

# PRIVATE SEWAGE SYSTEM INSPECTION REPORT for Dunn County

Name	Warren Turner	
Address	E6154 848 <sup>th</sup> Ave.	
City	Colfax	
State & Zip	WI	54730

PLUMBER:	CST:
Tim Mittlestadt	Henry Grote

## GENERAL INFORMATION

CST BM Elev.:	Insp. BM Elev.:
BM Description: Top of well	

## TANK INFORMATION

TYPE	MANUFACTURER	CAPACITY
Holding	Wieser	3000
Tank		

## TANK SETBACK INFORMATION

TYPE	P/L	WELL	BLDG	VENT TO AIR INTAKE
Holding	17'	72'	28'	
Tank				

## PUMP/SIPHON INFORMATION

Manuf/Model #			
Lift	Friction Loss	System Head	TDH Ft.
Forcemain	Length	Dia.	Dist. to Well

## SOIL ABSORPTION SYSTEM

Dispersal Cell Information	Manuf	Width	Length	No. of Cells
Setback	Type of System	P/L	Bldg	Well
Information	Holding Tank			Lake/Stream

## DISTRIBUTION SYSTEM

Header/Manifold Length Dia.	Distribution pipe(s) Length Dia. Spacing	X Hole Size	X Hole Spacing
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WI FUND: \_\_\_\_\_ Yes  No \_\_\_\_\_ Maybe  
REASON: \_\_\_\_\_

COMMENTS:

New House/Double Wide	
New Mobile Home	
New Other	
Replace/Repair/Reconnect	<input checked="" type="checkbox"/>

05/26/05  
Date

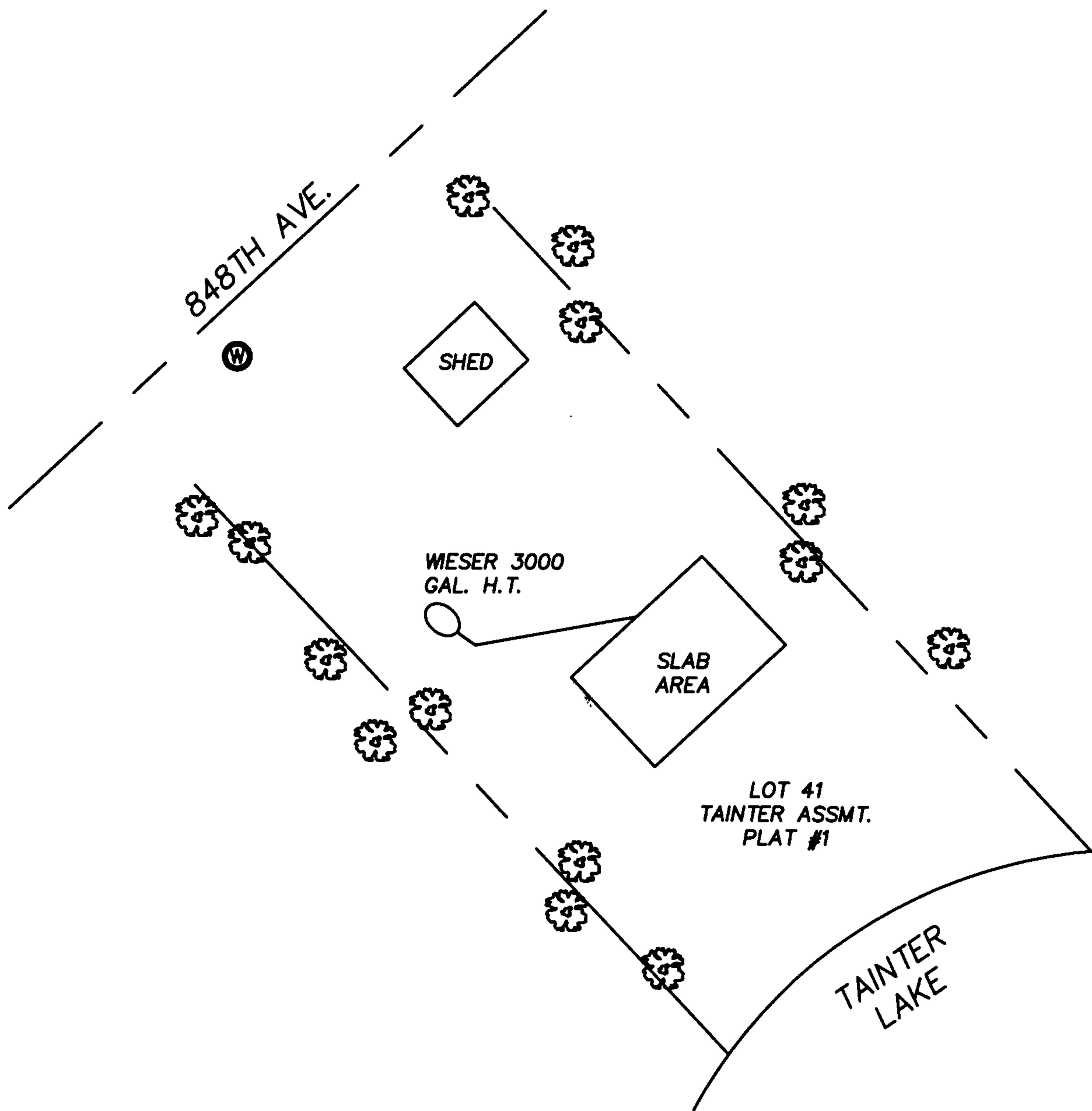
*Alex Herick*  
Inspector's Signature

220750  
Cert. No.

E Property Address/City	E6154 848 <sup>th</sup> Ave. Colfax, WI 54730
Town of	TAINTER
Legal	G.L. 2 21-29-12
Subdivision	Lot 41 Tainter Assmt. Plat #1
CSM #	
Sanitary permit #	<b>476720</b>
State Plan ID #	1127336
Parcel tax #	291221.00212
Computer #	038-1208-01

## ELEVATION DATA

STATION	ELEVATION	ELEVATION
Benchmark		100
Well		
Bldg. Sewer		92.79
St/Ht Inlet		91.06
St/Ht Outlet		
Dt. Inlet		
Dt. Bottom		
Header/Man		
Dist. Pipe		
Bottom of system		



SCALE: 1" = 40'

**DUNN COUNTY**

Parcel No. 291221.00212  
Comp. #: 038-1208-01

**STATE \* SANITARY PERMIT No. 476720**

**REPLACEMENT - HOLDING TANK**

OWNER WARREN TURNER, E6154 848<sup>TH</sup> AVE., COLFAX, WI

PLUMBER TIM MITTLESTADT LICENSE # 227548

TOWN OF TAINTER LOCATED \_\_\_\_\_

SECTION 21 T 29 N-R 12 W

AND/OR LOT \_\_\_\_\_ BLOCK \_\_\_\_\_

\_\_\_\_\_ SUBDIVISION \_\_\_\_\_

JANET RIEDEL AUTHORIZED ISSUING OFFICER - DATE 5/25/05

THIS PERMIT EXPIRES 5/25/07 UNLESS RENEWED BEFORE THAT DATE

(TWO YEARS FROM THE ORIGINAL DATE OF ISSUANCE)

