

AGENDA

**THE AITKIN COUNTY PLANNING COMMISSION WILL ASSEMBLE FOR A HEARING ON
AUGUST 18, 2025 AT 4:00 P.M.
IN THE BOARD ROOM OF THE AITKIN COUNTY GOVERNMENT CENTER (THIRD FLOOR)
307 SECOND STREET NW, AITKIN, MINNESOTA 56431
THE FOLLOWING ITEMS WILL BE REVIEWED:**

- 1. Call the meeting to order.**
- 2. Roll call.**
- 3. Approval of Agenda.**

NEW BUSINESS:

- 4. RBK Ventures LLC, PO Box 293, Milaca, MN 56353** Requesting an Interim Use Permit to operate a Vacation/Short Term Rental in an area zoned Shoreland (Diamond Lake). LOT 5 BLK 1, INCE DIAMOND LAKE SUBDIVISION SECTION THIRTEEN (13), TOWNSHIP FORTY-SIX (46), RANGE TWENTY-SEVEN (27), Aitkin County, Minnesota.
APP# 2025-000521

- 5. Approval of Minutes, JULY 21, 2025 Planning Commission Meeting.**
- 6. Adjourn.**

For more information, visit www.co.aitkin.mn.us/departments/env/
or contact Planning & Zoning at 218-927-7342 or aitkinpz@aitkincountymn.gov

AITKIN COUNTY ZONING



Vacation/Short-Term Rental App. # 2025-000521, UID # 214304
App. Status: Pending Review

Aitkin County Planning & Zoning / Environmental Services
307 Second St. NW Room 219, Aitkin, MN 56431
Email: aitkinpz@aitkincountymn.gov
Phone: 218-927-7342
Fax: 218-927-4372

Applicant

Applicant Contact Information:	<div>Name:</div> <div>RBK Ventures LLC</div> <div>Phone:</div> <div>(320) 250 - 4122</div> <div>Email Address:</div> <div>rbkventures25@gmail.com</div> <div>Mailing Address:</div> <div>PO Box 293</div> <div>Milaca MN 56353</div>
Are you the property owner?	<u>Yes</u>

60 Minute Contact Person

Enter Designated Contact Person:	<div>Name:</div> <div>Robert (Property Management)</div> <div>Phone:</div> <div>(320) 999 - 0020</div> <div>Email Address:</div> <div>rbkventures25@gmail.com</div> <div>Mailing Address:</div> <div>PO Box 293</div> <div>Milaca MN 56353</div>
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Property Location

Property Information:	Property Location								Property Attributes	
	Parcel Number	Property Address	Township or City Name	Owner Name(s)	Taxpayer Name(s)	Legal Description	Plat Name	Section-Township-Range	Lake Class	Lake Name
	07-1-130400	31057 402nd PI AITKIN, MN 56431	FARM ISLAND TWP	RBK VENTURES LLC	RBK VENTURES LLC	LOT 5 BLK 1	INCE DIAMOND LAKE SUBDIVISION	S:13 T:46 R:27	RD	DIAMOND LAKE

Brief Narrative

Brief Narrative:	Short Term rental of home on diamond lake in aitkin county.		
List all current advertising sources: (Be specific and include website links, rental ID #, etc.)	We will be listing on sites such as ABNB and VRBO and any other potential rental platform sites that would allow people to book the home for vacation in. At this time I do not have specifics such as rental id, website links ect because we are applying for our license and have not tried to promote it or rent it at this time because we are waiting to get the proper permit.		
Proposed number of overnight guests:	8		
How many rental units will be located on this parcel?	1		
Will you be renting for periods less than one week?	<u>Yes</u>		
Quiet hours will begin at:	10	: 00	<u>PM</u>
Quiet hours will end at:	08	: 00	<u>AM</u>

Floor Plan

1. How many rooms will be used for sleeping?	<u>3</u>
2. How many carbon monoxide alarms are located in the rental?	4
3. How many smoke detector alarms are located in the rental?	5
4. A fire extinguisher must be placed in an easily accessible location within each rental unit. Where is a fire extinguisher located?	under kitchen sink
5. Attach a floor plan of the rental unit(s):	<div>File 1:  rbk_floorplan.pdf</div>

Sleeping Area #1

Name of Room:	1
Room Size (Excluding closet or attached bathroom):	103 ft ²
Number of Guests:	2
Select egress window style. (see attached diagram for egress window classifications and requirements):	<u>Casement</u>
Was this window installed before July 10, 2007?	<u>No</u>
What is the distance from the floor to the bottom of this window (finished sill):	35.5 inches
What is the OPENABLE height of this window:	42 inches
What is the OPENABLE width of this window:	24 inches

Sleeping Area #2

Name of Room:	master
Number of Guests:	2
Room Size (Excluding closet or attached bathroom):	173 ft ²
Select window style. (see attached diagram for window style options):	<u>Casement</u>
Was this window installed before July 10, 2007?	<u>No</u>
What is the distance from the floor to the bottom of this window (finished sill)?	29.75 inches
What is the OPENABLE height of this window?	42 inches
What is the OPENABLE width of this window?	24 inches

Sleeping Area #3

Name of Room:	loft
Number of Guests:	4
Room Size (Excluding closet or attached bathroom):	348 ft ²
Select window style. (see attached diagram for window style options):	<u>Casement</u>
Was this window installed before July 10, 2007?	<u>No</u>
What is the distance form the floor to the bottom of this window (finished sill)?	36 inches
What is the OPENABLE height of this window?	42 inches
What is the OPENABLE width of this window?	24 inches

