



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

Compliance inspection report form

Existing Subsurface Sewage Treatment System (SSTS)

Doc Type: Compliance and Enforcement

Instructions: Inspector must submit completed form to Local Governmental Unit (LGU) and system owner within 15 days of final determination of compliance or noncompliance. Instructions for filling out this form are located on the Minnesota Pollution Control Agency (MPCA) website at <https://www.pca.state.mn.us/sites/default/files/wq-wwists4-31a.pdf>.

Property information

Local tracking number:

Parcel ID# or Sec/Twp/Range: 100729508/100729573 Reason for Inspection: Selling property
Local regulatory authority info: Becker County
Property address: 21967 Co Hwy 32 Rockport MN 56578
Owner/representative: Keith Anderson Owner's phone: _____
Brief system description: 1500 comp tank, 600 lift station - mound constructed

System status

System status on date (mm/dd/yyyy): 8/26-2025

☒ Compliant – Certificate of compliance*

☐ Noncompliant – Notice of noncompliance

(Valid for 3 years from report date unless evidence of an imminent threat to public health or safety requiring removal and abatement under section 145A.04, subdivision 8 is discovered or a shorter time frame exists in Local Ordinance.)

Systems failing to protect ground water must be upgraded, replaced, or use discontinued within the time required by local ordinance.

*Note: Compliance indicates conformance with Minn. R. 7080.1500 as of system status date above and does not guarantee future performance.

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 or under section 145A.04 subdivision 8.

Reason(s) for noncompliance (check all applicable)

- ☐ Impact on public health (Compliance component #1) – Imminent threat to public health and safety
- ☐ Tank integrity (Compliance component #2) – Failing to protect groundwater
- ☐ Other Compliance Conditions (Compliance component #3) – Imminent threat to public health and safety
- ☐ Other Compliance Conditions (Compliance component #3) – Failing to protect groundwater
- ☐ System not abandoned according to Minn. R. 7080.2500 (Compliance component #3) – Failing to protect groundwater
- ☐ Soil separation (Compliance component #5) – Failing to protect groundwater
- ☐ Operating permit/monitoring plan requirements (Compliance component #4) – Noncompliant - local ordinance applies

Comments or recommendations

Filter in tank should be
cleaned bi-yearly

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.

By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Business name: Bergstrom Tank Inc Certification number: 2779
Inspector signature: Paul Bergstrom License number: 478
(This document has been electronically signed) Phone: 841-9002

Necessary or locally required supporting documentation (must be attached)

- ☒ Soil observation logs
- ☒ System/As-Built
- ☒ Locally required forms
- ☒ Tank Integrity Assessment
- ☐ Operating Permit
- ☐ Other information (list):

Property Address: 21967 rd 32
Business Name: Bergstrom Ranch Date: 8-26-2020

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.

Describe verification methods and results:

Visual

Attached supporting documentation:

☐ Other: _____
☐ Not applicable

2. Tank integrity – Compliance component #2 of 5

Compliance criteria:

System consists of a seepage pit, cesspool, drywell, leaching pit, or other pit?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
If yes, which sewage tank(s) leaks:	

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

Describe verification methods and results:

Camera in Empty tank

Attached supporting documentation:

☒ Empty tank(s) viewed by inspector

Name of maintenance business: Stagers Pumping

License number of maintenance business: _____

Date of maintenance: 8/26/2020

☐ Existing tank integrity assessment (Attach)

Date of maintenance (mm/dd/yyyy): _____ (must be within three years)

(See form instructions to ensure assessment complies with Minn. R. 7082.0700 subp. 4 B (1))

☐ Tank is Noncompliant (pumping not necessary – explain below)

☐ Other: _____

Property Address: 21967 co rd 32
Business Name: Bergstrom Backhoe

Date: 8/26-2025

3. Other compliance conditions – Compliance component #3 of 5

3a. Maintenance hole covers appear to be structurally unsound (damaged, cracked, etc.), or unsecured?

☐ Yes* ☒ No ☐ Unknown

3b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety? ☐ Yes* ☒ No ☐ Unknown

***Yes to 3a or 3b - System is an imminent threat to public health and safety.**

3c. System is non-protective of ground water for other conditions as determined by inspector?

☐ Yes* ☒ No

3d. System not abandoned in accordance with Minn. R. 7080.2500?

☐ Yes* ☒ No

***Yes to 3c or 3d - System is failing to protect groundwater.**

Describe verification methods and results:

Visual

Attached supporting documentation: ☐ Not applicable ☐

4. Operating permit and nitrogen BMP* – Compliance component #4 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 specified in the system design? ☐ 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. Have the operating permit requirements been met?

☐ Yes ☐ No

b. Is the required nitrogen BMP in place and properly functioning?

☐ Yes ☐ No

Any "no" answer indicates noncompliance.

Describe verification methods and results:

Attached supporting documentation: ☐ Operating permit (Attach) ☐

Property Address: 21967 Co rd 52

Business Name: Beggs Farm Backhoe

Date: 8-26-83

5. Soil separation – Compliance component #5 of 5

Date of installation 2013 ☐ Unknown
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging? ☐ Yes ☒ No

Compliance criteria (select one):

5a. 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.

5b. 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.*

5c. "Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules 7080. 2350 or 7080.2400 (Intermediate Inspector License required ≤ 2,500 gallons per day; Advanced Inspector License required > 2,500 gallons per day) ☐ Yes ☐ No*

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

Attached supporting documentation:

- ☐ Soil observation logs completed for the report
☒ Two previous verifications of required vertical separation
☐ Not applicable (No soil treatment area)
☐ _____

Indicate depths or elevations

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

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

*See attached
Soil Forms*

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

Describe verification methods and results:

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.

