

## AGENDA

**THE AITKIN COUNTY PLANNING COMMISSION WILL ASSEMBLE FOR A HEARING ON  
FEBRUARY 23, 2026 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. Chang Yang, 34908 455th PI, Aitkin, MN 56431** Requesting renewal of an Interim Use Permit to operate a Vacation/Short-Term Rental, in an area zoned Shoreland (Cedar Lake). LOT 4 OF BLOCK 2 OF THE PLAT OF "EDGEWATER BAY", SECTION THIRTY-ONE (31), TOWNSHIP FORTY-SEVEN (47), RANGE TWENTY-SEVEN (27), Aitkin County, Minnesota.  
**APP# 2025-001051**
- 5. Matthew Noble, 32859 Nuthatch Ave, Aitkin, MN 56431**, Requesting an Interim Use Permit to operate a vacation/short-term rental, in an area zoned Shoreland (Long Lake) .93 AC OF LOT 1 IN DOC 434974, SECTION TEN (10), TOWNSHIP FORTY-SIX (46), RANGE TWENTY-FIVE (25), Aitkin County, Minnesota.  
**APP# 2025-001072**
- 6. Deborah Rudnitski of DC INVESTMENTS MINNESOTA LLC, 11704 Arnold Palmer Trail NE, Blaine, MN 55449**, Requesting renewal of an Interim Use Permit to operate a Vacation/Short-Term Rental, in an area zoned Shoreland (Big Sandy Lake). 1.16 AC OF LOT 3 IN DOC #264790, SECTION NINE (9), TOWNSHIP FORTY-NINE (49), RANGE TWENTY-THREE (23), Aitkin County, Minnesota.  
**APP# 2026-000009**
- 7. Approval of Minutes**, JANUARY 26, 2026 Planning Commission Meeting.
- 8. Adjourn.**

For more information, contact Planning & Zoning at 218-927-7342 or [aitkinpz@aitkincountymn.gov](mailto:aitkinpz@aitkincountymn.gov)

## NOTICE OF HEARING

THE AITKIN COUNTY PLANNING COMMISSION WILL ASSEMBLE FOR A PUBLIC HEARING ON  
FEBRUARY 23, 2026 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 APPLICATIONS WILL BE REVIEWED:

**Chang Yang, 34908 455th PI, Aitkin, MN 56431** Requesting renewal of an Interim Use Permit to operate a Vacation/Short-Term Rental, in an area zoned Shoreland (Cedar Lake). LOT 4 OF BLOCK 2 OF THE PLAT OF "EDGEWATER BAY", SECTION THIRTY-ONE (31), TOWNSHIP FORTY-SEVEN (47), RANGE TWENTY-SEVEN (27), Aitkin County, Minnesota. **APP# 2025-001051**

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More information is available at [www.co.aitkin.mn.us/departments/env/env-planning-commission.php](http://www.co.aitkin.mn.us/departments/env/env-planning-commission.php)  
Please submit written comments, including your name and mailing address, to [aitkinpz@aitkincountymn.gov](mailto:aitkinpz@aitkincountymn.gov)  
Contact Environmental Services/Planning & Zoning with any questions.

## AITKIN COUNTY ZONING



Vacation/Short-Term Rental IUP App. # 2025-001051, UID # 217663

Renewal of [Permit # 2020-6191](#)

App. Status: Pending Review

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

### Applicant

	<p>Name: Chang Yang</p> <p>Phone: [REDACTED]</p> <p>Email Address: [REDACTED]</p> <p>Mailing Address: 34908 455th Pl Aitkin   MN   56431</p>
Applicant Contact Information:	
Are you the property owner?	<u>Yes</u>

### 60 Minute Contact Person

60 Minute Contact Person:	<p>Name: Chang Yang</p> <p>Phone: [REDACTED]</p> <p>Email: [REDACTED]</p>
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## Property Location

**Brief Narrative**

Brief Narrative:	We are required to renew an existing Interim Use Permit to operate a vacation rental at our lake home on Cedar Lake. The capacity is 6 guests (3 bedrooms, 2 bathrooms). We will offer a detailed guest information book which will be placed on the kitchen island prior to guests arriving. The guest information book will include emergency contact numbers, a copy of any conditions placed on the approved Interim Use Permit, local services and businesses, rental agreement, etc.  There is a 1/19 deeded access which guest will not be allowed to use.
List all current advertising sources:	We will advertise through airbnb.com and vrbo.com
Proposed number of overnight guests:	6
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>
The septic system or well will need a flow-measuring device installed. 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?	<u>Yes</u>
Is the septic system holding tanks (no drainfield)? If yes, the application for an Operating Permit will begin after you submit this app.	<u>No</u>
Do you have a blue E911 address sign at your driveway?	<u>No</u>

## Floor Plan

What year was the rental unit built?	1991
How many rooms will be used for sleeping?	<u>3</u>
How many carbon monoxide alarms are located in the rental?	3
How many smoke detector alarms are located in the rental?	6
A fire extinguisher must be placed in an easily accessible location within each rental unit. Where is a fire extinguisher located?	There are two at the property. One is the kitchen fire extinguisher located in the utility closet behind the thermoset. The second is located behind the stairs on the lower level.