Guest Information

Select all that will be included in your guest handbook:	<u>Quiet hours</u> <u>Maximum # of overnight guests</u> <u>Maximum # of non-overnight guests</u> <u>Name & contact information for owner and/or caretaker</u> <u>Property rules related to outdoor features</u> <u>List of conditions placed on the approved IUP</u> <u>A current handbook on recreational vehicle regulations</u> <u>Notice that all ordinances and IUP conditions will be enforced by the Aitkin County Sheriff's Office and Aitkin County Environmental Services</u> <u>(On lakes only) Information and map with DNR public access location</u>
Where in the rental will your handbook will be located?	dining table
Where in the rental will the emergency contact information be posted?	on fridge in kitchen

Pet Policy

Pet Policy:	no pets
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Garbage Disposal Plan

How often will the garbage be collected?	per garrison disposal schedule
Enter the name of the garbage service or describe your disposal plan:	garrison disposal, garbage will be picked up per their schedule

Water & Septic Requirements

Attach Water Test:	<div>File 1: ↓ WATER_TEST_AITKIN.pdf File 2: ↓ water_test_state.pdf</div>
Attach septic compliance:	<div>↓ COC - _31057_402nd_PLace.pdf</div>
The septic system or well shall include a flow measuring device. Flow measurement readings and monitoring of the septic shall be recorded monthly and made available to Aitkin County. Has a flow meter or event counter been installed on the well or septic system?	<div>Yes</div>
Is the septic system holding tanks (no drainfield)? If yes, the application for an Operating Permit will begin after you click Finish.	<div>Yes</div>

Property Deed

Attach the property deed:	<div>File 1: ↓ DEED.pdf</div>
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Scaled Site Plan

Attach your scaled site plan:	<div>File 1: ↓ plat_drawing.pdf</div>
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Terms

Interior & Exterior Inspection

After your submitted application is accepted by Environmental Services, a staff member will contact you to schedule an interior inspection to verify the information provided in your application. It is the responsibility of the applicant to have the following in place prior to the inspection:

1. Smoke alarms and carbon monoxide alarms installed per MN State Fire Code

2. Fire extinguishers are in their designated places and meeting MN State Fire Code

3. Flow-measuring device installed on the septic system or well

4. Visual demarcations of the property lines

General Terms

The landowner or authorized agent may make application for a zoning permit agreeing to do such work in accordance with all Aitkin County Ordinances. The landowner or authorized agent agrees that the application, site plan, and all other attachments submitted herewith are true and accurate and shall become a part of the permit. The landowner or authorized agent agrees that, in making application for a zoning permit, the landowner grants permission to Aitkin County, at reasonable times, to enter the property to determine compliance of the application with applicable Local, County, State, or Federal Ordinances or Statutes.
IT IS THE APPLICANTS SOLE RESPONSIBILITY TO CONTACT OTHER LOCAL, COUNTY, STATE, OR FEDERAL AGENGIES TO ENSURE THE APPLICANT HAS COMPLIED WITH ALL RELEVANT ORDINANCES OR STATUTES.

Submittal of the above materials does not always constitute a complete application. Other information may be necessary to complete the application based on the type of request and onsite inspection.

I acknowledge that by submitting this application, the application and its attachments are public information.

Invoice #63317 (07/03/2025) Expected Payment Method: Pay Online - Card or ECheck

Charge	Cost	Quantity	Total
Recording Fee added 06/18/2025 4:21 PM This fee is non-refundable if denied.	\$46.00	x 1	\$46.00
Vacation/Private Home Rental added 06/18/2025 4:21 PM This fee is non-refundable if denied.	\$650.00	x 1	\$650.00
Grand Total			
			Total
			\$696.00
			Payment 07/03/2025
			\$696.00
			Due
			\$0.00

Conditions of Permit

None

Approvals

Approval	Signature
Applicant	robert kelash - 07/03/2025 10:56 AM ee4b3b4293d6498e86003138637cf9b7 27e1741bf28e8c944e294f5760c441aa
#1 Administrative Staff	Shannon Wiebusch - 07/03/2025 3:17 PM 4bf01944587f07353c3793697fcae255 56d183e1e969fda94399fd7fce67f109
#2 Planning Commission	

Public Notes

Text:	<div>To be heard at August 18 PC Meeting.</div> <div>OP 2025-034 issued for holding tank. Remote monitoring system to be installed on tanks upon IUP approval and prior to renting. sw 7/3/25</div>
File(s):	<div>File 1: OP_2025-034.pdf</div> <div>OP_2025-034.pdf</div>

Administrative Staff

This review has been started by:	Shannon Wiebusch
Zoning District:	Shoreland
Is the parcel a Lot of Record before 1-21-92 or have alternate sites been identified?	Yes
Is this an After-The-Fact application?	No
Current SSTs:	Holding Tank(s)

Max Overnight Guests per SSTS:

15

Print View

Form No. 1-M — WARRANTY DEED

Individual(s) to Individual(s)

eCRV: 1770794

DEED TAX DUE: \$1,498.20

Date: June 18th, 2025

FOR VALUABLE CONSIDERATION, Timothy J. Peterson and Patricia M. Peterson, spouses married to each other, Grantor(s), hereby conveys and warrants to RBK Ventures LLC, a Minnesota limited liability company, Grantee,

real property in Aitkin County, Minnesota, described as follows:



See legal description attached hereto

together with all hereditaments and appurtenances belonging thereto, subject to the following exceptions:

conditions, restrictions, reservations, easements and covenants of record, if any.

Check box if applicable:

☐ The Seller certifies that the seller does not know of any wells on the described real property

☒ A well disclosure certificate accompanies this document OR has been electronically filed. WDC No.: 1089717

☐ I am familiar with the property described in this instrument and I certify that the status and number of wells on the described real property have not changed since the last previously filed well disclosure certificate.