PLACE VISIBLE FROM THE ROAD FRONTING THE LOT DURING CONSTRUCTION

**CHAPTER 145.135 WISCONSIN STATUTES**

- (a) The purpose of the sanitary permit is to allow installation of the private sewage system described in the application for permit.
  - (b) The approval of the sanitary permit is based on regulations on force on the date of issue.
  - (c) The sanitary permit is valid 2 years from original date of issuance and may be renewed for similar periods thereafter. Application for renewal shall be made through the county and shall comply with regulations in effect at the time.
  - (d) Changed regulations will not impair the validity of a sanitary permit until the time of renewal.
  - (e) Renewal of the sanitary permit will be based on regulations in force at the time renewal is sought. Changed regulations may impede renewal.
  - (f) The sanitary permit is transferable. A sanitary permit transfer shall be obtained from the county authority.
- \* If you wish to transfer the permit or transfer ownership of the



Safety and Buildings Division  
 201 W. Washington Ave., P.O. Box 7162  
 Madison, WI 53707 - 7162  
 (608) 266-3151

County **DUNN**  
 Sanitary Permit Number (to be filled in by Co.)  
**476720**

### Sanitary Permit Application

In accord with Comm 83.21, Wis. Adm. Code, personal information you provide may be used for secondary purposes Privacy Law, s15.04(1)(m)

State Plan I.D. Number  
**1127336**  
 Project Address (if different than mailing address)

#### I. Application Information - Please Print All Information

Property Owner's Name

**WARREN TURNER**

Parcel # Lot # Block #

**291221.00212**  
**41 ASS. PLAT #1**

Property Owner's Mailing Address

**E 615 4 848 Ave**

Property Location

\_\_\_\_ 1/4, \_\_\_\_ 1/4, Section **21**

City, State

**COLEMAN WI**

Zip Code

Phone Number

**25** N; **12** E or W (circle one)

#### II. Type of Building (check all that apply)

1 or 2 Family Dwelling - Number of Bedrooms **2**

Public/Commercial - Describe Use \_\_\_\_\_

State Owned - Describe Use \_\_\_\_\_

Subdivision Name

CSM Number

City  Village  Township of **TAINTER**

#### III. Type of Permit: (Check only one box on line A. Complete line B if applicable)

A.  New System  Replacement System  Treatment/Holding Tank Replacement Only  Other Modification to Existing System

B.  Permit Renewal Before Expiration  Permit Revision  Change of Plumber  Permit Transfer to New Owner

List Previous Permit Number and Date Issued

#### IV. Type of POWTS System: (Check all that apply)

Non-Pressurized In-Ground  Mound ≥ 24 in. of suitable soil  Mound < 24 in. of suitable soil  At-Grade  Single Pass Sand Filter  Constructed Wetland  Pressurized In-Ground  Holding Tank  Peat Filter  Aerobic Treatment Unit  Recirculating Sand Filter  Recirculating Synthetic Media Filter  Leaching Chamber  Drip Line  Gravel-less Pipe  Other (explain)

#### V. Dispersal/Treatment Area Information:

Design Flow (gpd) **200** Design Soil Application Rate (gpd/sf) \_\_\_\_\_ Dispersal Area Required (sf) \_\_\_\_\_ Dispersal Area Proposed (sf) \_\_\_\_\_ System Elevation \_\_\_\_\_

#### VI. Tank Info

	Capacity in Gallons		Total Gallons	Number of Units	Manufacturer	Prefab Concrete	Site Constructed	Steel	Fiber Glass	Plastic
	New Tanks	Existing Tanks								
Septic or Holding Tank	<b>1</b>		<b>3000</b>		<b>WEISER</b>	<b>X</b>				
Aerobic Treatment Unit										
Dosing Chamber										

#### VII. Responsibility Statement- I, the undersigned, assume responsibility for installation of the POWTS shown on the attached plans.

Plumber's Name (Print) **TIM MITTLESTADT** Plumber's Signature *[Signature]* MP/MPRS Number **227548** Business Phone Number **715-665-2112**  
 Plumber's Address (Street, City, State, Zip Code) **E742 Hwy 12 KNAPP WI**

#### VIII. County/Department Use Only

Approved  Disapproved  Owner Given Reason for Denial  
 Sanitary Permit Fee (includes Groundwater Surcharge Fee) **300** Date Issued **5.25.05** Issuing Agent Signature (No Stamps) *[Signature]*

#### IX. Conditions of Approval/Reasons for Disapproval

**038-1208-01**

Attach complete plans (to the County only) for the system on paper not less than 8 1/2 x 11 inches in size

Warren & Daisy Turner Plot Plan

E. 6154 84<sup>th</sup> Ave

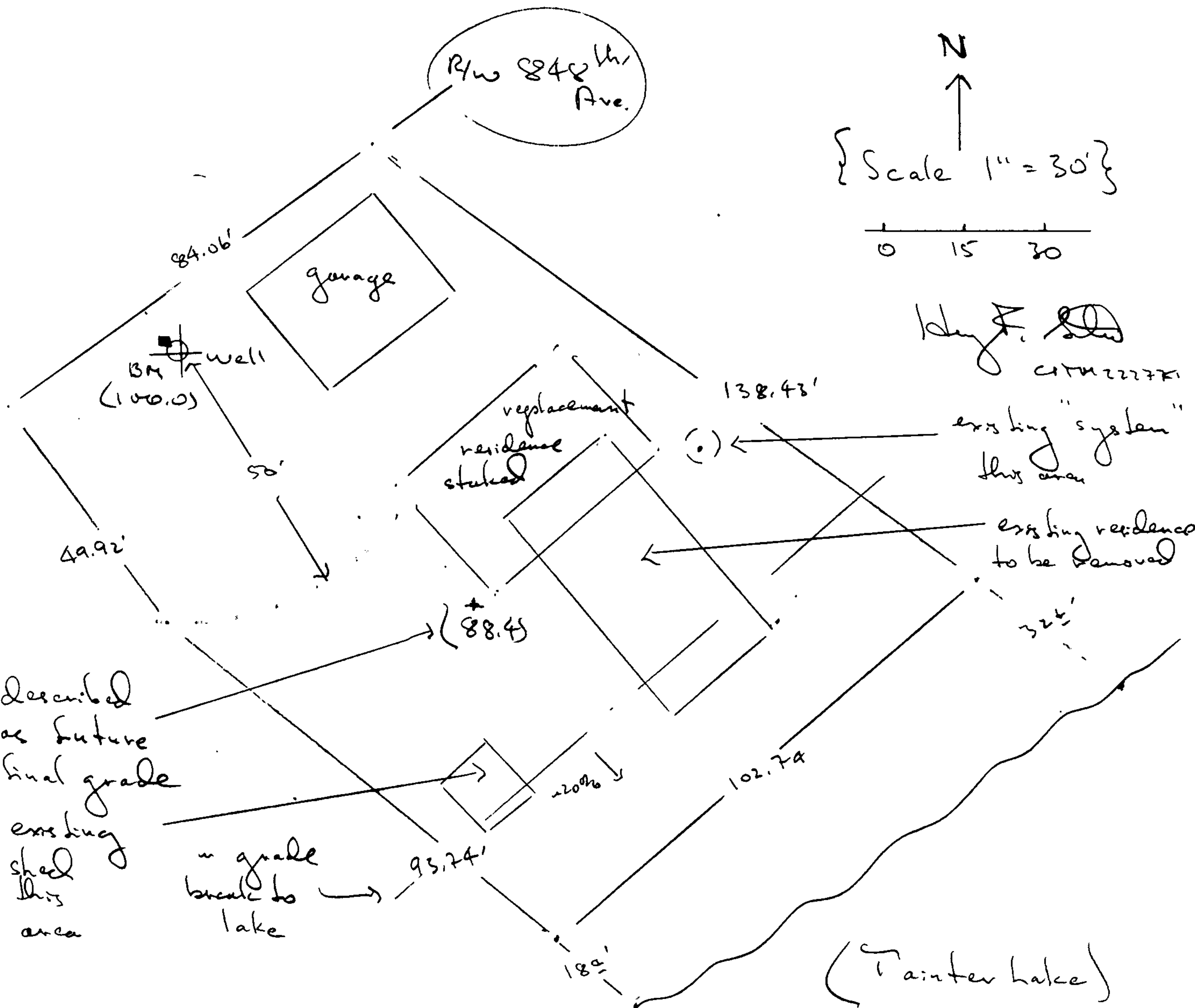
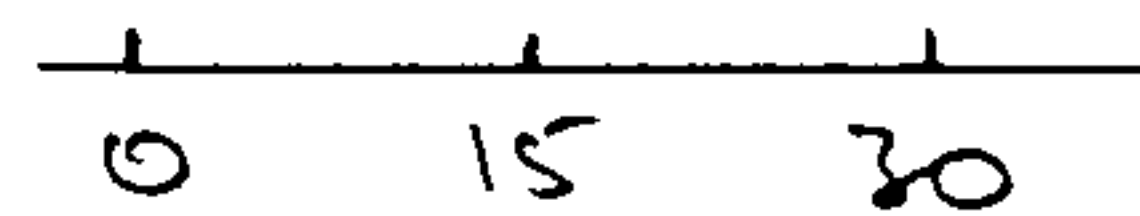
038-1208-01-000