## Sleeping Area #1

Name of Room:	Bedroom #1
Room Size (Excluding closet or attached bathroom):	210 ft <sup>2</sup>
Number of Guests:	2
Select egress escape:	<u>Sliding or Side-Hinged Door</u>
Was this window installed before March 31, 2020?	<u>Yes</u>
What is the distance from the floor to the bottom of this window (finished sill):	0 inches
What is the OPENABLE height of this window:	72 inches
What is the OPENABLE width of this window:	33 inches

**Sleeping Area #2**

Name of Room:	Bedroom #2
Number of Guests:	2
Room Size (Excluding closet or attached bathroom):	208 ft <sup>2</sup>
Select egress escape:	<u>Casement</u>
Was this window installed before March 31, 2020?	<u>Yes</u>
What is the distance from the floor to the bottom of this window (finished sill)?	25 inches
What is the OPENABLE height of this window?	48 inches
What is the OPENABLE width of this window?	33 inches

**Sleeping Area #3**

Name of Room:	Bedroom #3
Number of Guests:	2
Room Size (Excluding closet or attached bathroom):	225 ft <sup>2</sup>
Select egress escape:	<u>Casement</u>
Was this window installed before March 31, 2020?	<u>Yes</u>
What is the distance form the floor to the bottom of this window (finished sill)?	28 inches
What is the OPENABLE height of this window?	53 inches
What is the OPENABLE width of this window?	33 inches

## Guest Information Handbook

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 &amp; 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?	Living room coffee table
Where in the rental will the emergency contact information be posted?	Refrigerator

## Pet Policy

Pet Policy:	No pets allowed
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## Garbage Disposal Plan

How often will the garbage be collected?	Weekly on Thursday mornings
Enter the name of the garbage service or describe your disposal plan:	Garrison Disposal

## Supporting Documents

Attach the property deed:	File 1: <a href="#"> 34908_Deed.pdf</a>
Attach Water Test:	File 1: <a href="#"> 2025_Water_Test.pdf</a>
Attach septic Certificate of Compliance:	<a href="#"> 2025_Chang_Yang_Sepic_Inspection_Aitkin_Co.pdf</a>
Attach a floor plan of the rental unit(s):	File 1: <a href="#"> Floor_La_out.pdf</a>
Attach a scaled site plan:	 File 1: <a href="#"> image001.jpg</a> File 2: <a href="#"> Property_Line_Layout_04Nov020.pdf</a>

## 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 APPLICANT'S SOLE RESPONSIBILITY TO CONTACT OTHER LOCAL, COUNTY, STATE, OR FEDERAL AGENCIES 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 #66727 (11/25/2025) Expected Payment Method: Pay Online - Card or ECheck

Charge	Cost	Quantity	Total
<b>Recording Fee</b> added 11/24/2025 12:08 PM This fee is non-refundable if denied.	\$46.00	x 1	\$46.00
<b>Vacation/Short-Term Rental</b> added 11/24/2025 12:08 PM This fee is non-refundable if denied.	\$650.00	x 1	\$650.00
<b>Grand Total</b>			
		<b>Total</b>	<b>\$696.00</b>
		<b>Payment 11/25/2025</b>	<b>\$696.00</b>
		<b>Due</b>	<b>\$0.00</b>

## Approvals

Approval	Signature
Applicant	Chang Yang - 11/25/2025 1:28 PM 31b308a95c07b3c7629f8f2b61a15b37 803359cc4d1c95c78Feb72d0d15a16b7
#1 Administrative Staff	Shannon Wiebusch - 12/03/2025 1:57 PM 09dab3bf1b74f7fa2220882005f3790d 08e374bd01e22424a76dfb027e70d9ef
#2 Planning Commission	

[Print View](#)



(Top 3 Inches Reserved for Recording Data)

**WARRANTY DEED**  
Individual(s) to Joint Tenants)

Minnesota Uniform Conveyancing Blanks  
Form 10.1.5 (2013)

eCRV number: 1044619

DEED TAX DUE: \$ 1221.00

DATE: Dec. 5, 2019

FOR VALUABLE CONSIDERATION, Sandra Blackledge, single ("Grantor"), hereby conveys and warrants to Phoua Moua-Yang and Chang Yang ("Grantee"), as joint tenants, real property in Aitkin County, Minnesota, legally described as follows:

**See Exhibit A attached hereto.**

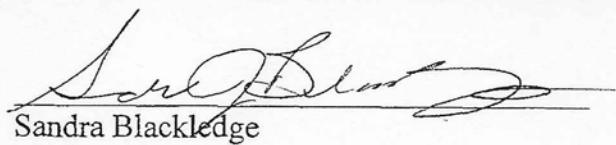
*Click here if all or part of the described real property is Registered (Torrens)*

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

- (a) building and zoning laws, ordinances, and state and federal regulations;
- (b) restrictions relating to use or improvement of the Property without effective forfeiture provisions;
- (c) reservation or any mineral rights by the State of Minnesota;
- (d) utility and drainage easements which do not interfere with existing improvements.

Check applicable box:

- 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. (if electronically filed, insert WDC number: \_\_\_\_\_.)
- 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.

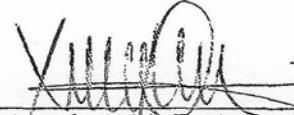


Sandra Blackledge

State of Florida County of Mdnamee

This instrument was acknowledged before me on  
Sandra Blackledge, single

December 4th, 2019 by



(signature of notarial officer)

Title (and Rank): NOTARY PUBLIC

My commission expires: 03 28 2020  
(month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:  
BURNET TITLE  
2680 W Germain St  
St Cloud, MN 56301  
2157019-15188/78199

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN  
THIS INSTRUMENT SHOULD BE SENT TO  
(insert legal name and residential or business address of Grantee)

Grantees:

Phoua Moua-Yang  
Chang Yang

34908 455th Place 7956 Cobblestone Rd.  
Aitkin, MN 56431 Woodbury, MN 55125

EXHIBIT "A"

Legal Description

File No. 2157019-15188

**Lot Four (4) of Block Two (2) of the Plat of "Edgewater Bay" according to the plat thereof on file and of record in the office of the Registrar of Titles, Aitkin County, Minnesota.**

**AND**

**An undivided 1/19 interest in and to Outlot B of Block One (1) of the Plat of "Edgewater Bay" according to the plat thereof on file and of record in the office of the Registrar of Titles, Aitkin County, Minnesota.**