Timothy J. Peterson
Timothy J. Peterson
Patricia M. Peterson
Patricia M. Peterson

STATE OF Idaho
COUNTY OF Kootenai } ss.

The instrument was acknowledged before me on June 10th, 2025, by Timothy J. Peterson and Patricia M. Peterson, spouses married to each other.

NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK):

JUSTIN HUNTER
Notary Public - State of Idaho
Commission Number 60361
My Commission Expires Sep 28, 2030

[Signature]
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL

Check here if part or all of the land is Registered (Torrens) ☐

Tax Statements for the real property described in this instrument should be sent to (include name and address of Grantee):

THIS INSTRUMENT WAS DRAFTED BY:
Home Security Abstract & Title Company
1012 5th Street SE
Milaca, MN 56353

File Number: M-19743

RB K Ventures LLC
16975 155th Ave NE
Foley, MN 56329

Legal Description

→ Lot 5, Block 1, Ince Diamond Lake Subdivision, according to the plat thereof on file and of record in the office of the County Recorder, Aitkin County, Minnesota.

CRV Filed
No Delinquent Taxes and Transfer Entered
Kathleen Ryan, County Auditor
State Deed Tax Paid
Lori Grams, County Treasurer

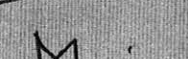
Doc No: **A487656**
Certified Filed and/or Recorded on
6/12/2025 1:46 PM
Office of the County Recorder
Aitkin County, Minnesota
Tara Snyder, County Recorder
Package: **96980** Kay

WAD 1/1
REC FEE \$46.00
SDT \$1498.20
eCRV # 1770794
WC RCVD \$50.00
WC # 1089717

AFF 487693

This cover sheet was added by the Aitkin County Recorder's Office to allow space for the recording information of this document. It is not intended to alter the document/certified copy.

This cover sheet is now a permanent part of the recorded document.



Main Level

VERIFY ALL WDN ROUGH OPENINGS

[illegible]

RED R.M.
2x10" 16 OC OR
1x12" JOISTS
16" OC

GREAT ROOM

Coverd porch/Deck

Patio door
2-1-10

Main Level

Bed RM
24'0" x 10'0" OR
2x12" JOISTS
16" C

GREAT ROOM
12'0" x 12'0"

Kitchen
9'0" x 11'0"
SINK
REF
NO Dishwasher

Bathroom
5'0" x 7'0"
TOILET
SINK
MIRROR

Staircase
UP 2R
UP 12R
DOWN 12R

Fireplace
FIRE SHIELD
WOOD STOVE

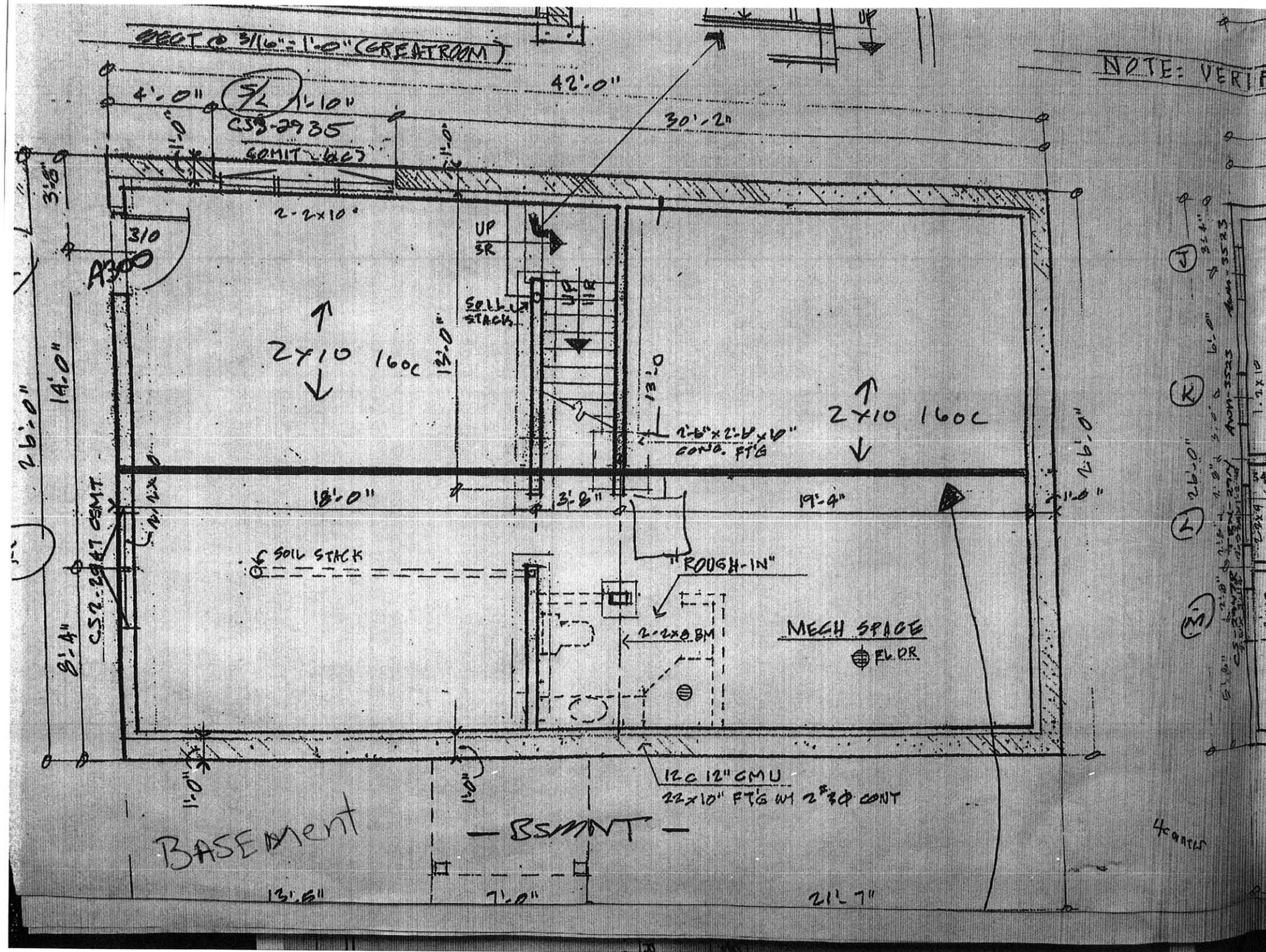
Patio door
2'0" x 10'0"