lot 41, TN TA Assessor's Plat #1  
Sec. 21-29-12W  
Town, Tainter

N



{ Scale 1" = 30' }



Key: existing "system" this area

existing residence to be removed

BM (100.0) elev on top of well  
+ rod / transit elev



ORIGINAL

# SOIL EVALUATION REPORT

in accordance with Comm 85, Wis. Adm. Code

#2200

Department of Commerce  
Division of Safety and Buildings

Page 1 of 2  
Certified Soil Testing, LLC

Attach complete site plan on paper not less than 8½ x 11 inches in size. Plan must include, but not limited to: vertical and horizontal reference point (BM), direction and percent slope, scale or dimensions, north arrow, and location and distance to nearest road.

**Please print all information.**

Personal information you provide may be used for secondary purposes (Privacy Law, s. 15.04 (1) (m)).

County	Dunn
Parcel I.D.	038-1208-01-000
Reviewed By	Date

Property Owner Turner, Warren & Daisy	Property Location Govt. Lot 1/4, 1/4, S21, T29N, R12W		
Property Owner's Mailing Address E. 6154 848th Ave.	Lot # 41	Block #	Subd. Name or CSM# TN TA Assessor's Plat # 1
City Colfax	State WI	Zip Code 54730	Phone Number 715-962-4342
		<input type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> Town	Nearest Road Tainter 848Th Ave.

New Construction      Use:  Residential / Number of bedrooms 2      Code derived design flow rate 300 GPD  
 Replacement                       Public or commercial - Describe: \_\_\_\_\_

Parent material sandy/loamy outwash      Flood plain elevation, if applicable NA ft.

General comments and recommendations: limited area; well & lake setbacks & low flow (2 retired occupants current use) all indicate holding tank

**1** Boring #  Boring  Pit      Ground surface elev. \_\_\_\_\_ ft.      Depth to limiting factor \_\_\_\_\_ in.      Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure	Consistence	Boundary	Roots	GPD/ft <sup>2</sup>	
									*Eff#1	*Eff#2

\* Effluent #1 = BOD<sub>5</sub> > 30 ≤ 220 mg/L and TSS >30 ≤ 150 mg/L      \* Effluent #2 = BOD<sub>5</sub> ≤ 30 mg/L and TSS ≤ 30 mg/L

CST Name (Please Print) <u>Henry Grote</u>	Signature 	CST Number <u>222774</u>
Address Certified Soil Testing, LLC E. 4366 353rd Ave. Menomonie, WI 54751	Date Evaluation Conducted <u>4/6/2005</u>	Telephone Number <u>715-233-0398</u>

Document Number:

Note: COMPLETE ALL ITEMS IN BLACK INK

# Dunn County Holding Tank Maintenance and Monitoring Agreement

(To be submitted with the State Sanitary Permit application)

521969

DUNN COUNTY, WI  
REGISTER OF DEEDS  
JAMES M. HRDUTT

RECORDED ON  
04/05/2005 03:20PM

REC FEE: 11.00  
FEE EXEMPT #:

PAGES: 1

**DUNN  
COUNTY**

Plan ID Number:

Parcel ID Number:

Agreement Date:

038-1208-01000

pd 11.00

Governmental (Township) Unit:

Holding Tank Owner:

TAINTER

WARREN DAISY TURNER

Department of Planning, Resource and  
Development - Zoning Office  
800 Wilson Ave.  
Menomonie, WI 54751

We acknowledge that the agreement is made between the governmental (township) unit and the holding tank owner regarding the installation of a holding tank on the following property:

Sec 21 T29N R13W LOT 41  
Town of Tainter Assessors Plat #1

- The owner agrees to maintain the holding tank at all times so as not to create a human health hazard or nuisance.
- The owner agrees to ensure the operation and maintenance of the holding tank in accordance with Comm 83, Wisconsin Administrative Code, the management plan as submitted under Comm 83.54(1), Wis. Adm. Code, and s. 6.9.01, Dunn County Zoning Ordinance.
- The owner agrees to pay all costs incurred by the governmental unit for inspection, hauling, or otherwise servicing and maintaining the holding tank to prevent or abate any human health hazard caused by the holding tank.
- The owner agrees to notify the Dunn County Planning and Zoning Department within 10 days of any maintenance or management activity on the holding tank. (Pumping events may be reported by the contracted pumper per the servicing contract.)
- The owner agrees to allow access to the holding tank to any Dunn County Zoning Office employee or representative to inspect the construction, operation, or maintenance of the system.
- The agreement shall be binding upon the owner, the heirs of the owner, and assignees of the owner. The Dunn County Register of Deeds shall record the document.

