MINNESOTA POLLUTION CONTROL AGENCY
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: 13 031 0300 Reason for Inspection Sale of Home

Local regulatory authority info: Dodge County

Property address: 22908 Co Hwy 34 Kasson

Owner/representative: BERNARD KREIDERMACHER Owner's phone:

Brief system description:
2250 3C with Pump in 3rd Compartment and Mound System Filter.

System status

System status on date (mm/dd/yyyy): 10-26-26

☒ **Compliant – Certificate of compliance***

*(**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.)*

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

☐ **Noncompliant – Notice of noncompliance**

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.

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

Permit # 19-064

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: GOPHER SEPTIC SERVICE INC Certification number: 1548

Inspector signature: [signature] License number: 866

(This document has been electronically signed) Phone: 507-282-2243

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: 22908 Co Hwy 34 Kasson

Business Name: GOPHER SEPTIC Date: 10-26-26

1. Impact on public health – Compliance component #1 of 5

Compliance criteria:	
System discharges sewage to the ground surface	☐ Yes* ☒ No
System discharges sewage to drain tile or surface waters.	☐ Yes* ☒ No
System causes sewage backup into dwelling or establishment.	☐ Yes* ☒ No

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

Describe verification methods and results:

Checked Insp pipe 4"
Probed Media

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?	☐ Yes* ☒ No
Sewage tank(s) leak below their designed operating depth?	☐ Yes* ☒ 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:

Covers To Surface

Attached supporting documentation:

☒ Empty tank(s) viewed by inspector

Name of maintenance business: Gopher Septic Service Inc.

License number of maintenance business: 866

Date of maintenance: 5-7-26

☐ 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: 22908 Co Hwy 34 Kasson
Business Name: Gopher Septic Ser Inc Date: 10-26-20

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:

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: [redacted]w 22908 Co Hwy 34 Kasson

Business Name: Gopher Septic Service Inc Date: 10-26-26

5. Soil separation – Compliance component #5 of 5

Date of installation 2019 (mm/dd/yyyy) ☐ Unknown

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

Attached supporting documentation:

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

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:* Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.	☒ Yes ☐ No*
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:* Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*	☐ Yes ☐ No*
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)* Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.	☐ Yes ☐ No*

Indicate depths or elevations

A. Bottom of distribution media	27"
B. Periodically saturated soil/bedrock	63"
C. System separation	36"
D. Required compliance separation*	

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

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

Describe verification methods and results:

Used Bucket Auger.

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.*

Additional Soil Observation Logs

Project ID: #REFI

Client/ Address:	22908 Co Hwy 34 Kasson	Legal Description/ GPS:	

Soil parent material(s): (Check all that apply) ☐ Outwash ☐ Lacustrine ☐ Loess ☐ Till ☐ Alluvium ☐ Bedrock ☐ Organic Matter

Landscape Position: (check one) ☐ Summit ☐ Shoulder ☐ Back/Side Slope ☐ Foot Slope ☐ Toe Slope Slope shape

Vegetation	Lawn	Soil survey map units		Slope%		Elevation:	
Weather Conditions/Time of Day:					Date	10 - 26 - 26	

Observation #/Location:		Observation Type:	

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Structure: Shape	Structure: Grade	Structure: Consistence
18"	Cover Soil								
27"	System								
51"	mixed Sand								
63"	Silt Loam	0	10YR 3/3	—	—	—	Blocky	mod	Friable