Covered Porch/Deck
12'0" x 6'0"

Construction Notes:
VERIFY ALL WDN ROUGH OPENINGS
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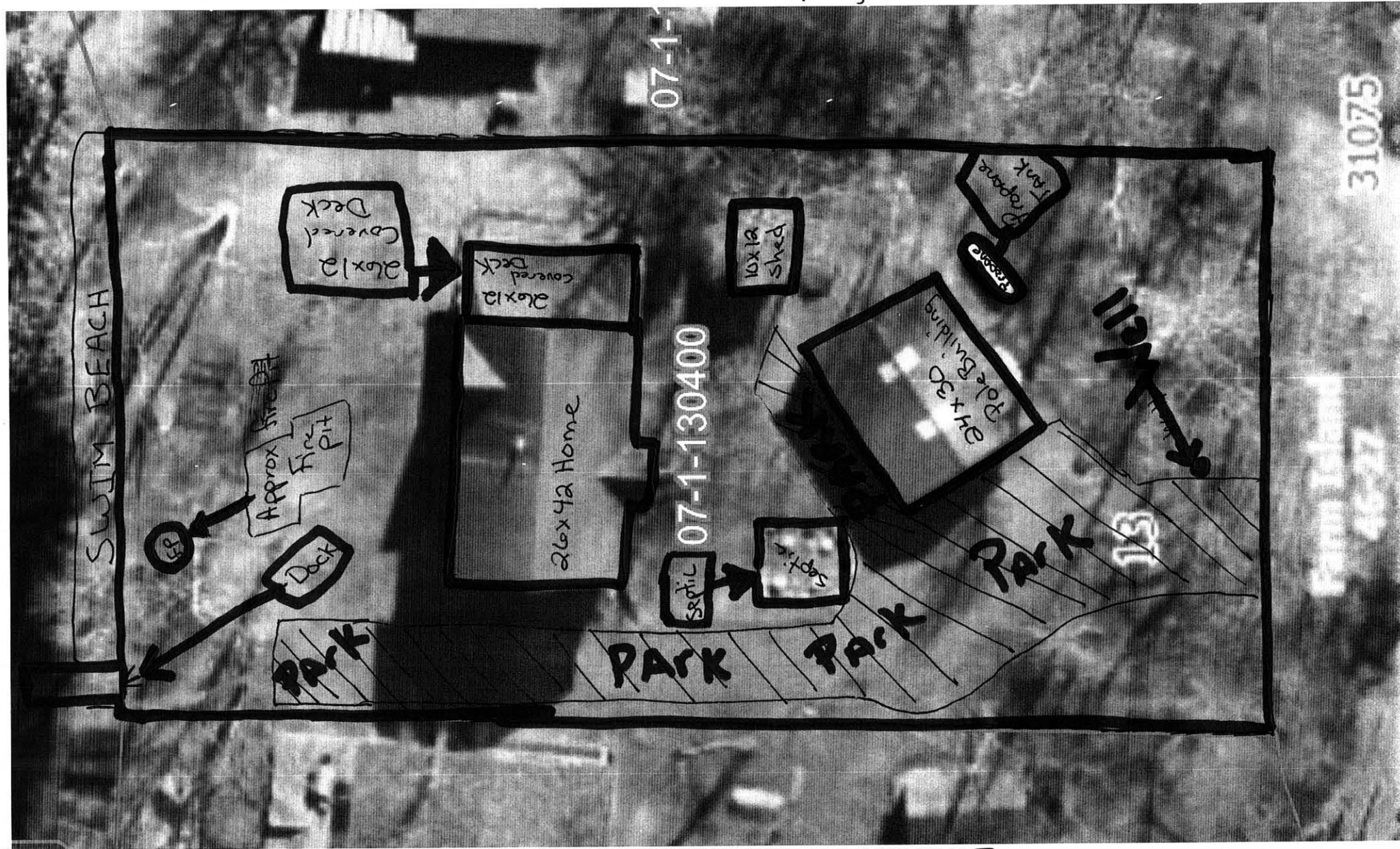
$$\frac{1}{16} = 1^{-1}$$



NOTE: VERIFY ALL WDN ROUGH OPENINGS



- North property line 100.5 ft
- East Property line 200.98 ft

South property Line Approx 100.5 ft
West Property Line 205.93 ft



key  = Parking Area = Approx 2100 sq feet

Analysis Report
June 27, 2025

REPORT TO:

RBK Ventures LLC
31057 - 402nd Place
Aitkin MN 56431

INVOICE TO:

Date Rcvd-Brnd: 6/26/2025
Time Rcvd-Brnd: 15:49

Sampled By: Brandee Kelash
Sample Type: DW
Recv Temp°C: 2.9 on ice
TYPE: Well Water

LOCATION:
RBK Ventures LLC
31057 - 402nd Place
Aitkin MN 56431

SITE / TEST PERFORMED	Sample Date/Time	Your Result	Units	Acceptable Level	Analytical Method	Analysis Date/Time	Analyst	Code #
Kitchen Tap	6/25/2025 @ 14:40							
Coliform, Total		ABSENT	/100mL	ABSENT	SM 9223 B (COLISURE)-2016	6/26/25 16:20	BS	112822
Eschericha coli (E. coli)		ABSENT	/100mL	ABSENT	SM 9223 B (COLISURE)-2016	6/26/25 16:20	BS	112822
Nitrate, as N		< 0.500	mg/L	< 10	EPA 353.2 REV 2.0	6/26/25 16:42	ZP	112822

Sample 112822: Your results meet State of Minnesota and EPA drinking water standards for the analytes tested. If you would like additional information, please use the Results Interpretation Tool on our website at awlab.com.