# 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-wwsts4-31a.pdf>.

### Property information

Local tracking number:

Parcel ID# or Sec/Twp/Range: 01-1-168700 Reason for Inspection Aitkin Co Operating Permit 651  
 Local regulatory authority info: Aitkin Co.  
 Property address: 34908 455<sup>th</sup> PL. Aitkin MN 56431  
 Owner/representative: Chang Yang Owner's phone: 651-331-6320  
 Brief system description: Type III Mound 3 bedroom, 3ft washed sand under rockbed. Operating Permit 651 Cleaned Effluent Filter

### System status

 System status on date (mm/dd/yyyy): 11/24/2025

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

This Inspection is for Aitkin Co. VRBO Permit and includes updated Operating Permit 651 inspection Notes

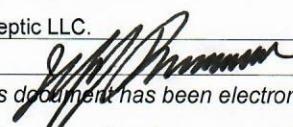
### Certification

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: Brummer Septic LLC.

 Certification number: C- 3589

 Inspector signature: 

 License number: L-1347

(This document has been electronically signed)

 Phone: 218-821-0704

### 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): Updated OP 651 Notes and new daily average gallons.

## 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:**

  X   Checked Drainfield / Mound Area For surfacing

  X   Checked Drainfield / Mound Area for Seepage

  X   Checked For Ponding in Existing Inspection Pipes

## 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: Timber Lakes Septic Service

License number of maintenance business: L-455

Date of maintenance: 11/24/2025

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: \_\_\_\_\_

**Describe verification methods and results:**

Tanks were inspected through manholes, Effluent filter was cleaned, Alarm works, event counter works, Baffles in place. No Apparent Cracks Or Leaks

### 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:

- Have the operating permit requirements been met?  Yes  No
- Is the required nitrogen BMP in place and properly functioning?  Yes  No

**Any "no" answer indicates noncompliance.**

Describe verification methods and results:

Measured pump out gallons \, calculated gallons per event ( 11/3/2022 ) Updated Average Gallons Per day on this report

Attached supporting documentation:  Operating permit (Attach)

## 5. Soil separation – Compliance component #5 of 5

Date of installation 11/22/2019  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)

Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Yes  No\*

Yes  No\*

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)
- Soil separation verified at time of install.

### Indicate depths or elevations

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

\*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:

**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 Drawing }

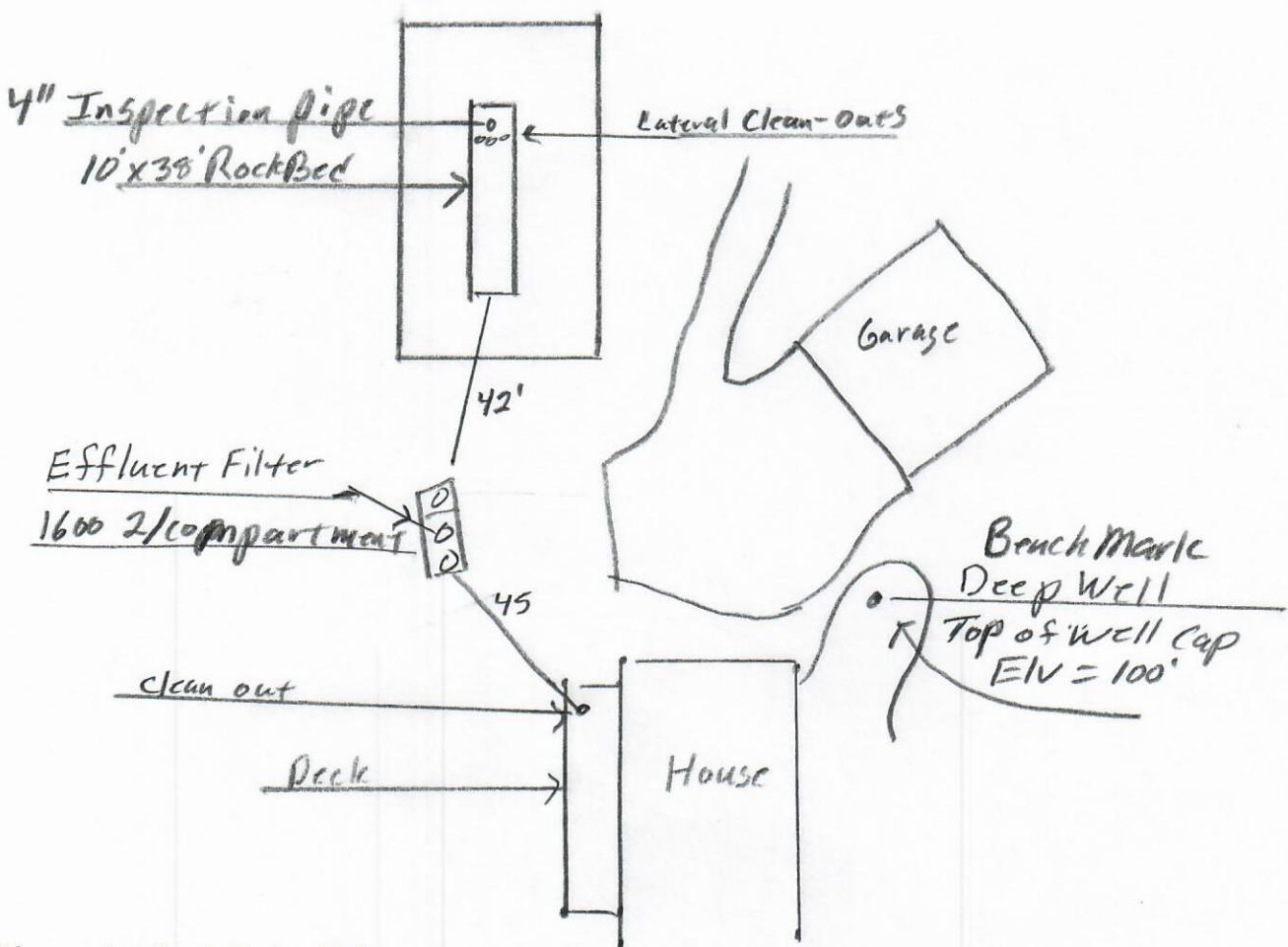
Property Owner: Chang Yang Date: 11/24/2025 Designer's Initials : JB  
Parcel ID. Number : 01-1-168700 Address : 34908 455th Pl. Aitkin Mn 56431  
Aitkin Co. One Inch = 40ft. ↗