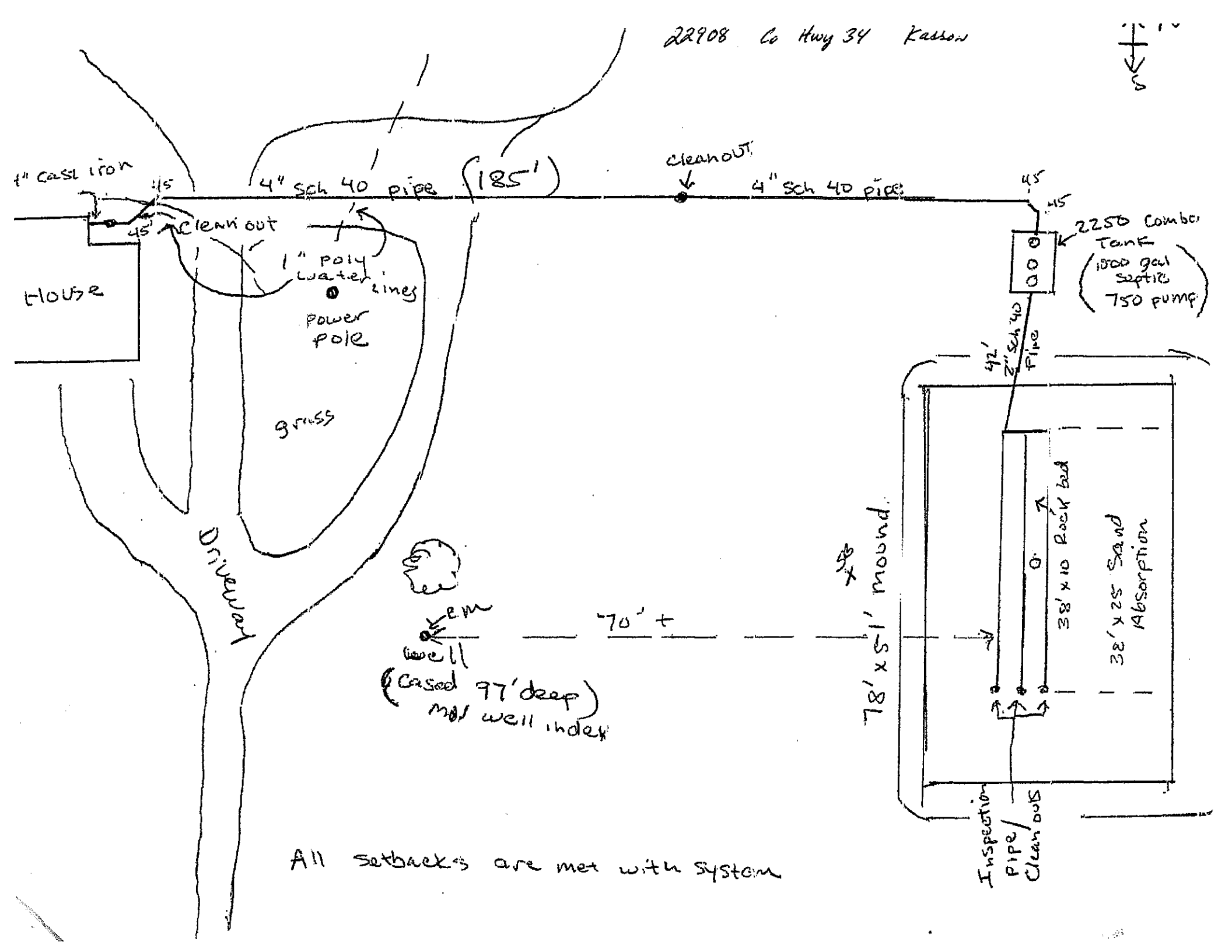
Comments

Observation #/Location:		Observation Type:	

Depth (in)	Texture	Rock Frag. %	Matrix Color(s)	Mottle Color(s)	Redox Kind(s)	Indicator(s)	Structure: Shape	Structure: Grade	Structure: Consistence

Comments

22908 Co Hwy 34 Kasson



All setbacks are met with system



Map Scale: 1:1,260 if printed on A portrait (8.5" x 11") sheet.

N

Meters: 0 15 30 60 90

Feet: 0 50 100 200 300

Map projection: Web Mercator Corner coordinates: WGS84 Edge tics: UTM Zone 15N WGS84

MAP LEGEND

Area of Interest (AOI)
- Area of Interest (AOI)

Soils
- Soil Map Unit Polygons
- Soil Map Unit Lines
- Soil Map Unit Points

Special Point Features
- Blowout
- Borrow Pit
- Clay Spot
- Closed Depression
- Gravel Pit
- Gravelly Spot
- Landfill
- Lava Flow
- Marsh or swamp
- Mine or Quarry
- Miscellaneous Water
- Perennial Water
- Rock Outcrop
- Saline Spot
- Sandy Spot
- Severely Eroded Spot
- Sinkhole
- Slide or Slip
- Sodic Spot
- Spoil Area
- Stony Spot
- Very Stony Spot
- Wet Spot
- Other
- Special Line Features

Water Features
- Streams and Canals

Transportation
- Rails
- Interstate Highways
- US Routes
- Major Roads
- Local Roads

Background
- Aerial Photography

MAP INFORMATION

The soil surveys that comprise your AOI were mapped at 1:12,000.