Approved By: 
Sara Ahlers, Laboratory Director

Date Approved: 6/27/2025

A.W. Research Laboratories, Inc. is accredited by the MNELAP and follows approved methods and procedures. MN State Laboratory ID: 027-035-135 and EPA Lab Code: MN00098. All data generated using non-accredited methods noted as -NC, and all analytes for which accreditation is unavailable -NA. The results above relate only to the samples tested. This report must not be reproduced, except in full, without the written approval of the laboratory. We appreciate your feedback, please email us at awlab@awlab.com with questions or comments. Thank you!

-End of Analysis Report-



AITKIN COUNTY ENVIRONMENTAL SERVICES
307 2nd St NW, Room 219
Aitkin, MN 56431
TELEPHONE: (218) 927-7342
FAX: (218) 927-4372



Water Analysis Report
Aitkin County Environmental Services Water Lab
Wednesday, June 11, 2025

Report To:
Timothy Peterson
31057 402nd Place
Aitkin, MN 56431

Sample #: 2025054

Date Collected: 06/10/2025
Time Collected: 9:30 AM

Collected by: Robert Kelash
Source: Kitchen Faucet
Temp Received: <46°F

Sample Location:
Timothy Peterson
31057 402nd Place
Aitkin, MN 56431

Test Performed	Your Results	Units	Acceptable Level	Analytical Method	Analyst	Analysis Date/ Time
Nitrate Nitrogen	< 1.00	mg/L	< 10	E004	BA	6/10/25 3:15 PM
Coliform	Absent	—	Absent	SCC1	BA	6/10/25 3:30 PM & 6/11/25 3:30 PM
E. Coli	Absent	—	Absent	E009	BA	6/10/25 3:30 PM & 6/11/25 3:30 PM

Results approved by Andrew Carlstrom, Environmental Services Director

Samples received at temperatures above 46°F that were received more than 20 minutes after the sample was collected will have the nitrate-nitrogen results estimated. Bacteria and nitrate-nitrogen tested per SM 9223B 20th Ed. and SM 4500-NO3 D 20th Ed. This lab utilizes NELAC Standard 2003 practices. This report must not be reproduced except in full without written approval from this laboratory. These water test results are public information.

End of Water Analysis Report



Septic System Compliance Inspection – Existing System

Date: 6/25/2025

Property Owner: RBK Ventures, LLC

Ordered By: Rob

Address: 31057 402nd Pl Aitkin, MN 56431

Property ID: 07-1-130400

Inspector: Tim Woodrow

A compliance inspection was performed at the above location. The holding tanks were pumped and inspected. This onsite system was found to be **Compliant.**

- **Impact On Public Health:**
System is Compliant
- **Tank Integrity:**
Tank(s) are compliant
- **Other Compliance Conditions:**
None
- **Soil Separation**
NA
- **Operating Permit and Nitrogen BMP**
NA

I have included a copy of the compliance documents for your record. I have also sent a copy to Aitkin County for their records. If you have any questions, please do not hesitate to give us a call.

Thanks!

Tim Woodrow

Owner

218-927-6175



DISCLAIMER:

The septic system inspection conducted for this property meets MPCA requirements for existing systems.

We recommend this system to be serviced and evaluated at least every 36 months by a septic professional.

Any additions to the home or increased use of the home may require an increase in system capacity.

1. Compliance Requirements evaluated as part of this inspection include the verification that the system tanks do not leak below the designed operating depth, the required separation between the bottom of the subsurface distribution medium and the seasonally saturated soils if applicable, no discharge of septage/effluent to the ground surface or surface water and no imminent safety hazards exist. Timber Lakes Septic Inc does not inspect interior pumps, plumbing, or associated components.
2. Certification of this system does not warranty future use beyond the date of inspection. Any system, new or old, can be hydraulically overloaded and discharge to ground surface as a result of increase use (more people in house, faulty plumbing fixtures, change in habits, groundwater infiltration etc), improper maintenance, tree roots, freezing conditions, surface drainage problems, etc. The system can also stop working simply due to its age. The life expectancy of a system is variable and dependent upon the items previously listed. Proper maintenance and water conservation will help contribute to a longer system life.
3. A compliance inspection is not meant to be a test or inspection of longevity of the system. A compliance inspection is for the purpose of verifying if the system is protective of public health and safety as well as protecting the ground water at the date and time the inspection was performed. This inspection is not intended to determine if the system was originally designed or installed to past or present MPCA/Local Government Unit Code requirements. This inspection is not intended to determine if the system was designed and/or installed to support the anticipated flow from buildings as the use of the buildings may have changed since the original design was completed. These changes may include additional bedrooms, occupants, increased use, etc. In addition, this inspection is not intended to determine the quality of the original system design, quality of the construction practices during installation, or quality of materials used.
4. Timber Lakes Septic Inc. has not been retained to warranty, guarantee, or certify the proper functioning of the ISTS system for any period of time beyond the date of inspection or into the future. There are numerous factors which may affect the proper operation of a ISTS System and the inability of Timber Lakes Septic to supervise or monitor the use or maintenance of the ISTS System, the Compliance Report shall not be construed as a warranty or guarantee of future system performance.
5. By accepting this report, the client understands that Timber Lakes Septic will not be responsible for any monetary damages exceeding the fee for services provided.
6. This Report is prepared for the person or rep of the person providing payment for the fees charged.