Drainfield As/built was confirmed and used for parts of this inspection

One Inch = 40ft.'

North

Original Grade Elv= 97' (X)



Elv. Of ground at Septic Tank = 98.9'

Inlet Septic Tank Elv. = 96.7'

Elv. Of ground at Pump Tank = 98.9'

Manhole cover Pump Tank Elv. = 100.1'

Pump Elv. = 93.5'

Bench Mark Elv. = 100' Top of Deep Well Cap Same as Design.

Grade at house near front step = 100'

SB -	Top of Ground Soil Boring
Depth ( in.)	Texture      Color
Depth of Sand Confirmed at Install Inspection	
Grade at West End of Mound Elv. = 97'	

SB - 1	Top of Ground	
Depth ( in. )	Texture	Color

Please show all that apply ( Existing )

Please Draw to Scale with North to Top or Left Side of Page:

**{ Type III Design Notes for Owner and Installer }**

Property Owner: Chang Yang Date: 11/3/2022 Installer's Initials : \_\_\_\_\_  
 PIN : 01-1-168700 Site Address: 34908 455th PL. Aitkin MN 56431

This is a TYPE III Septic System, Operating Permit Required of Owner. Permit # 651

Reason for Type III Soils less than 12" to Mottles ( 10" )

Installed on fill / disturbed soils ( installed on same location as prior mound ).

Description of System 3 ft. sandbased mound/ 3 bedroom sizing,

Sather 1600 two compartment tank 1004 septic tank / 614 pump tank

1st Tank Gal.	1600	1st compartment gal.	1004	2nd Comp	614	3rd
2nd Tank Gal.		1st compartment gal.		2nd Comp		3rd
3rd Tank Gal.		1st compartment gal.		2nd Comp		3rd
1st Pump tank Gal.	614	1st Pump Brand and model # Liberty 283 1/2 hp.				
1st Pump GPM	27	1st Pump Ft. of Head		1st Pump Gal. per Dose	71	
1st Pump tank Gal. per inch.		1st Pump Inches per Dose		1st Pump Doses per Day		
1st Pump Design GPD	75	1st Pump Measured dose per day		Timed or demand Dose		
Time Settings: Minutes ON _____ Minutes OFF _____ Inches Pumped after drainback _____						
Notes : Event Counter counts 1 per event / 614 Tank is 14.12 GPI 10 " of pump out depth = 141 gal.						
2nd Pump tank Gal.		2nd Pump Brand and model #				
2nd Pump GPM		2nd Pump Ft. of Head		2nd Pump Gal. per Dose		
2nd Pump tank Gal. per inch.		2nd Pump Inches per Dose		2nd Pump Doses per Day		
2nd Pump Design GPD		2nd Pump Measured dose per day		Timed or demand Dose		
Time Settings: Minutes ON _____ Minutes OFF _____ Inches Pumped after drainback _____						
Notes : _____						

1st Alarm: Tank \_\_\_\_\_ Effluent Filter \_\_\_\_\_ Reason: Plugged Filter  
 2nd Alarm: Tank \_\_\_\_\_ Pump Tank \_\_\_\_\_ Reason: High level alarm  
 3rd Alarm: Tank \_\_\_\_\_ Reason: \_\_\_\_\_

Water Meter Installed on house hold water: \_\_\_\_\_ Where is it located : \_\_\_\_\_

Event counter Installed on pump: 11/22/19 Which Pump: Mound Pump Gal. Per Event 141  
 Where is Event Counter Located: On post near pump tank

Requirement of Operating Permit

Owner to UNDERSTAND System Operation: Required to do monthly readings of water meter or event counter.

Owner to record readings every month that system is being used, should know calculations for Gal. per day.

Owner to REPORT to Aitkin Co. once a year with log of monthly readings and annual Inspection Report

Owner to Hire an Inspector for a Once a year Inspection of the system's, Operation, Mechanical functions, and Compliance with Operating Permit.

## { Inspection Notes }

Property Owner: Chang Yang Date: 8/26/2022 Designer's Initials : JB  
Parcel ID. Number : 01-1-168700 Address : 34908 455th Pl. Aitkin Mn 56431

### Operating Permit 651

1 System as built notes, 3 ft. sand mound, 10' x 38' rock bed, sized for 3.bedrooms. 1600 Sather 2 /compartment tank

Tank sizes are 1600 gallons 2 /compartment Tank 1004 Septic tank , 614 gallons pump tank

Event counter is on pedestal near pump tank. Electric alarm on pump tank

All manholes are raised to above grade, covers are secure.

On 11/12/2019 Install Inspection, Soils Separation Verified by Aitkin Co inspector

2 Permit parameters for Aitkin Co. operating permit # 651

3 ft. of sand under rock bed for separation because original soils are less than 12" to mottles.

Installed on Fill ( Same location as prior mound )

Mound has been designed as a 3 bedroom system or 450 gallons per day use.

Control panel has demand dose for 450 gal max. per day.

Owner is to record events from counter once a month or at time of renewal

Once a year owner is to send a report of aver daily flows for the year.

