



130095003-2025



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: 130095003 Reason for Inspection: Selling property
Local regulatory authority info: Baker County
Property address: 56800 194th St Park Rapids, MN 56470
Owner/representative: Debra Frenness Owner's phone: 218-564-4792
Brief system description: 1500 corp, 1000 gal IBA - rock drainfield

System status

System status on date (mm/dd/yyyy): 6-6-2025

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.

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.

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

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

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 Truck Inc Certification number: 2779
Inspector signature: [Signature] 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: 56900 19446 St
 Business Name: Beystrom Backhoe Date: _____

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

Attached supporting documentation:
 Other: _____
 Not applicable

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

Describe verification methods and results:

Visual

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:	

Attached supporting documentation:
 Empty tank(s) viewed by inspector
 Name of maintenance business: Beystrom Backhoe
 License number of maintenance business: 478
 Date of maintenance: 6-6-2025
 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: _____

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

Describe verification methods and results:

Camera in tank

Property Address: 56800 194th St
Business Name: Bergstrom Backhoe Date: _____

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: 56800 194th St
 Business Name: Bergs Farm Backhoe Date: _____

5. Soil separation – Compliance component #5 of 5

Date of installation 2009 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*	

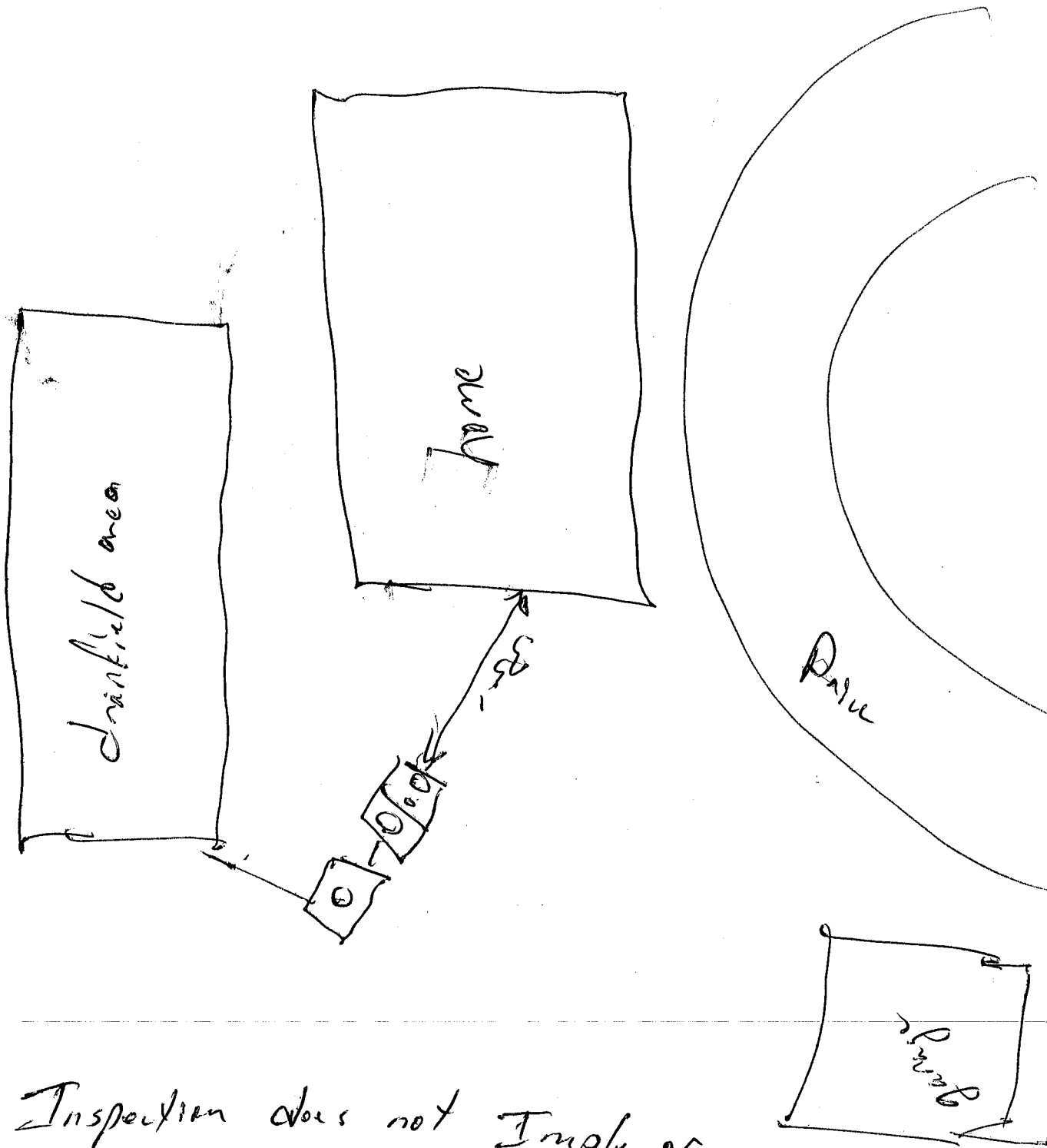
*May be reduced up to 15 percent if allowed by Local Ordinance.