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: 07-1-130400 Reason for Inspection Transfer
Local regulatory authority info: Aitkin County
Property address: 31057 402nd Pl Aitkin, MN 56431
Owner/representative: Rob Owner's phone: 320-250-4122
Brief system description: 2x1500 holding tanks

System status

System status on date (mm/dd/yyyy): 6/25/2025☒ **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

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: Timber Lakes Septic Service Certification number: C7644
Inspector signature: Tim Woodrow License number: L455
(This document has been electronically signed) Phone: 218-927-6175

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: 31057 402nd PI Aitkin, MN 56431

Business Name: Timber Lakes Septic Service

Date: 6/25/2025

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:

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:

Attached supporting documentation:

☐ Empty tank(s) viewed by inspector

Name of maintenance business: _____

License number of maintenance business: _____

Date of maintenance: _____

☒ Existing tank integrity assessment (Attach)

Date of maintenance (mm/dd/yyyy):

6/17/25

(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: 31057 402nd Pl Aitkin, MN 56431

Business Name: Timber Lakes Septic Service

Date: 6/25/2025

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:

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: 31057 402nd PI Aitkin, MN 56431

Business Name: Timber Lakes Septic Service

Date: 6/25/2025

5. Soil separation – Compliance component #5 of 5

Date of installation 5/22/2008 ☐ 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.

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

Describe verification methods and results:

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.

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.

Sewage tank integrity assessment form

Subsurface Sewage Treatment Systems (SSTS) Program

Doc Type: Compliance and Enforcement

Purpose: This form *may* be used to certify the compliance status of the sewage tank components of the SSTS. **This form is not a complete SSTS inspection report, only a tank integrity assessment, and may only certify sewage tank compliance status when entirely completed and signed by a qualified professional.** SSTS compliance inspection report forms can be found at: <https://www.pca.state.mn.us/water/inspections>.

Instructions: This form may be completed, and signed, by a Designated Certified Individual (DCI) of a licensed SSTS inspection, maintenance, installation, or service provider business who personally conducts the necessary procedures to assess the compliance status of each sewage tank in the system. Only a licensed maintenance business is authorized to pump the tank for assessment. A copy of this information should be submitted to the system owner and be maintained by the licensed SSTS business for a period of five (5) years from the assessment date.

When this form is signed by a qualified certified professional, it becomes *necessary supporting documentation* to an Existing System Compliance Inspection Report: Compliance inspection form - Existing system (wq-wwists4-31b). This form can be found on the MPCA website at <https://www.pca.state.mn.us/water/inspections>.

The information and certified statement on this form is **required** when existing septic tank compliance status is determined by an individual other than the SSTS Inspector that submits an inspection report. This form represents a third party assessment of SSTS component compliance and is allowable under Minn. R. 7082.0700, subp. 4(B)(1). This form is valid for a period of three years beyond the signature date on this form unless a new evaluation is requested by the owner or owner's agent or is required according to local regulations. Additional Administrative Rule references for this activity can be found at Minn. R. 7082.0700, subp. 4(B),(C), and (D) and; Minn. R. 7083.0730(C).

Owner information

Owner/Representative RBK VENTURES LLC: Rob - RepProperty address: 31057 402nd PI, Aitkin, MN 56431Local Regulatory Authority: Aitkin CountyParcel ID: 07-1-130400

System status

System status on date (mm/dd/yyyy): 6/17/2025☒ **Certificate of sewage tank compliance**☐ **Notice of sewage tank non-compliance**

Compliance criteria:

The SSTS has a seepage pit, cesspool, drywell, leaching pit, or other pit - **"Failure to Protect Groundwater."**☐ Yes* ☒ NoThe SSTS has a sewage tank that leaks below the designed operating depth - **"Failure to Protect Groundwater."**☐ Yes* ☒ NoThe SSTS presents a threat to public safety by reason of structurally unsound (damaged, cracked, or weak) maintenance hole cover(s) or lids or any other unsafe condition - **"Imminent Threat to Public Health or Safety."**☐ Yes* ☒ No

Any "yes" answer above indicates sewage tank non-compliance.

Company information

Company name: Timber Lakes Septic Service IncBusiness license number: L455

Designated Certified Individual (DCI) information

Print name: Dave PoreeCertification number: C10184

I personally conducted the work described above as a Designated Certified Individual of a Minnesota-licensed SSTS inspection, maintenance, installation, or service provider Business. I personally conducted the necessary procedures to assess the compliance status of each sewage tank in this SSTS.