Owner is to have system inspected once a year for the following

A. Leak in tanks, check alarms, check pump, verify gallons pumped per event.

B. Check mound for leaks, 3 ft. of separation

C. Check Sludge & Scum level, may require tanks be pumped.

D. Visual inspection of entire system for any failures or problems.

3 On 8/26/2022 the control panel was checked

11/12/2019

8/26/2022

Event Count = 0000

Event Count = 528

Pump discharges approx. 141 gallons per event

1027 day elapsed

528 Events x 141 gal. = 74448 gal. / 1027 = 72.49 Gal. Per Day.

4 On 11/24/2025 the control panel was checked

10/29/2022

11/24/2025

Event Count = 540

Event Count = 1722

Pump discharges approx. 141 gallons per event

1121

1182 Events x 141 gal. = 166662 gal. / 1121 = 148.6 Gal. Per Day.

 11-24-25

**{ Yearly Ave. and Daily Ave. Notes }**

Property Owner: Chang Yang Date: 11/24/2025 Designer's Initials : JB  
 Parcel ID. Number : 01-1-168700 Address : 34908 455th Pl. Aitkin MN 56431  
 Permit Number: 651 Gallon Per Event 141.00 Start Date: 11/12/19 End Date: 11/24/25  
 Starting event counter Number 0.00  
 Total Events to Date: 594.00 Average Gallons per Day to Date: 110.49  
 Total Day to Date: 2200 Total Gallons to Date: 243084

	Date	Day's between Recordings	Events	Gallons	Average Gallons Per Day.	Event Counter Number
1	11/12/19		0.00	0	#DIV/0!	0.00
2	08/29/22	1027	533.00	75153	73.18	533.00
3	09/18/22	20	5.00	705	35.25	536.00
4	10/29/22	32	4.00	564	17.63	540.00
5	11/24/25	1121	1182.00	166662	148.67	1722.00
6				0	#DIV/0!	
7				0	#DIV/0!	
8				0	#DIV/0!	
9				0	#DIV/0!	
10				0	#DIV/0!	
11				0	#DIV/0!	
12				0	#DIV/0!	
13				0	#DIV/0!	
14				0	#DIV/0!	
15				0	#DIV/0!	
16				0	#DIV/0!	



# Detailed Parcel Report

Parcel Number: 01-1-168700

## General Information

Township/City: AITKIN TWP  
Taxpayer Name: YANG, CHANG & PHOUA MOUA-  
Taxpayer Address: 34908 455TH PL  
AITKIN MN 56431  
Property Address: 34908 455th Pl  
Township: 47 Lake Number: 1020900  
Range: 27 Lake Name: CEDAR LAKE (AITKIN/FI TWPS)  
Section: 31 Estimated Acres: 0.00  
Green Acres: No School District: 1.00  
Plat: EDGEWATER BAY  
Brief Legal Description: LOT 4 BLK 2 & UND 1/19 INT IN OUTLOT B

## Tax Information

Class Code 1: Short Term Rental  
Class Code 2: Unclassified  
Class Code 3: Unclassified  
Homestead: Non Homestead  
Assessment Year: 2025

Estimated Land Value:	\$244,000.00
Estimated Building Value:	\$365,900.00
Estimated Total Value:	<hr/> \$609,900.00
Prior Year Total Taxable Value:	\$607,300.00
Current Year Net Tax (Specials Not Included):	\$4,264.00
Total Special Assessments:	\$0.00
**Current Year Balance Not Including Penalty:	\$0.00
Delinquent Taxes:	No

\* For more information on delinquent taxes, please call the Aitkin County Treasurer's Office at 218-927-7325.

\*\* Balance Due on a parcel does not include late payment penalties.

## Analysis Report

November 24, 2025

**REPORT TO:**

Yang, Chang  
34908 - 455th PI  
Aitkin MN 56431

**INVOICE TO:**

Date Rcvd-Brnd:	11/20/2025	Sampled By:	Chang Yang	LOCATION:
Time Rcvd-Brnd:	10:00	Sample Type:	DW	Yang, Chang
		Recv Temp°C:	4.6 on ice	34908 - 455th PI
		TYPE:	Well Water	Aitkin MN 56431

SITE / TEST PERFORMED	Sample Date/Time	Your Result	Units	Acceptable Level	Analytical Method	Analysis Date/Time	Analyst	Code #
Kitchen Tap - Raw	11/20/2025 @ 09:20							
Coliform, Total		PRESENT	/100mL	ABSENT	SM 9223 B (COLISURE)-2016	11/20/25 12:22	BS	122490
Escherichia coli (E. coli)		ABSENT	/100mL	ABSENT	SM 9223 B (COLISURE)-2016	11/20/25 12:22	BS	122490
Nitrate, as N		< 0.500	mg/L	< 10	EPA 353.2 REV 2.0	11/20/25 16:43	ZP	122490

Sample 122490: One or more of your results do not meet State of Minnesota and EPA drinking water standards for the analytes tested. For further information and guidance, please use the Results Interpretation Tool on our website at awlab.com.