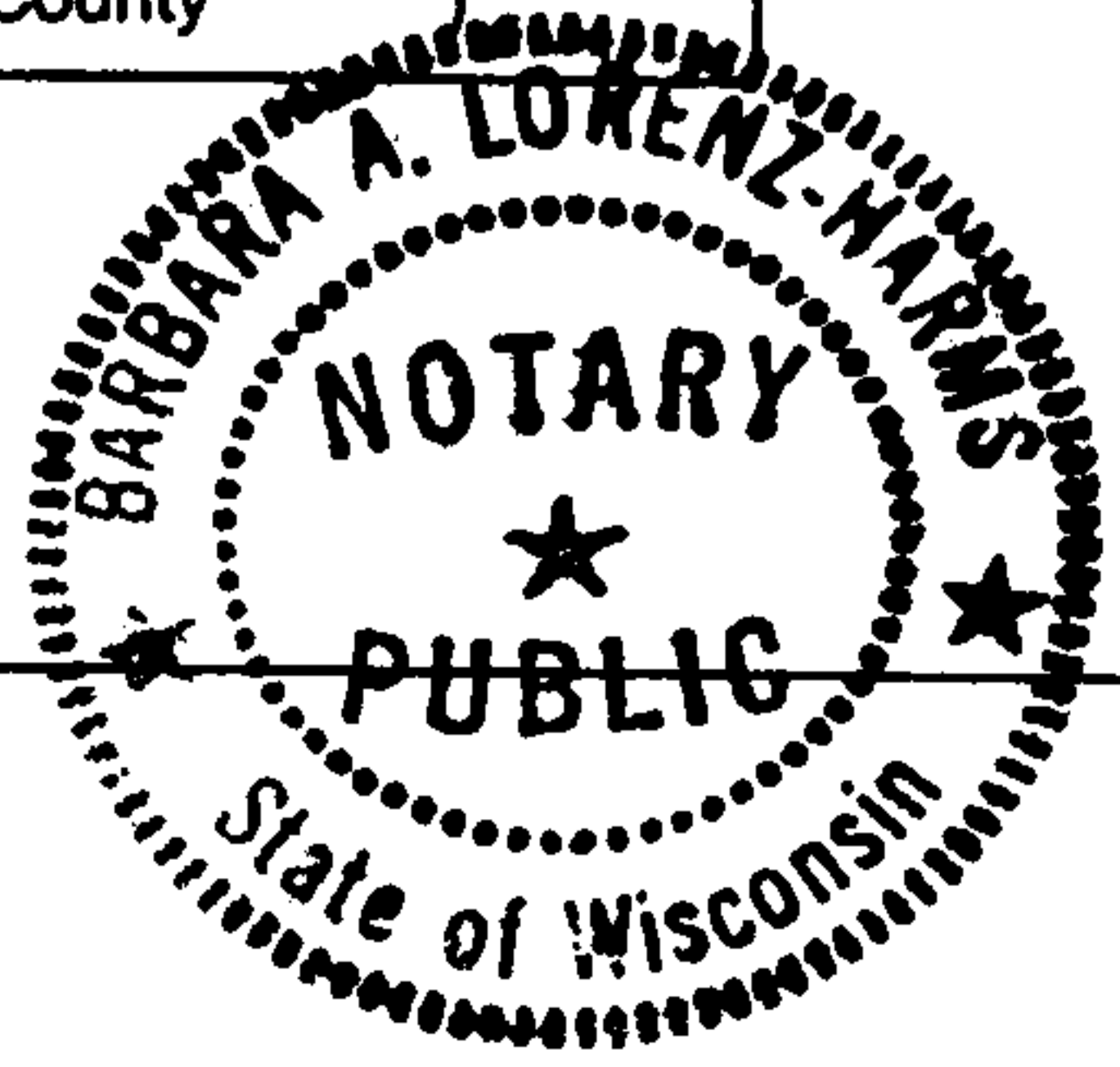
Randy L Valaski	Chairman	
Name of governmental (Township) official	Title	Signature of governmental (Township) official
Warren Turner		4/3/05
Name owner	Signature of owner	Date

Subscribed and sworn to before me on this date: 4-5-05

State of Wisconsin )  
Dunn County ) SS.

Notary Signature

Notary Name (Print) BARBARA A. LORENZ-HARMS Notary Public  
Dunn County, Wisconsin



My commission expires June 10-2007



Safety and Buildings  
4003 N KINNEY COULEE RD  
LA CROSSE WI 54601-1831  
TDD #: (608) 264-8777  
www.commerce.wi.gov/sb/  
www.wisconsin.gov

Jim Doyle, Governor  
Mary P. Burke, Secretary

May 16, 2005

CUST ID No.227548

ATTN: POWTS Inspector

TIMOTHY H MITTLESTADT  
ABC SEWER  
E742 HWY 12 W  
KNAPP WI 54749-9074

ZONING OFFICE  
DUNN COUNTY SPIA  
800 WILSON AVE  
MENOMONIE WI 54751

**CONDITIONAL APPROVAL  
PLAN APPROVAL EXPIRES: 05/16/2007**

Identification Numbers
<b>Transaction ID No. 1127336</b>
<b>Site ID No. 697206</b>
Please refer to both identification numbers, above, in all correspondence with the agency.

**SITE:**

Warren & Daisy Turner  
E 6154 848th Avenue  
Town of Tainter  
Dunn County  
S21, T29N, R12W

**FOR:**

Description: Two Bedroom Holding Tank  
Object Type: POWTS Component Manual Regulated Object ID No.: 1014246  
Maintenance required; Replacement system; 200 GPD estimated flow rate; System: Holding Tank Component Manual, SBD-10571-P (R.6/99)

The submittal described above has been reviewed for conformance with applicable Wisconsin Administrative Codes and Wisconsin Statutes. The submittal has been **CONDITIONALLY APPROVED**. The owner, as defined in chapter 101.01(10), Wisconsin Statutes, is responsible for compliance with all code requirements.

No person may engage in or work at plumbing in the state unless licensed to do so by the Department per s.145.06, stats.

The following conditions shall be met during construction or installation and prior to occupancy or use:

- This system is to be constructed and located in accordance with the enclosed approved plans and with the "Holding Tank Component Manual for Private Onsite Wastewater Systems" SBD-10571-P (R.6/99).
- A Sanitary Permit must be obtained from the county where this project is located in accordance with the requirements of **Sec. 145.135 and 145.19, Wis. Stats.**
- Inspection of the private sewage system installation is required. Arrangements for inspection shall be made with the designated county official in accordance with the provisions of **Sec. 145.20(2)(d), Wis. Stats.**
- **Comm 83.52(3)** The activities relating to evaluation and monitoring POWTS components after the initial installation of the POWTS in accordance with an approved management plan shall be conducted by a person who holds a registration issued by the department as a registered POWTS maintainer.
- **Comm 83.22(7)** - A copy of the approved plans, specifications and this letter shall be on-site during construction and open to inspection by authorized representatives of the Department, which may include local inspectors.

**Owner Responsibilities:**

- The current owner, and each subsequent owner, shall receive a copy of this letter including instructions relating to proper use and maintenance of the system. Owners shall receive a copy of the appropriate operation and maintenance manual and/or owner's manual for the POWTS described in this approval.

**P.O.W.T.S.  
Conditionally  
APPROVED**



- **Comm 83.52(1)(a)** - The owner of a POWTS shall be responsible for ensuring that the operation and maintenance of the POWTS occurs in accordance with this chapter and the approved management plan under s. **Comm 83.54(1)**.
- **Comm 83.52(2)** - A POWTS that is not maintained in accordance with the approved management plan or as required under s. **Comm 83.54(4)** shall be considered a human health hazard. In the event this holding tank or any of its component parts malfunctions so as to create a health hazard, the property owner must follow the contingency plan as described in the approved plans.
- The owner is responsible for submitting a maintenance verification report acceptable to the county for maintenance tracking purposes. Reports shall be submitted at intervals appropriate for the component(s) utilized in the POWTS.

In granting this approval the Division of Safety & Buildings reserves the right to require changes or additions should conditions arise making them necessary for code compliance. As per state stats 101.12(2), nothing in this review shall relieve the designer of the responsibility for designing a safe building, structure, or component.

Inquiries concerning this correspondence may be made to me at the telephone number listed below, or at the address on this letterhead.