See attached

***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.



Inspection does not imply or
 guarantee future hydraulic functioning only
 what was found on date of inspection

PARCEL	130095003
APP	SEPTIC
YEAR	2009

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

Application Approved by: Debi Mottza Date: 8-17-09
 Amount Paid _____ Receipt Number _____ Permit Number _____

NOTES: _____
 _____ 203973-428099 8/17/09 _____

 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 STML Alarm manufacturer _____
 Lift pump in system? Yes No Pump manufacturer _____
 Number of bedrooms _____

Component Information

Tank size 1500 a/c & 1000 L-7 Tank manufacturer Thelen
 Drainfield size 760 sqft. Medium manufacturer 20 x 38 Rock B od
 Drainfield medium _____
 Drainfield medium size/depth _____

Soil Verification

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

Good soils
Good separation

Setback Verification

	TANK	DRAINFIELD
Distance to Well	<u>750'</u>	<u>750'</u>
Distance to Building	<u>710'</u>	<u>720'</u>
Distance to Property Line	<u>710'</u>	<u>710'</u>
Distance to OHW of Lake	<u>7100'</u>	<u>7100'</u>
Distance to Pressure Line	<u>-</u>	<u>-</u>
Distance to Wetland/Protected Water	<u>-</u>	<u>-</u>

Date System Installed 8/20/09 Installer Hacker Inspector Janet Stoll

 CERTIFICATE OF COMPLIANCE

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

Signature Janet Stoll Title FSTS Inspector Date 8/20/09

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

Size of All Tanks to Be installed
___ gal Septic Tank
___ gal Lift Station
___ gal Holding Tank
___ gal Other Tanks

EXISTING 1500

Type of Drainfield Medium to be used
___ Chamber
___ H10 EQ36
 Drainfield Rock
___ 12" Rock Depth
___ Gravelless
___ Experimental
___ No Drainfield

Type of Alarm _____
Size of Lift Pump _____
Size of Lift Line _____

130095003 se/09

Type of Drainfield to be installed
 Trench
___ At-grade
___ Pressure Bed
___ Seepage Bed
___ Mound
Size of Drainfield sq ft to be installed
609 sq ft
___ sq ft
___ sq ft
___ sq ft
___ sq ft

EXISTING 1500
SETBACKS
TANK DRAINFIELD
Distance to Well +50' +100'
Distance to Building +50' +20'
Distance to Property Line +10' 10'
Distance to OHW +300' +150'
Distance to Pressure Line +50' +50'

Perc Rate _____ Soil Sizing Factor 1.27 *If SSF other than .83, attach Perc Test Data

BORINGS 3+4

BORINGS 1+2

Depth	Texture	Color	Structure	Depth	Texture	Color	Structure
0"-24"	SANDY LOAM		5/4 10K	0-24	SANDY LOAM	5/4	10K
24-48"	SAND		5/6	24-48	SAND	5/6	
48-72"	SAND		4/4	48-72	"	4/4	
72"-78"	SAND		7/4	72-78"	"	7/4	

Faint mottles at 78" but dry

Faint mottles at 78" but dry

5. DESIGNER'S CERTIFIED STATEMENT

I, DAVID E HACKER 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).

David E. Hacker
Signature of Designer

8-14-09
Date

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

Application Approved by: _____ Date: _____
Amount Paid _____ Receipt Number _____ Permit Number _____

CERTIFICATE OF COMPLIANCE

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

Signature _____ Title _____ Date _____
(Certificate of Compliance is not valid unless signed by a Registered Qualified Employee)
Date System Installed _____ Inspected by _____

