



Saint Louis County

Environmental Services Department

Onsite Wastewater Division 1-800-450-9278

Duluth: 325 W First St., Suite 300, Duluth, MN 55802, (218) 725-5200

Virginia: 307 1st St S, Suite 115, Virginia, MN 55792, (218) 749-0625

Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems

Date of Inspection: _____ Property Owner (s): _____

Site Address: _____ Township Name: _____

Mailing Address: _____

Telephone () _____ Reason for Inspection: _____

Person requesting inspection/ mailing address/ telephone (if different than owner) _____

Fire No: _____ Parcel No: _____

Township _____ Range _____ Section _____ Quarter _____

(Check appropriate sewer system component and indicate location on site sketch)

Tank(s)	Treatment System	Treatment System Cont.	Comments
Septic Tank	Rock Trench	Peat Filter	Other:
Pump Tank	Gravelless Pipe Trench	Drip Irrigation	
Holding Tank	Chamber Trench	Constructed Wetlands	
Other	Seepage Bed	Aerobic Tank	
	Mound	Operating Permit	
	At-grade	Exp. Date:	
	Sand Filter		

SYSTEM ORIGINALLY SIZED FOR _____ BEDROOMS

SYSTEM PRESENTLY SERVING _____ BEDROOMS

WATER METER ___ YES ___ NO

System built prior to April 1, 1996 and NOT located in Shoreland or Wellhead Protection Area OR serving a Food, Beverage or Lodging Establishment		System located in Shoreland or Wellhead Protection Area OR serving a Food, Beverage or Lodging Establishment PLUS all systems built after April 1, 1996	
Is the system an imminent public health threat IPHT/Failing? 1. Discharge of sewage to the ground surface? 2. Discharge of sewage to drain tile or surface waters? 3. Sewage backup into dwelling? 4. Situation with the potential to adversely impact or threaten public health or safety? (Less than 1' of separation) 5. Is the tank leaking/structurally unsound? 6. Are there indications of past tank leakage? Is the system non-conforming? 7. Between 1 & 2 feet of vertical separation between system bottom and saturated soil or bedrock? 8. A seepage pit or drywell?	Upgrade Yes No 2 mo Yes No 2 mo Yes No 2 mo Yes No 24 mo Yes No 24 mo Yes No 24 mo Yes No Yes No	Is the system an imminent public health threat IPHT/Failing? 1. Discharge of sewage to the ground surface? 2. Discharge of sewage to drain tile or surface waters? 3. Sewage backup into dwelling? 4. Situation with the potential to adversely impact or threaten public health or safety? (Less than 1' of separation) 5. Is the tank leaking/structurally unsound? 6. Are there indications of past tank leakage? Is the system non-conforming? 7. Between 1 & 2.5 feet (30.6") of vertical separation between system bottom and saturated soil or bedrock? 8. A seepage pit or drywell?	Upgrade Yes No 2 mo Yes No 2 mo Yes No 2 mo Yes No 24 mo Yes No 24 mo Yes No 24 mo Yes No Yes No

STATUS OF THE SYSTEM

Based on the compliance criteria above, this system is (check one):

___ Compliant ___ Non-Conforming ___ Definitional Failure ___ Imminent Public Health Threat

What methods were used to make the determination for the compliance inspection? _____

COMMENTS: _____

Please attach the following:

- 1) Site sketch. Include: well, well setback to system, dwelling or other establishment, tank(s), soil treatment system, reserved soil treatment area, curtain drain, property lines, waterways, and buried lines (those NOT installed by the utility). Also include sizes and length and approximate distances from fixed reference points such as streets and buildings.
- 2) Soil boring logs, showing each horizon. Indicate the texture, structure, color, depth of each different soil type, evidence of mottling, bedrock and standing water and whether the material is fill. Locate each boring on attached site sketch.
- 3) All setback distances.
- 4) Comments on system sizing for current use.
- 5) Indicate available expansion area.

CERTIFICATION

A. I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.

Property Owner _____

B. I hereby certify as a State of Minnesota licensed Inspector and/or Designer I or Qualified Employee Inspector and/or Qualified Employee Designer I, that I conducted an investigation in accordance with applicable requirements that accurately determined the compliance status of this system and that my observations recorded are accurate as of this date. No determination of future hydraulic performance has been nor can be made due to unknown conditions during system construction, abuse of the system, inadequate maintenance, or future water usage.

Inspector's name (print) _____ Phone _____

License and/or Registration Number _____ Address _____

Signature _____ Date: _____

UPGRADE CRITERIA

Minnesota Statutes 115.55 ("law") Upgrade Requirements

Any situation with the potential to immediately and adversely affect or threaten public health or safety, must be upgraded, replaced, or its use discontinued within two months of receipt of this notice or within a shorter period of time if required by local ordinance.

If the local unit of government with jurisdiction over the system has adopted an ordinance containing alternative local standards, the existing system must comply with the ordinance. If the system does not comply with the ordinance, it must be upgraded, replaced, or its use discontinued according to the ordinance.

If a seepage pit, drywell, cesspool, or leaching pit exists and the local unit of government with jurisdiction over the system has not adopted local standards to the contrary, the system is failing and must be upgraded, replaced, or its use discontinued within the time required by local ordinance.

If the system fails to provide sufficient groundwater protection, then the local unit of government or its agent shall order that the system be upgraded, replaced, or its use discontinued within the time required by rule or the 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 does not apply to systems in shoreland areas, wellhead protection areas, or those used in connection with food, beverage, and lodging establishments as defined by law.

This form is to be completed by a certified inspector & submitted to the appropriate SLC Environmental office:

325 W 1st St
Suite 300
Duluth, MN 55802
218-725-5200

Northland Office Bldg., 2R
307 1st St S,
Virginia, MN 55792
218-749-0625