Approved By: 

Date Approved: 11/24/2025

Stephanie Kuesel, Laboratory Manager

*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~



# Main Level Floor Plan

For 34908 455<sup>th</sup> Place, Aitkin, MN 54631 (Cedar Lake)



# Lower Level Floor Plan

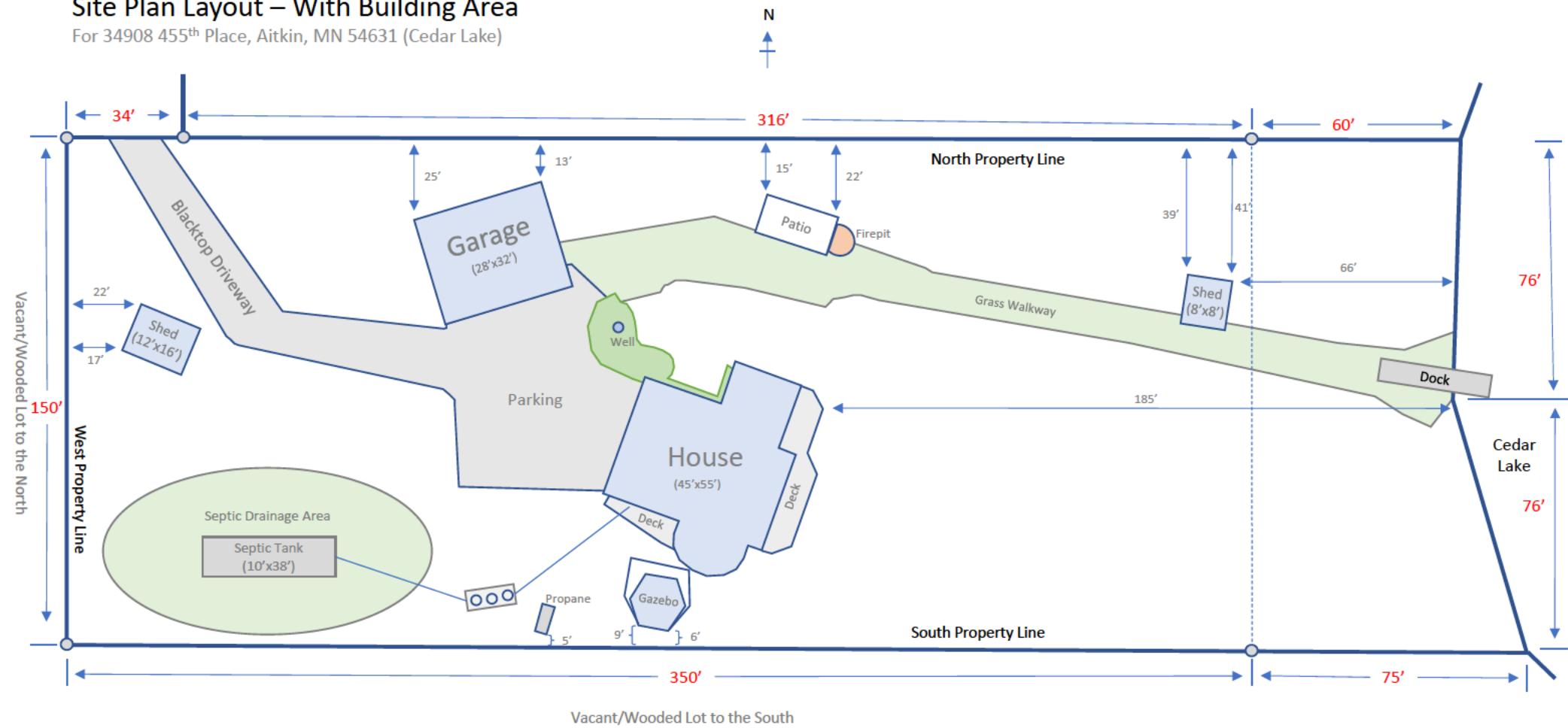
For 34908 455<sup>th</sup> Place, Aitkin, MN 54631 (Cedar Lake)





## Site Plan Layout – With Building Area

For 34908 455<sup>th</sup> Place, Aitkin, MN 54631 (Cedar Lake)





Vacation/Short-Term Rental IUP App. # 2025-001072, UID # 218224  
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

	<p>Name: <input type="text" value="Matthew Noble"/></p> <p>Phone: <input type="text" value="[REDACTED]"/></p> <p>Email Address: <input type="text" value="[REDACTED]"/></p> <p>Mailing Address: 32859 Nuthatch Ave Aitkin   MN   56431</p>
Applicant Contact Information:	
Are you the property owner?	<u>Yes</u>

### 60 Minute Contact Person

60 Minute Contact Person:	<p>Name: <input type="text" value="Stacey Hildebrandt"/></p> <p>Phone: <input type="text" value="[REDACTED]"/></p> <p>Email: <input type="text" value="[REDACTED]"/></p>
---------------------------	--

## 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
	32859 09-0- 015609	32859 Nuthatch Ave AITKIN, MN	32859 GLEN TOWNSHIP	NOBLE, MATTHEW & AMY TRUSTEES	NOBLE, MATTHEW & AMY TRUSTEES	.93 AC OF LOT 1 IN DOC 434974	S:10 T:46 R:25	RD	LONG LAKE (GLEN TWP)	

**Brief Narrative**

Brief Narrative:	Noble Cabin is a short-term rental venture designed to offer guests a premium, nature-inspired stay experience that blends rustic charm with modern comfort. Nestled in a scenic, tranquil location in Aitkin Minnesota. The cabin will serve as both a weekend retreat for urban travelers and a serene workspace for remote professionals. The property will be listed on Airbnb and other short-term rental platforms to attract a diverse range of guests seeking authentic, private getaways. The project emphasizes sustainability, high-quality amenities, and a curated guest experience that encourages repeat visits and positive reviews.
List all current advertising sources:	Airbnb VRBO
Proposed number of overnight guests:	6
How many rental units will be located on this parcel?	1
Will you be renting for periods less than one week?	<u>No</u>
Quiet hours will begin at:	10 : 00 <u>PM</u>
Quiet hours will end at:	08 : 00 <u>AM</u>
The septic system or well will need a flow-measuring device installed. 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?	<u>Yes</u>
Is the septic system holding tanks (no drainfield)? If yes, the application for an Operating Permit will begin after you submit this app.	<u>No</u>
Do you have a blue E911 address sign at your driveway?	<u>Yes</u>