The above left addressee shall provide a copy of this letter to the owner and any others who are responsible for the installation, operation or maintenance of the POWTS.

Sincerely,



Gerard M. Swim  
POWTS Plan Reviewer - Integrated Services  
(608)-789-7892, Mon. - Fri. 7:30 am to 4:15 pm  
jswim@commerce.state.wi.us

Fee Required \$	60.00
Fee Received \$	60.00
Balance Due \$	0.00

WiSMART code: 7633

cc: Leroy G Jansky, Wastewater Specialist, (715) 726-2544

RECEIVED  
APR 18 2005  
SAFETY & BUILDINGS

**Warren & Daisy Turner - Holding Tank**

**Transaction #**

**Construction Materials and Techniques**

All materials must comply with Comm 84 and be installed in accordance with manufacturer's specifications. Construction methods must comply with the following Component Manual:

Holding Tank, SBD-10571-P (6/99)

Location: Lot 41, TN TA Assessor's Plat # 1  
Sec. 21, T 29 N, R 12 W  
Town: Tainter  
County: Dunn

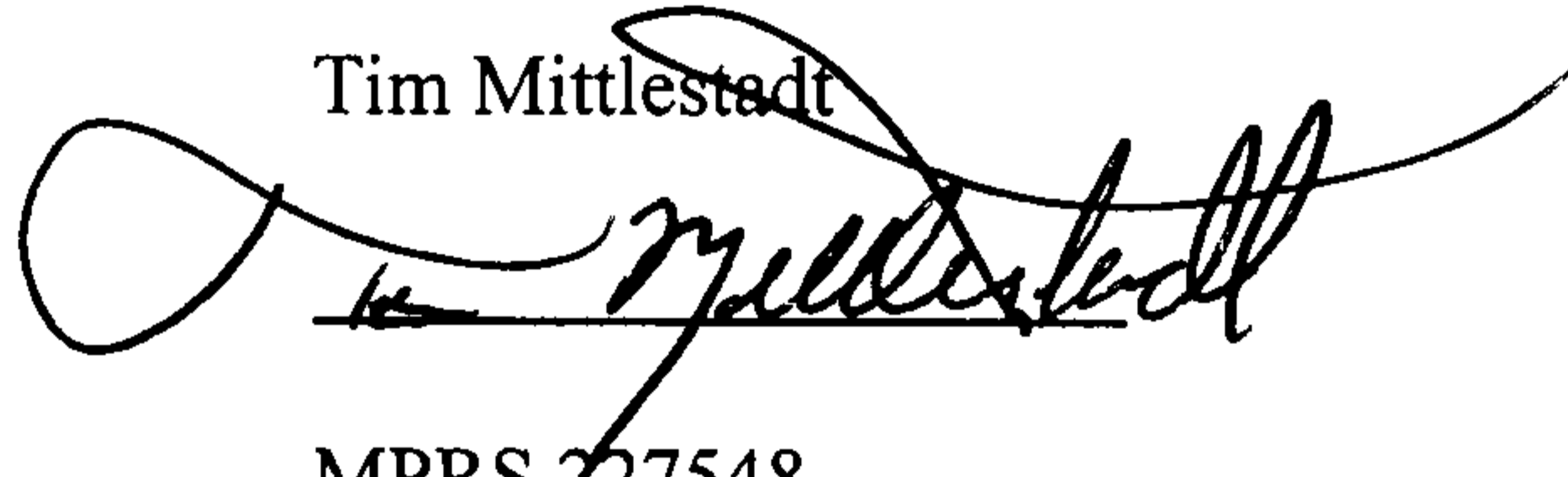
Date: April 13, 2005

Owner: Warren & Daisy Turner

Address: E. 6154 848<sup>th</sup> Ave.  
Colfax, WI 54730

Plumber: Tim Mittlestadt


Signature:



