame, () Structural Steel, () Other - Specify
 TYPE OF SEWAGE DISPOSAL: () Public, () Individual Septic Tank, etc., () Public, () Individual Well
 MECHANICAL EQUIPMENT: Elevator () Yes () No, Air Conditioning () Yes () No, () Central () Unit
 DIMENSIONS: Basement () Yes () No, Stories above basement, Sq. feet (outside mansion), Bedrooms, Baths
 HEATING: () Electric () Gas () Oil, () Coal () None, Other

SEWAGE DISPOSAL SYSTEM DATA	SEPTIC TANK	SEWERAGE PIT	DRAIN FIELD
Capacity	1000 Gals.	375 Sq. Ft.	Sq. Ft.
Distance from nearest well	450 Ft.	150 Ft.	Ft.
Distance from lake or stream	795 Ft.	775 Ft.	Ft.
Distance from occupied building	710 Ft.	710 Ft.	Ft.
Distance from property line	710 Ft.	710 Ft.	Ft.
Distance from bottom to water table	Ft.	4 Ft.	

All distances are shortest distance between nearest points

CHARACTERISTICS:
 Lot Area 80x511.92 square feet, Water frontage 80 feet
 Building set back from high water mark 80 feet (Building line)
 Land height above high water mark at building line 10 feet
 Building set back from State highway 110 feet - from road or crests 110 feet
 Side yard 110 feet, and 110 feet (Rear yards) 110 feet
 Building will be located 110 feet from septic tank (Sewage System Permit must be obtained before installation)
 Building will be located 110 feet from soil absorption system (Gas pool, Drain field, 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 4/23/80 Signature of Owner [Signature]

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 4/23/80 Becker County Zoning Administrator [Signature]

Permit Fee \$ 26 State Surcharge \$ 50

Comments: Worked to code 119. I was handed plans and a permit was issued. Work was done and a permit was issued. Work was done and a permit was issued.

INSPECTOR'S CHECK LIST

Make all measurements and computations

	ACTUAL IS ↓	Ft.	MINIMUM Shall Be ↓	Ft.
Building Set Back from High Water Mark		Ft.		Ft.
Building Set Back from State Highway		Ft.		Ft.
Side Yard	8	Ft.	8	Ft.
Rear Yard		Ft.		Ft.
Elevation at Building Line above High Water Mark		Ft.		Ft.

40
~~35~~
~~12~~
~~10~~
~~35~~
~~10~~

36
~~12~~
~~36~~
~~43~~

SEWAGE DISPOSAL SYSTEM STATISTICS

Bed

CATEGORY	SEPTIC TANK		SEEPAGE RATE		DRAIN FIELD	
	Actual	Should be	Actual	Should be	Actual	Should be
Capacity	1000	Gls.	437	SF		SF
Distance from Nearest Well	75	F	95	F	75	F
Distance from Lake or Stream	150	F	155	F		F
Distance from Occupied Building	12	F	25	F	20	F
Distance from Property Line	30	F	10	F	10	F
Distance from Bottom to Water Table	-	F	4	F	4	F

Inspector's Comments: *15 yds rock Joe Stinger Installs Clay Sandy Sub Soil*

INTERPRETATION OF ABBREVIATIONS

- Gls. = Gallons
- SF = Square Feet
- F = Linear Feet

Mark Kuelms

Inspector's Signature

Inspection Dated *5-12* 19*83*

Title
 Agency