## Floor Plan

What year was the rental unit built?	1985
How many rooms will be used for sleeping?	<u>3</u>
How many carbon monoxide alarms are located in the rental?	2
How many smoke detector alarms are located in the rental?	4
A fire extinguisher must be placed in an easily accessible location within each rental unit. Where is a fire extinguisher located?	Kitchen, Laundry Room

## Sleeping Area #1

Name of Room:	Master Bedroom
Room Size (Excluding closet or attached bathroom):	242 ft <sup>2</sup>
Number of Guests:	2
Select egress escape:	<u>Casement</u>
Was this window installed before March 31, 2020?	<u>Yes</u>
What is the distance from the floor to the bottom of this window (finished sill):	24 inches
What is the OPENABLE height of this window:	45 inches
What is the OPENABLE width of this window:	44 inches

**Sleeping Area #2**

Name of Room:	Basement bedroom1
Number of Guests:	4
Room Size (Excluding closet or attached bathroom):	242 ft <sup>2</sup>
Select egress escape:	<u>Casement</u>
Was this window installed before March 31, 2020?	<u>Yes</u>
What is the distance from the floor to the bottom of this window (finished sill)?	48 inches
What is the OPENABLE height of this window?	39 inches
What is the OPENABLE width of this window?	24 inches

**Sleeping Area #3**

Name of Room:	Basement Open
Number of Guests:	4
Room Size (Excluding closet or attached bathroom):	391 ft <sup>2</sup>
Select egress escape:	<u>Sliding or Side-Hinged Door</u>
Was this window installed before March 31, 2020?	<u>Yes</u>
What is the distance form the floor to the bottom of this window (finished sill)?	1 inches
What is the OPENABLE height of this window?	80 inches
What is the OPENABLE width of this window?	36 inches

## Guest Information Handbook

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 &amp; 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?	Kitchen Island
Where in the rental will the emergency contact information be posted?	Kitchen Wall

## Pet Policy

Pet Policy:	No Pets
-------------	---------

## Garbage Disposal Plan

How often will the garbage be collected?	weekly
Enter the name of the garbage service or describe your disposal plan:	Garrison Disposal

## Supporting Documents

Attach the property deed:	File 1: <a href="#"> NOBLE_TRUST_DEED.pdf</a>
Attach Water Test:	File 1: <a href="#"> Water_Test_-_AW_Labs_12-29-25.pdf</a>
Attach septic Certificate of Compliance:	<a href="#"> COC_-_32859_Nuthatch_Ave.pdf</a>
Attach a floor plan of the rental unit(s):	File 1: <a href="#"> Lower_Level_-_Floor_Plan.pdf</a> File 2: <a href="#"> Main_Level_-_Floor_Plan.pdf</a>
Attach a scaled site plan:	File 1: <a href="#"> Site_Plan_-_32859_Nuthatch_Avenue.pdf</a>

## 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 APPLICANT'S SOLE RESPONSIBILITY TO CONTACT OTHER LOCAL, COUNTY, STATE, OR FEDERAL AGENCIES 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 #67255 (12/29/2025) Expected Payment Method: Pay Online - Card or ECheck

Charge	Cost	Quantity	Total
<b>Recording Fee</b> added 12/11/2025 11:43 AM This fee is non-refundable if denied.	\$46.00	x 1	\$46.00
<b>Vacation/Short-Term Rental</b> added 12/11/2025 11:43 AM This fee is non-refundable if denied.	\$650.00	x 1	\$650.00
<b>Grand Total</b>			
		<b>Total</b>	<b>\$696.00</b>
		<b>Payment 12/29/2025</b>	<b>\$696.00</b>
		<b>Due</b>	<b>\$0.00</b>

## Conditions of Permit

None

## Approvals

Approval	Signature
Applicant	Matthew Noble - 12/29/2025 3:44 PM 027743ad5cf38d362adf2cdcd3273f5d 311394bbf73c14ec2c8e6da95eb0b4cd
#1 Administrative Staff	Shannon Wiebusch - 01/12/2026 10:14 AM eF9361e54d8e2353e6025629b2260c41 6220e324ffffa7e54d037d5d42663af9a
#2 Planning Commission	



CRV Not Required  
No Delinquent Taxes and Transfer Entered  
Kirk Peysar, County Auditor  
State Deed Tax Paid  
Lori Grams, County Treasurer

Doc No: A471229

QCD 1/1

Certified Filed and/or Recorded on  
5/16/2022 11:10 AM

REC FEE \$46.00  
SDT \$1.65

Office of the County Recorder  
Aitkin County, Minnesota  
Michael T. Moriarty, County Recorder

Package: 77527 Liz

*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.*

Top 3 inches reserved for recording data)

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**QUIT CLAIM DEED**

**Individual(s) to Individual(s)**

DEED TAX DUE: \$1.65

DATE: May 6, 2022

**Consideration for this transaction is \$3,000.00 or less.**

FOR VALUABLE CONSIDERATION, Matthew T. Noble and Amy K. Noble, husband and wife ("Grantor"), hereby convey and quitclaim an undivided one-half interest to Matthew T. Noble and Amy K. Noble, as Trustees of the Matthew T. Noble Living Trust Under Agreement Dated May 6, 2022, and an undivided one-half interest to Amy K. Noble and Matthew T. Noble, as Trustees of the Amy K. Noble Living Trust Under Agreement Dated May 6, 2022 ("Grantee"), real property in Aitkin County, Minnesota, legally described as follows:

**See attached legal description**

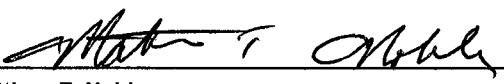
*Check here if all or part of the described real property is Registered (Torrens)*

together with all hereditaments and appurtenances belonging thereto.