License # MPRS 227548

Attachments: 6748-Plan Approval Application  
SBD 8330

page 1: cover  
2: plot plan  
3: tank detail  
4: maintenance information

**APPROVED**  
DEPARTMENT OF COMMERCE  
DIVISION OF SAFETY AND BUILDINGS  
  
SEE CORRESPONDENCE

# Warren & Daisy Turner Plot Plan

E. 6154 842<sup>nd</sup> Ave

Trans # 1127336

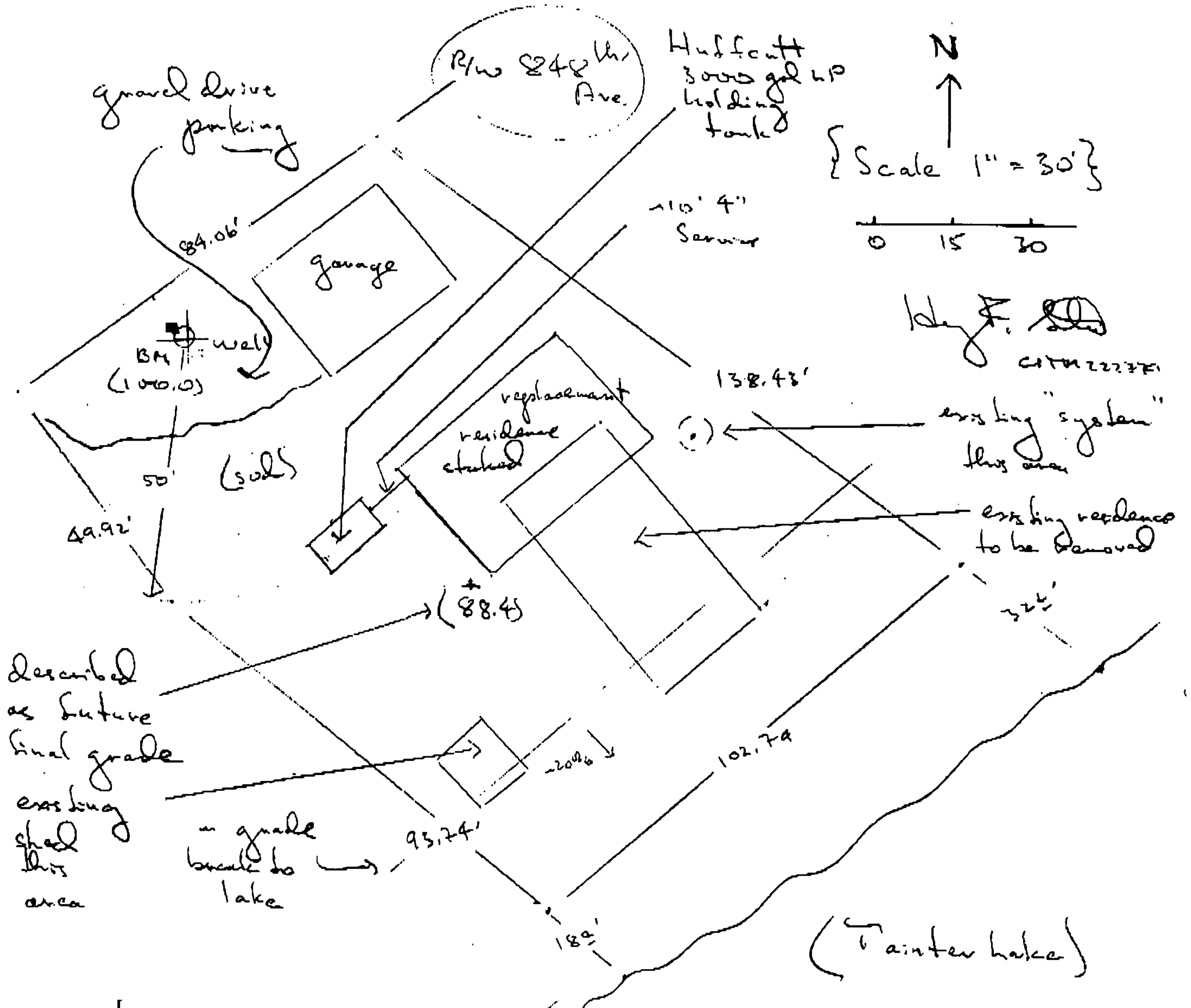
lot 41, TN TA Assessor's Plat #1

Site # 697206

Sec. 21-2A-124

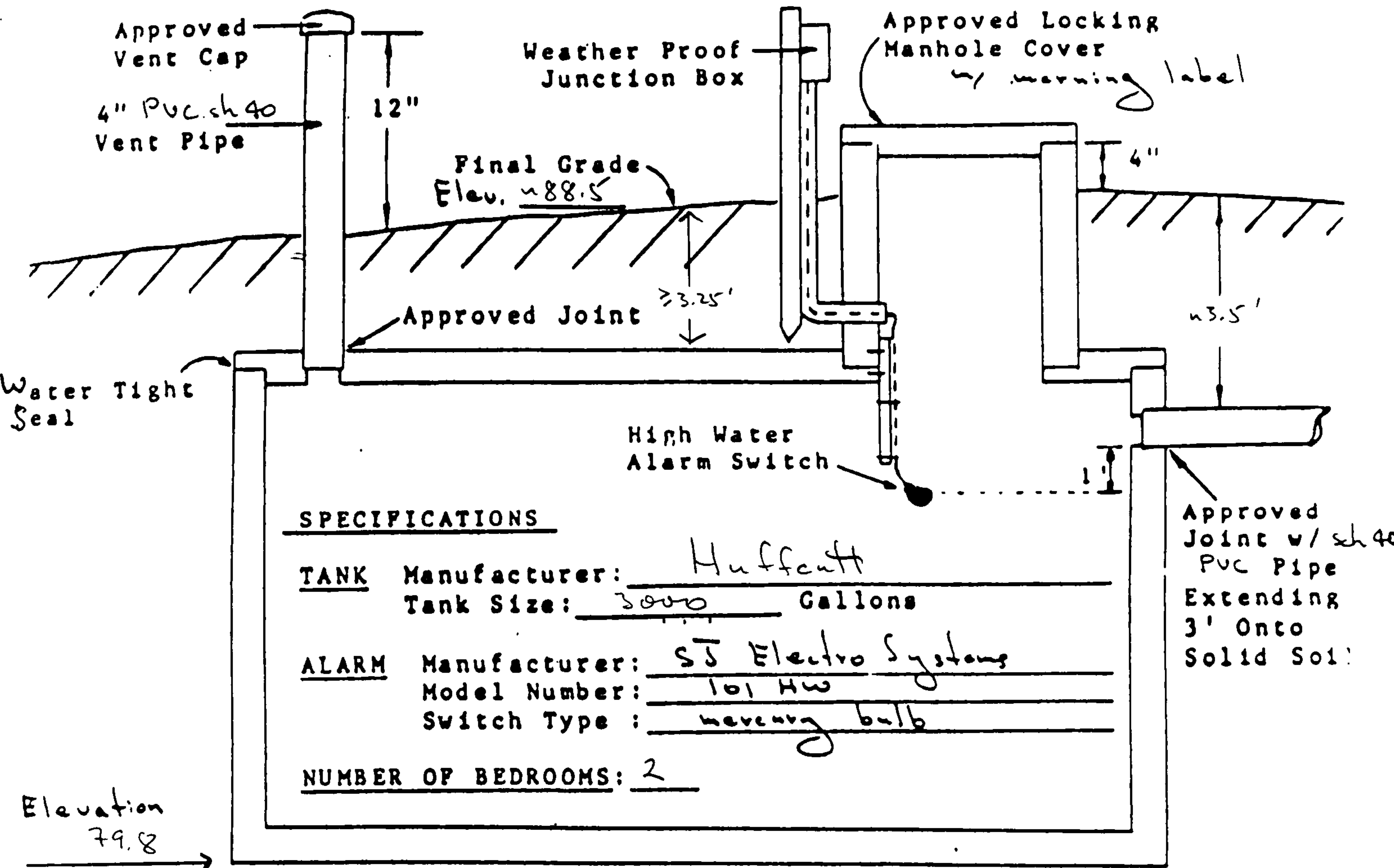
Town: Tainter

038-1208-01-000



BM (100.0) elev on top of well  
+ road/ground elev

HOLDING TANK CROSS-SECTION AND SPECIFICATIONS



SPECIFICATIONS

TANK Manufacturer: Huffcutt  
 Tank Size: 3000 Gallons

ALARM Manufacturer: ST Electro Systems  
 Model Number: 101 HW  
 Switch Type: mercury bulb

NUMBER OF BEDROOMS: 2

Approved Joint w/ sch 40 PVC Pipe Extending 3' Onto Solid Soil

Elevation 79.8 →

OWNER'S NAME: Warren & Daisy Turner  
 ADDRESS: E. 6154 848th Ave  
 LEGAL DISCRPTION: 1/4, 1/4, Sec. 21, T 29 N, R 12 W  
 TOWNSHIP/MUNICIPALITY: Tainter  
 COUNTY: Dunn Lot 41, TN TA Assessor's Plat #1

Huffcutt 3000 LP holding tank  
 Tank exterior =  $161.5'' \times 92'' \times 73.5'' / (12'' \times 12'' \times 12'') = 631.98 \text{ ft}^3$   
 Tank weighs 22,000 lbs w/ cover  
 Anchoring requires:  $1.5 \times 631.98 \times 62.4 - 22,000 = 37,153.3 \text{ lbs}$   
 Top tank surface =  $[165'' \times 92'' / (12'' \times 12'')] = 105.42 \text{ ft}^2$   
 3.25' soil backfill @ nominal  $110 \text{ lb/ft}^3 = 3.25 \text{ ft} \times 105.42 \text{ ft}^2 \times 110 \text{ lb/ft}^3 = 37,687.6 \text{ lb anchor}$

### **Holding Tank Maintenance Information**

As a condition of plan approval, a copy of these plans must be given to the owner and this information reviewed with the owner.

The capacity of this system's holding tank is 3000 gallons. Under Wisconsin average use conditions of nominally 50 gallons per person per day, the tank will become full after about 30 days of use by two people. Water conservation measures including the use of low flow water fixtures will extend this time frame and are recommended.

A water meter must be installed on the potable water service to this residence. The holding tank is equipped with an alarm which is installed 12 inches below the maximum water level of the tank. The alarm will function when about 654 gallons of capacity remain; this is about six days of average flow for two people. At this time a licensed septic pumper must be called to pump the tank before maximum capacity is reached. Septage disposal will be by approved methods according to the Holding Tank Servicing Agreement filed with the county permit application for this system.

The licensed pumper is required to submit a report to the county within ten days of any servicing - such as pumping - of this system.

Any questions regarding the performance of this system may be referred to the installing plumbing contractor, ABC Sewer, at 715-665-2112, or to the Dunn County Zoning Office at 715-232-1401.