Warning: Soil Map may not be valid at this scale.

Enlargement of maps beyond the scale of mapping can cause misunderstanding of the detail of mapping and accuracy of soil line placement. The maps do not show the small areas of contrasting soils that could have been shown at a more detailed scale.

Please rely on the bar scale on each map sheet for map measurements.

Source of Map: Natural Resources Conservation Service
Web Soil Survey URL:
Coordinate System: Web Mercator (EPSG:3857)

Maps from the Web Soil Survey are based on the Web Mercator projection, which preserves direction and shape but distorts distance and area. A projection that preserves area, such as the Albers equal-area conic projection, should be used if more accurate calculations of distance or area are required.

This product is generated from the USDA-NRCS certified data as of the version date(s) listed below.

Soil Survey Area: Dodge County, Minnesota
Survey Area Data: Version 23, Sep 7, 2026

Soil map units are labeled (as space allows) for map scales 1:50,000 or larger.

Date(s) aerial images were photographed: Aug 17, 2020—Sep 2, 2020

The orthophoto or other base map on which the soil lines were compiled and digitized probably differs from the background imagery displayed on these maps. As a result, some minor shifting of map unit boundaries may be evident.

DODGE COUNTY SEPTIC SYSTEM PERMIT APPLICATION

721 Main St N, Dept.123, Mantorville, MN 55955
Phone: 507-635-6272 Email: Elizabeth.Harbaugh@co.dodge.mn.us

PERMIT #_____
Date Rec'd_____
Amt Rec'd_____

OFFICE USE ONLY: ☐ Installer Sheet ☐ Design Sheet ☐ Homeowner Signature ☐ MPCA Design Forms ☐ Applicable Fees ☐ Com/Ind Sheet

CONTACT INFORMATION

Property Owner: Bernard Kreidermacher Date: 9/17/19
Site Address: 22908 County Highway 34 Kasson, MN Phone: 507 951-3071
Mailing Address: Same Parcel ID#: 13031 0300
Subdivision: _____ Lot: ____ Block: ____

INSTALLER

Name: Schumacher Excavating Inc.
Address: 50 warren Ave City/State Zumbrota, MN
Email: Scott@Schumacherexcavating.com Phone: (507) 732-5043

Septic Type: ☐ New Construction ☒ Replacement ☐ Tank(s) Only ☐ Holding Tank
Standard System: ☐ Trenches ☐ Bed ☐ At-Grade ☒ Mound ☐ Other; _____
~~Seeding / Sod to be done by:~~ ☒ ~~Homeowner~~ ☐ ~~Installer~~

☒ Yes ☐ No System will be constructed according to the approved septic system design created by a MPCA Certified Designer.

If the property is located within the city of Mantorville; City needs to sign off on permit
City of Mantorville Permit Approval: ☐ Yes ☐ No *Signature* _____

OWNER PROVIDED INFORMATION

The Building Is: ☐ Proposed ☒ Existing Type(s) of Use: ☒ Residential ☐ Commercial* ☐ Other* _____

*Please include the Commercial/Industrial/Other Establishment Sheet with permit

Residential: Number of Bedrooms 3 Basement Finished ☐ Yes ☐ No

☐ Home Extended Business *(specify)* _____ ☐ Daycare *(specify)* _____

Water Using Devices *(check all that apply)*
☒ Garbage Disposal ☒ Dishwasher ☐ Large Bathtub/Jacuzzi
☒ Water Softener ☒ Clothes Washer ☐ Hot Tub ☐ Daycare
☐ Sewage Ejector or Grinder Pump

Property Lines: ☐ Determined & Approved by Property Owner ☐ Approximate ☐ Property Lines Surveyed & Staked
(Check all that apply)

Property Owner Signature

I hereby certify that I have read this application and verify that all information is true and correct.

Property Owners Printed Name	Property Owners Signature	Date
	Bernard Kreidermacher	9-18-19

Installer Signature

I hereby certify with my signature as the installer, that the materials; including sand, rock, and soil, design of equipment, construction and workmanship will meet state and county code requirements to the best of my knowledge. I agree to indemnify and save Dodge County harmless from all losses, damages, costs and charges that may be incurred by the County because of my failure to conform to and comply with the provision of the Dodge County Septic and Wastewater Treatment Ordinance.

Signature _____ Date 9/17/19 License# C9121 Expires _____

Application Approved __/__/__ Approval Sent __/__/__ Application Denied __/__/__