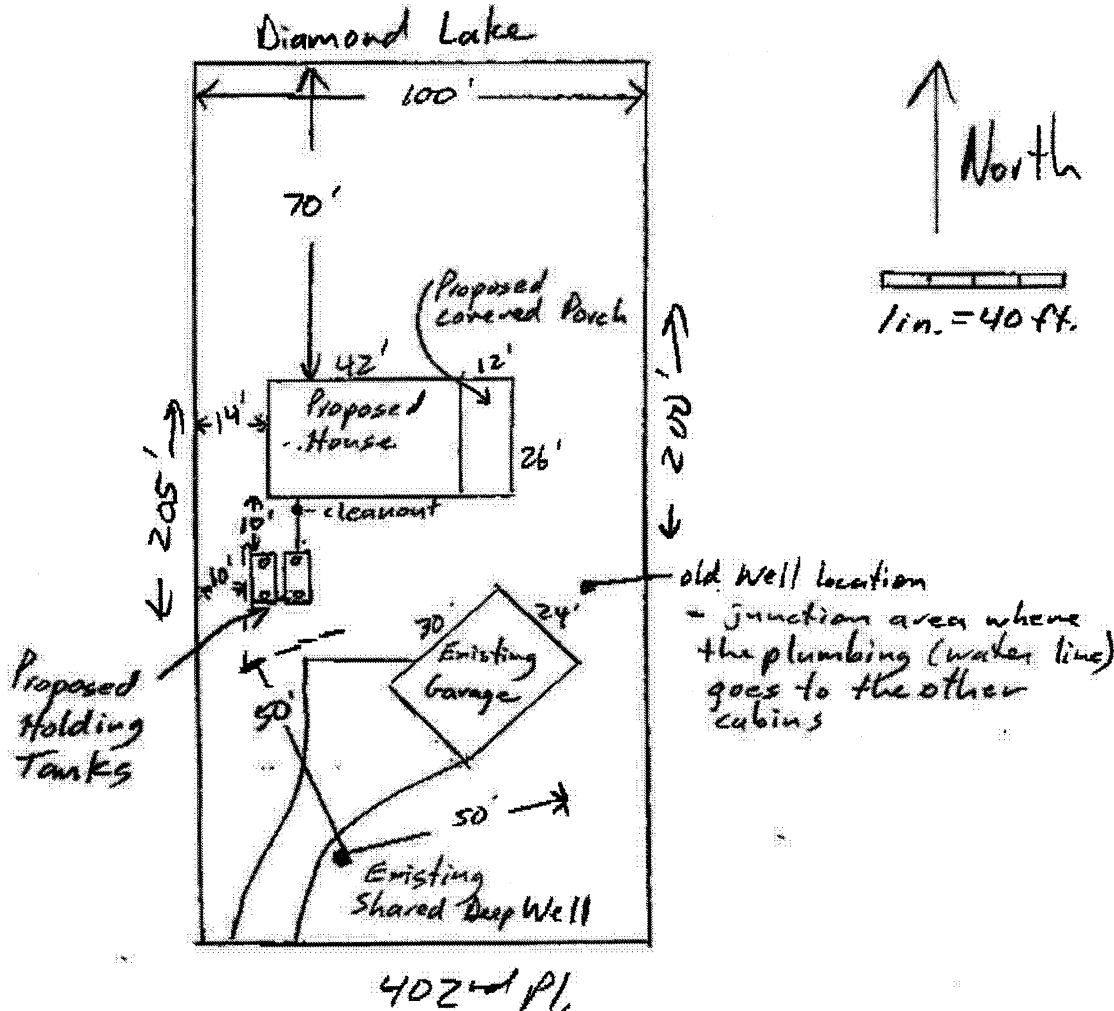
By typing/signing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

Designated Certified Individual's signature: Dave Poree*(This document has been electronically signed.)*Date (mm/dd/yyyy): 6/17/2025

Aitkin County Planning and Zoning Site Sketch for Septic System

Property Owner: Tim PetersenDate: 9/13/07

07-1-130400 Lot 5 Block 1
31057 402nd Pl. Ince Diamond Lake Subd.

**Show Existing or Proposed:**

Water Wells within 100 ft. of drainfield

Water lines within 10 ft. of drainfield

All Drainfield Areas and Boring Locations

Disturbed/Compacted Areas Component Location

OHW as Needed

Lot Easements

Access Route for Tank Maintenance

Property Lines, all Existing and Proposed Structures, all Relative Setbacks

Elevations:

Benchmark Elevation

Pump Elevation

Elevation of Sewer Line at House

Pump Discharge Elevation

Tank Inlet Elevation

Restricting Layer Elevation

Revision A 11 January 11, 2006

Drainfield Elevation

Designer Signature: Marlin JoyceDate: 11/21/07License Number: 2129Page 4 of 5

INDIVIDUAL SEWAGE TREATMENT SYSTEM INSPECTION FORM
AITKIN COUNTY, MINNESOTA

Township Farm Island Date of Inspection 5/21/18 Permit Number 35906
Owner Tim Peterson Parcel Number 07-1-130400
Project Address 16T5 BIKI Inc Diamond Lake Installer D. Chantal
City _____ Zip Code _____ New ☒ Repair ☐

SETBACKS:

Buildings to tank(s) NA
Buildings to drainfield 70'
Well(s) 50' or 100' _____
Lake/Creek/Wetland 175'

SEPTIC TANKS:

Liquid capacity 2-1860 Holding Tanks
Manufacturer & type Ins pre-cast
Type of baffle -
Inspection pipes 3-4" 2-6"
Manholes access 4
No. & height of risers 4-3'

MOUNDS:

Percent slope _____
Upslope dike width _____
Downslope dike width _____
Sideslope dike width _____
Drainfield rock below pipe _____
Depth of sand below rock _____
Perforation size & spacing _____
Pipe size & spacing _____
Dimensions of rock bed _____
Dimensions of sand base _____
Final cover _____

DRAWING OF SYSTEM
(Include Soils)

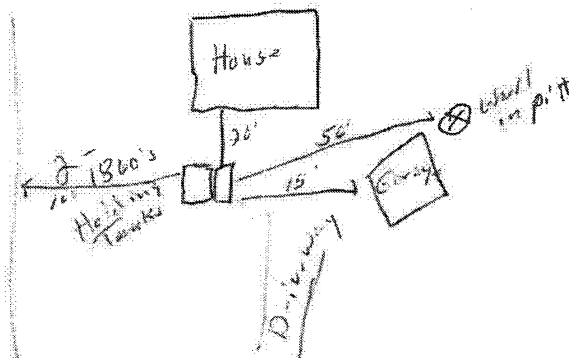
DIST. or DROP BOX & TYPE _____

TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:

Trench depth _____
Trench length _____
Trench bottom width _____
Trench bottom level _____
Trench spacing _____
Drainfield rock below pipe _____
Size of gravelless pipe _____
Depth of backfill _____
Absorption area: square feet _____
lineal feet _____

PUMPS:

Tank capacity _____
Tank manufacturer & type _____
No. & height of risers _____
Pump manufacturer & model # _____
Horsepower & GPM _____
Feet of head _____
Cycles per day _____
Gallons per cycle _____
Size of discharge line _____
Type of electrical hookup _____
Type & location of alarm _____
Cycle counter (commercial) _____



Inspector's Comments _____

Corrective Action Required _____

Inspector's Signature [Signature] Installer's Signature _____

White-County Yellow-Applicant Pink-Installer

Subsurface Sewage Treatment System Operating Permit

PERMITTEE NAME	<u>Robert Kelash/RBK Ventures LLC</u>	OPERATING PERMIT#	<u>OP 2025-034</u>
MAILING ADDRESS	<u>PO box 293, Milaca, MN 56353</u>	APPLICATION #	<u>2025-000523</u>
PROPERTY ADDRESS	<u>31057 402nd PI</u> <u>AITKIN, MN 56431</u>	PARCEL #	<u>07-1-130400</u>
SYSTEM TYPE	<u>Type 2 Holding Tank</u>	DATE ISSUED	<u>2025-07-10</u>
TREATMENT LEVEL	<u>Not Applicable</u>	EXPIRATION DATE	<u>2028-09-30</u>
SYSTEM DESIGN FLOW (GPD)	<u>holding tanks</u>		
RESIDENTIAL/COMMERCIAL	<u>Commercial</u>		

SYSTEM COMPONENTS

(2) 1500 gallon holding tanks that just had its compliance done late June of 2025

SERVICE PROVIDER Timber Lakes Septic Service, Inc.

MONITORING REQUIREMENTS

Parameter	Effluent Limits	Frequency	Location
*Design Flow (gpd)	3000 gallons	Monthly	Water meter

The meter is installed on the water line to measure usage, SEPTIC SYSTEM IS 2 1500 gallon holding tanks installed. Holding tank levels will be monitored by installing a remote monitoring system. When monitoring system identifies holding tank is full Timber Lakes will come out and perform maintenance and remove contents of the tank.

MAINTENANCE REQUIREMENTS

System Component	Maintenance	Frequency

MONITORING PROTOCOL

Any sampling and laboratory testing procedures shall be performed in accordance with the proprietary treatment product's protocol, Standard Methods, and at a Minnesota Department of Health approved laboratory. Results shall be submitted to the permitting authority at: Aitkin County Environmental Services, 307 2nd St NW, Room 219, Aitkin, MN 56431 no later than the expiration date listed.

CONTINGENCY PLAN

In the event the wastewater treatment system does not meet required performance requirements as contained in this operating permit, the owner shall notify Aitkin County Environmental Services within thirty (30) days of receiving non-compliant information. The owner is responsible to obtain the services of a Minnesota Pollution Control Agency (MPCA) licensed Service Provider or other qualified practitioner to complete the required corrective measures

AUTHORIZATION

Aitkin County Environmental Services authorizes the Permittee to operate a wastewater treatment and dispersal system at the address named above in accordance with the requirements of this operating permit, attached Management Plan and contract with the Service Provider/Inspector.

This permit is effective on the issuance date identified above. This permit and the authorization to treat and disperse wastewater shall expire on the expiration date identified above. The Permittee is not authorized to discharge after the above date of expiration. The Permittee shall submit monitoring information on forms as required by Aitkin County Environmental Services no later than thirty (30) days prior to the above date of expiration for operating permit renewal. This permit is not transferable.

The owner is required to obtain the services of a Minnesota Pollution Control Agency (MPCA) licensed and trained: 1) Service Provider or Inspector to provide ongoing system operation, maintenance, and monitoring and 2) Maintainer to pump the system's sewage tanks and components. The owner is responsible to provide the name of the Service Provider or Inspector business prior to the issuance of this operating permit. The owner has secured the services of Timber Lakes Septic Service, Inc. as the Service Provider or Inspector for this system. The Service Provider or Inspector is hereby authorized to provide the required monitoring data and routine maintenance service records to both Aitkin County Environmental Services.

[For systems that generate high strength wastewater, the following items should be added to the operating permit: 'If there is a change of use within the facility (i.e., change in menu, increase in food capacity, change in water use fixtures, etc.), the permittee is required to notify Aitkin County Environmental Services and the Service Provider before any changes occurs. Changes to the facility that could potentially impact performance of the wastewater treatment and dispersal system shall not take place until appropriate evaluation has been completed.']

I hereby certify with my signature as the Permittee that I understand the provisions of the wastewater treatment and dispersal system operating permit including maintenance and monitoring requirements. I agree to indemnify and hold Aitkin County harmless from all loss, damages, costs and charges that may be incurred by the use of this system. If I fail to comply with the provisions of this operation permit, I understand that penalties may be issued. If I sell this property during the life of the permit, I will inform the new owner(s) of the permit requirements and the need to renew the operating permit.

THE OPERATING PERMIT IS HEREBY GRANTED TO:

PERMITTEE	<u>robert kelash</u>	DATE	<u>2025/07/03 11:23 AM</u>
PERMITTING AUTHORITY	<u>Shannon Wiebusch</u>	DATE	<u>2025/07/10 03:35 PM</u>