# HOLDING TANK SERVICING CONTRACT

Contract Date

4-3-05

This contract is made between the

Holding Tank Owner(s) Name(s)

and

Pumper's Name

WARREN + DAISY TURNER

ABC SEPTIC

We acknowledge the installation of (a) holding tank(s) on the following property: (Provide legal descriptions:)

Ac 21 TOWN R12 W LOT 41

Town of Tainter Assessors Plat #1

1. The owner agrees to file a copy of this contract with the local governmental unit that has signed the pumping agreement required in Ch. ILHR 83.18(4) (b), Wis. Adm. Code and with the County of DVNN.
2. The owner agrees to have the holding tank(s) serviced by the pumper and guarantees to permit the pumper to have access and to enter upon the property for the purpose of servicing the holding tank(s). The owner agrees to maintain the access road or drive so that the pumper can service the holding tank(s) with the pumping equipment. The owner further agrees to pay the pumper for all charges incurred in servicing the holding tank(s) as mutually agreed upon by the owner and pumper.
3. The pumper agrees to submit to the local governmental unit which has signed the pumping agreement required by s. ILHR 83.18 (4) (b), Wis. Adm. Code, and to the County, a report for the servicing of the holding tank(s) on a semiannual basis. The pumper further agrees to include the following in the semiannual report:
  - a. The name and address of the person responsible for servicing the holding tank;
  - b. The name of the owner of the holding tank;
  - c. The location of the property on which the holding tank is installed;
  - d. The sanitary permit number issued for the holding tank;
  - e. The dates on which the holding tank was serviced;
  - f. The volumes in gallons of the contents pumped from the holding tank for each servicing;
  - g. The disposal sites to which the contents from the holding tank were delivered.
4. This agreement will remain in effect until the owner or pumper terminates this contract. In the event of a change in this contract, the owner agrees to file a copy of any changes to this service contract or a copy of a new service contract with the local governmental unit and the County named above within ten (10) business days from the date of change to this service contract.

Owner(s) Name(s) (Print)

WARREN + DAISY  
TURNER

Owner's Signature(s)

*Daisy Turner*

Subscribed and sworn to me on this date:

4-5-05

Today's Date

Pumper's Name (Print)