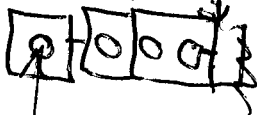
Co Hon Water

Lequell

100' +

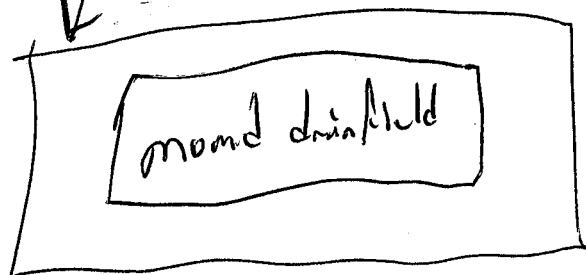
60' +

23'



Co rd 32

150'



APP	SEPTIC
YEAR	

***** FOR OFFICE USE ONLY *****

Application Approved by: Heidi M. Miller Date: 8-20-13
 Amount Paid 1500 Receipt Number 129545 Permit Number _____
 NOTES: 542037

INSPECTION REPORT

Home Information

Does the structure contain any of the following elements?

Garbage disposer ☒ Yes ☐ No Dishwasher ☐ Yes ☐ No
 Grinder pump ☐ Yes ☐ No Lift pump in basement ☐ Yes ☐ No
 Effluent screen installed? ☐ Yes ☐ No Effluent screen manufacturer _____
 Alarm required? ☒ Yes ☐ No Alarm Type None Alarm manufacturer _____
 Lift pump in system? ☒ Yes ☐ No Pump manufacturer _____
 Number of bedrooms _____

Component Information

Tank size 1500 + 600 l.f.t. Tank manufacturer Brown
 Drainfield size 380 s.f.t.
 Drainfield medium _____ Medium manufacturer 10'x38' mound
 Drainfield medium size/depth _____

Soil Verification

Vertical separation verified for Boring #1 on _____ Depth +36"
 Vertical separation verified for Boring #2 on _____ Depth _____
 Vertical separation verified for Boring #3 on _____ Depth _____

Setback Verification

	TANK	DRAINFIELD
Distance to Well	<u>+50</u>	<u>+50</u>
Distance to Building	<u>+10</u>	<u>+20</u>
Distance to Property Line	<u>+10</u>	<u>+10</u>
Distance to OHW of Lake	<u>+15</u>	<u>+15</u>
Distance to Pressure Line	<u>-</u>	<u>-</u>
Distance to Wetland/Protected Water	<u>-</u>	<u>-</u>

Date System Installed 9/3/13 Installer Tim Stenger Exc. Inspector Linda Stoll

CERTIFICATE OF COMPLIANCE

1) Certificate Is Hereby Denied
 2) Certificate is Hereby Granted Based upon the Application, addendum from, plans, specifications and all other supporting data.
 In property maintenance, this system can be expected to function satisfactory, however, this is not a guarantee.

Linda Stoll Isis Inspector 9/3/13
 Signature Title Date
 (Certificate of Compliance is not valid unless signed by a Registered Qualified Employee)

Total Number of tanks to be installed in this system _____
(This # will be reported to MPCA at end of year.)

PARCE L	
APP	SEPTIC
YEAR	

Type of Drainfield	Full Size of Drainfield	Reduced/Warrantied size
Chamber Trench	sq ft	sq ft
Rock Trench	sq ft	sq ft
Gravelless	sq ft	sq ft
<input checked="" type="checkbox"/> Mound	sq ft ***	
Pressure Bed	sq ft ***	
Seepage Bed	sq ft ***	
At-grade	sq ft ***	
Alternative / Performance	sq ft ***	*** Attach Worksheets

Type of chamber _____
Depth of Rock _____

Alarm? Yes ☒ No _____
Type of Alarm Elec
Size of Lift Pump _____
Size of Lift Line _____

SETBACKS

	TANK	DRAINFIELD
Distance to Well	_____	_____
Distance to Building	_____	_____
Distance to Property Line	_____	_____
Distance to OHW of Lake	_____	_____
Distance to Pressure Line	_____	_____
Distance to Wetland/Protected Water	_____	_____

Perc Rate 23 Soil Sizing Factor 1.67 *If SSF other than .83, attach Perc Test Data

Soil Borings (three are required)

Depth	Texture	Color	Structure		Depth	Texture	Color	Structure
0-6	10AM	10YR 2/2	Blocky		0-6	10AM	10YR 2/2	Blocky
6-25	10AM	10YR 4/4	"		6-29	10AM	10YR 4/4	"
25-40	10AM	2.5Y 5/4	"		29-36	10AM	2.5Y 5/4	"
mo Hcs 35"					mo Hcs 36"			

Depth	Texture	Color	Structure		Depth	Texture	Color	Structure
0-6	10AM	10YR 2/2	Blocky					
6-26	10AM	10YR 4/4	"					
26-34	10AM	2.5Y 5/4	"					
mo Hcs 32"								

5. REQUIRED DOCUMENTS

U of MN worksheets are required for mounds, pressure beds, seepage beds, at-grades or Type IV or Type V systems. Are the required worksheets attached? ☒ Yes _____ No

6. DESIGNER'S CERTIFIED STATEMENT

I, Randy Anderson certify that I have completed the preceding design work in accordance with all applicable requirements (including, but not limited to Minnesota Chapter 7080 and the Becker County Individual Sewage Treatment System Ordinance).

Signature of Designer [Signature]

Date 8/13/13