TIM MITTLESTADT

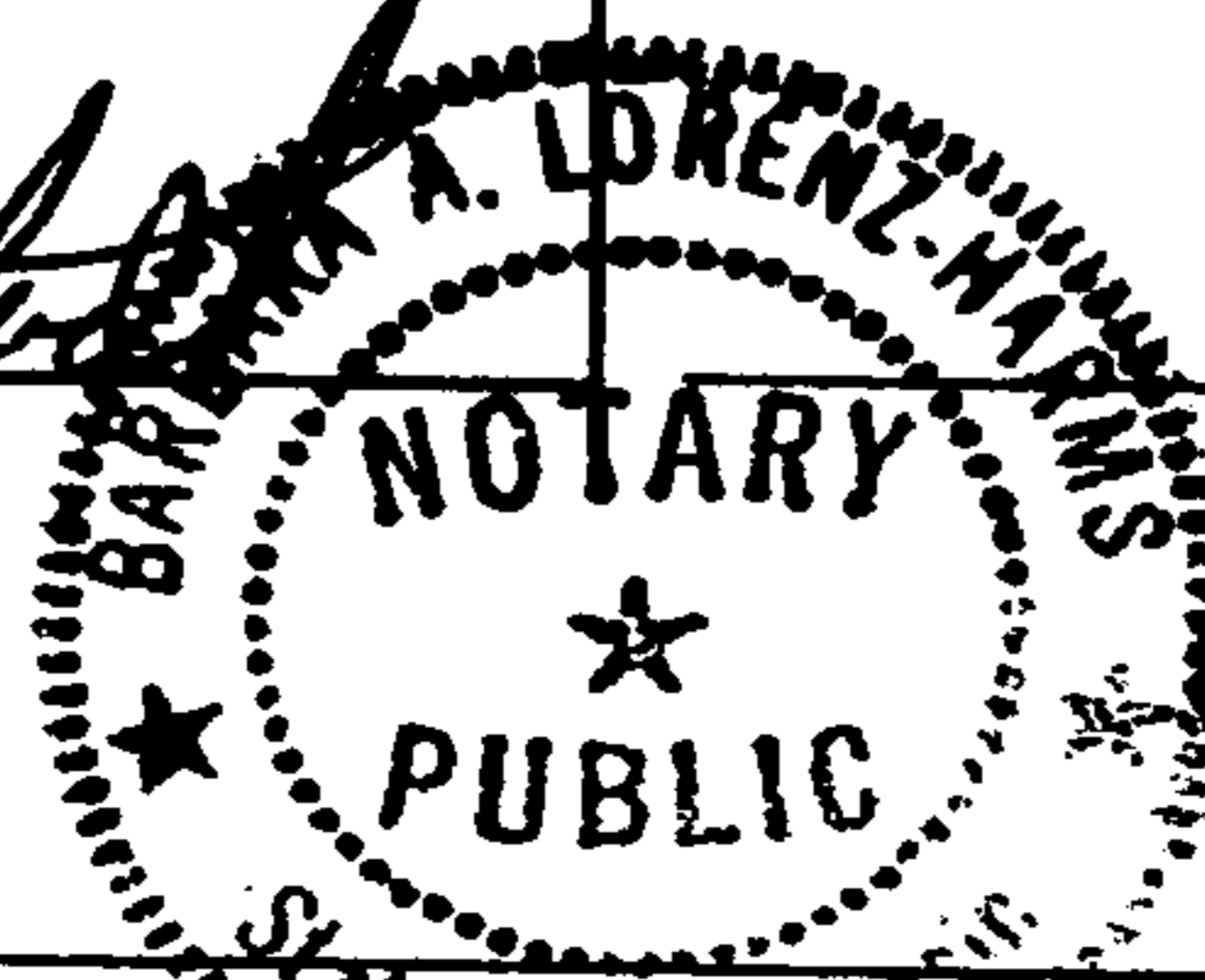
Pumper's Registration Number

79

Pumper's Signature

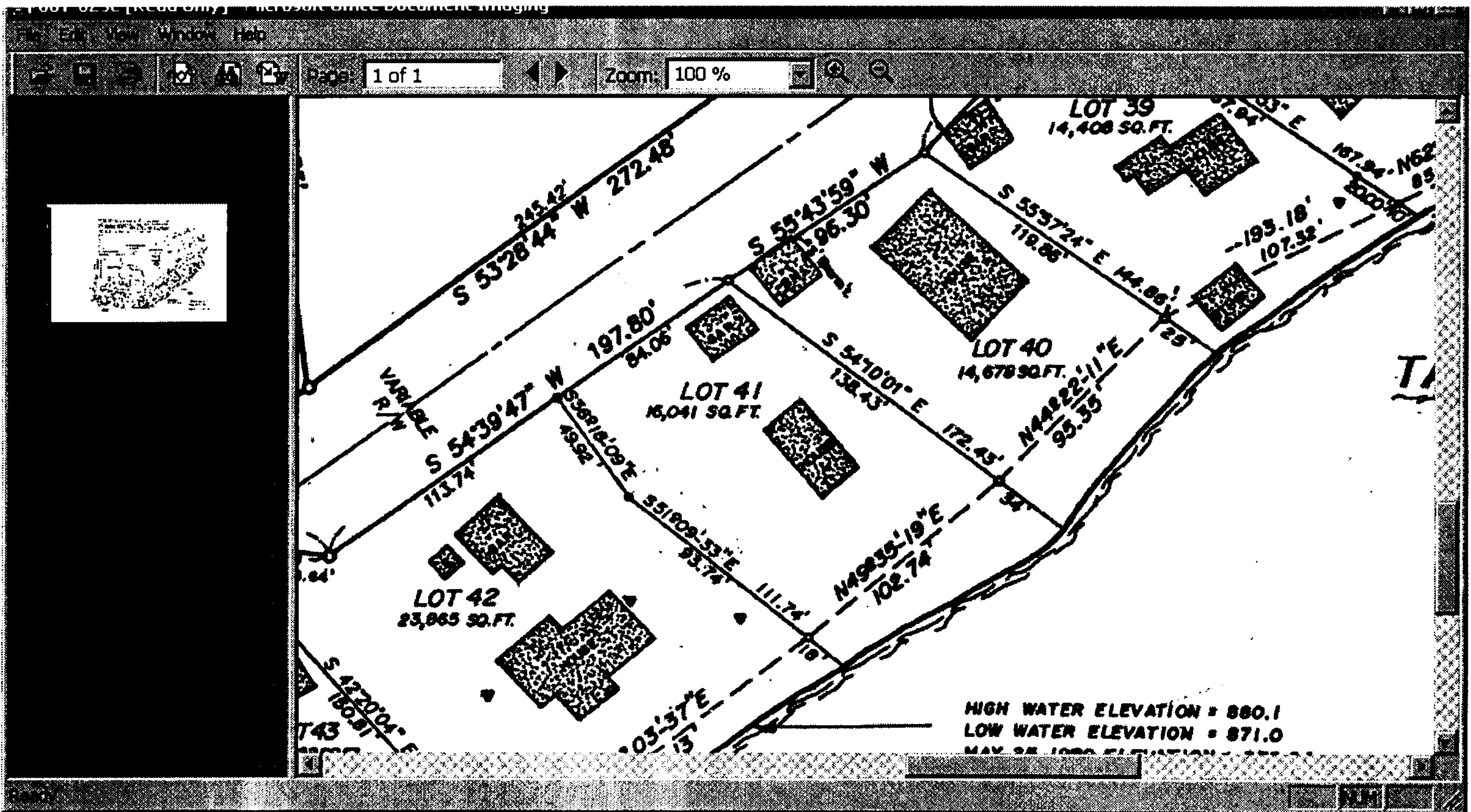
*Warren J. Turner*

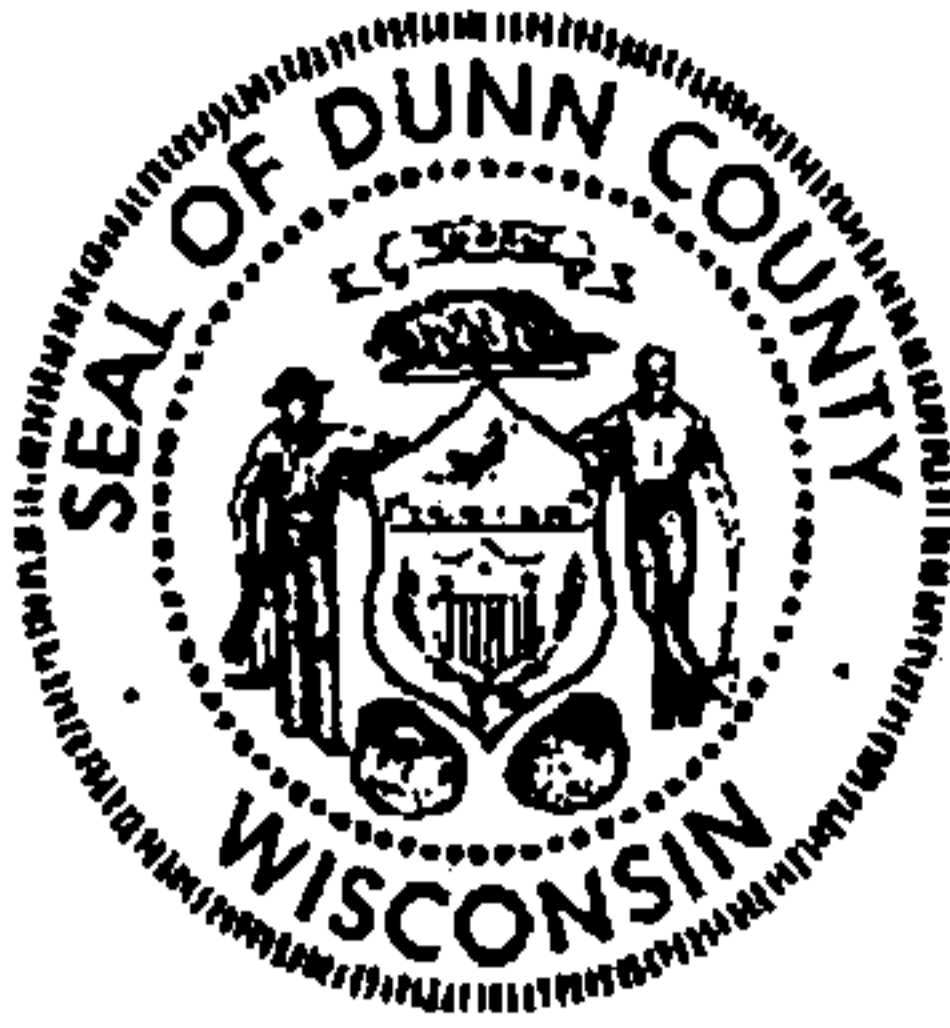
*Barbara A. Lundberg*  
Notary Public Signature



June 10 - 2007  
Commission Expiration

Drafted by \_\_\_\_\_





COUNTY OF DUNN  
Dunn County Zoning Office  
800 Wilson Avenue  
Menomonie, Wisconsin 54751

Telephone (715) 232-1401

FAX: (715) 232-4099

June 28, 2005

Warren Turner  
E6154 848<sup>th</sup> Ave.  
Colfax, WI 54730

RE: Parcel described as part of the G. L. 2, Section 21, T29N-R12W  
Town of TAINTER, Dunn County, Wisconsin

Septic system installation address/fire number is – E6154 848<sup>th</sup> Ave..

Recently, a new or replacement on-site waste disposal system was installed on a parcel described above. This installation was inspected for code compliance and the inspection report together with the installing plumbers original forms are on permanent file with this office.

Wisconsin Statutes (ss 145.245(3)) requires maintenance of the septic tank for sludge content every three years. You, or the subsequent owner of this property will be notified in the spring/summer of 2008 to perform maintenance on this system. This maintenance requirement will involve pumping of the septic tank by a licensed septic tank pumper, or an inspection which verifies no pumping is required at this time. This notification of maintenance will follow every three years thereafter. This maintenance requirement is binding on all successors and assigns of this parcel. As the present owner, you are asked to disclose this requirement to the new owner(s) prior to sale.

The purpose of this maintenance requirement is to avoid premature failure of the private sewage system. A failed system presents a very serious environmental health risk to you and others.

If you have any question about this maintenance program, please do not hesitate to contact this office.

Sincerely,

Michael Helgeson

Michael Helgeson  
Zoning Administrator

MH/jr