*Check applicable box:*

- 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. (If electronically filed, insert WDC number: [...].)
- 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.

Grantor

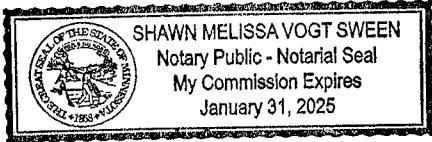
  
Matthew T. Noble

  
Amy K. Noble

State of Minnesota, County of Mower

This instrument was acknowledged before me on **May 6, 2022**, by **Matthew T. Noble and Amy K. Noble, husband and wife**.

(Stamp)



Shawn Vogt Sween

(signature of notarial officer)

Title (and Rank): Notary Public

My commission expires: January 15, 2025  
(month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:

**Shawn Vogt Sween**  
Law Office of Shawn Vogt Sween, LLC  
104 Main St S  
Grand Meadow, MN 55936  
507-754-4555

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN THIS INSTRUMENT SHOULD BE SENT TO:

**Matthew and Amy Noble, Trustees**  
14005 48<sup>th</sup> Ave N  
Plymouth, MN 55446

## EXHIBIT A

→ That part of Government Lot One (1), Section Ten (10), Township Forty-six (46), Range Twenty-five (25), described as follows: Beginning at a point on the West line of said Government Lot 1 said point being the Southeast corner of the Plat of Anderson Beach as of record in the Office of the County Recorder; thence North 52 degrees 38 minutes East, 232.5 feet; thence North 31 degrees 15 minutes West, 230 feet, more or less, to the shore of Long Lake; thence Southwesterly along the shore of Long Lake 100 feet, more or less, to its intersection with the West line of said Government Lot 1; thence South along said West line 256 feet, more or less, to the point of beginning. For the purpose of this description the West line of Government Lot 1 has an assumed bearing of North.

And

→ That part of Lot Five (5) of "Anderson Beach", which lies Northeasterly of the following described line: Commencing at the Southwesterly corner of said Lot 5; thence North 51 degrees 50 minutes East along the Southeasterly line of said Lot 5 a distance of 83 feet to the actual point of beginning of the line to be described; thence North 15 degrees 54 minutes West a distance of 242.4 feet to the shoreline of Long Lake and there terminating; tract extends to the water's edge.

Except

That part of Lot Five (5), "Anderson Beach", described as beginning at the Southwesterly corner of said Lot 5; thence North 51 degrees 50 minutes East along the Southeasterly line of Lot 5, 83.0 feet to the point of beginning of the tract of land to be described; thence North 51 degrees 50 minutes East 83.0 feet; thence North 11 degrees 16 minutes West, 246.0 feet to the shoreline of Long Lake, thence Southwesterly along the shoreline 100.0 feet more or less to the intersection with a line bearing North 15 degrees 54 minutes West from the point of beginning; thence South 15 degrees 54 minutes East 242.0 feet more or less to the point of beginning.

And Except

That part of Lot Five (5), "Anderson Beach", described as beginning at the Southwesterly corner of said Lot 5; thence North 51 degrees 50 minutes East along the Southeasterly line of Lot 5, 166.0 feet to the point of beginning of the tract of land to be described; thence North 51 degrees 50 minutes East 83.0 feet; thence North 6 degrees 45 minutes 10 seconds West, 222.8 feet to the shoreline of Long Lake; thence Southwesterly along the shoreline 100.0 feet more or less to the intersection with a line bearing North 11 degrees 16 minutes West from the point of beginning; thence South 11 degrees 16 minutes East, 246.0 feet more or less to the point of beginning.

Aitkin County, Minnesota



## Septic System Compliance Inspection – Existing System

**Date:** 11/06/2025

**Property Owner:** Matt Noble

**Ordered By:** Homeowner

**Address:** 32859 Nuthatch, Aitkin, Mn, 56431

**Property ID:** 09-0-015609

**Inspector:** Jody Grund

A compliance inspection was performed at the above location. Soil evaluation was conducted to determine the level of seasonal saturated soil. The Soil Treatment Area (Drain field) was also inspected to ensure there was no ponding or leaking. The septic tank was 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**

Soils Separation is compliant

- **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

218-927-6175

1037 1st St. NW Aitkin, MN 56431

WWW.TIMBERLAKESSEPTIC.COM

**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

Parcel ID# or Sec/Twp/Range:	09-0-015609	Local tracking number:
Local regulatory authority info:	Aitkin County	
Property address:	32859 Nuthatch, Aitkin, Mn, 56431	
Owner/representative:	Matt Noble	
Brief system description:	1350 Combo to 10x38 mound	

### System status

System status on date (mm/dd/yyyy): 11/6/2025

 **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.*

#### 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

 **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.*

### 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: C10162

Inspector signature: Jody Grund

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):

**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

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

**Attached supporting documentation:**

Other: \_\_\_\_\_

Not applicable

**Describe verification methods and results:****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:	

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

**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 11/5/2025  
(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: \_\_\_\_\_

**Describe verification methods and results:**

Property Address: 32859 Nuthatch, Aitkin, Mn, 56431

Business Name: Timber Lakes Septic Service

Date: 11/6/2025

### 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:**

- Have the operating permit requirements been met?  Yes  No
- 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)

## 5. Soil separation – Compliance component #5 of 5

Date of installation 10/31/1985  Unknown  
(mm/dd/yyyy)

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:  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:

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)

Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Yes  No\*

Yes  No\*

### Indicate depths or elevations

A. Bottom of distribution media	100
B. Periodically saturated soil/bedrock	97.4
C. System separation	2.6'
D. Required compliance separation*	2.55'

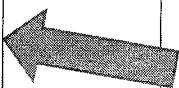
\*May be reduced up to 15 percent if allowed by Local Ordinance.

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

Describe verification methods and results:

**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.

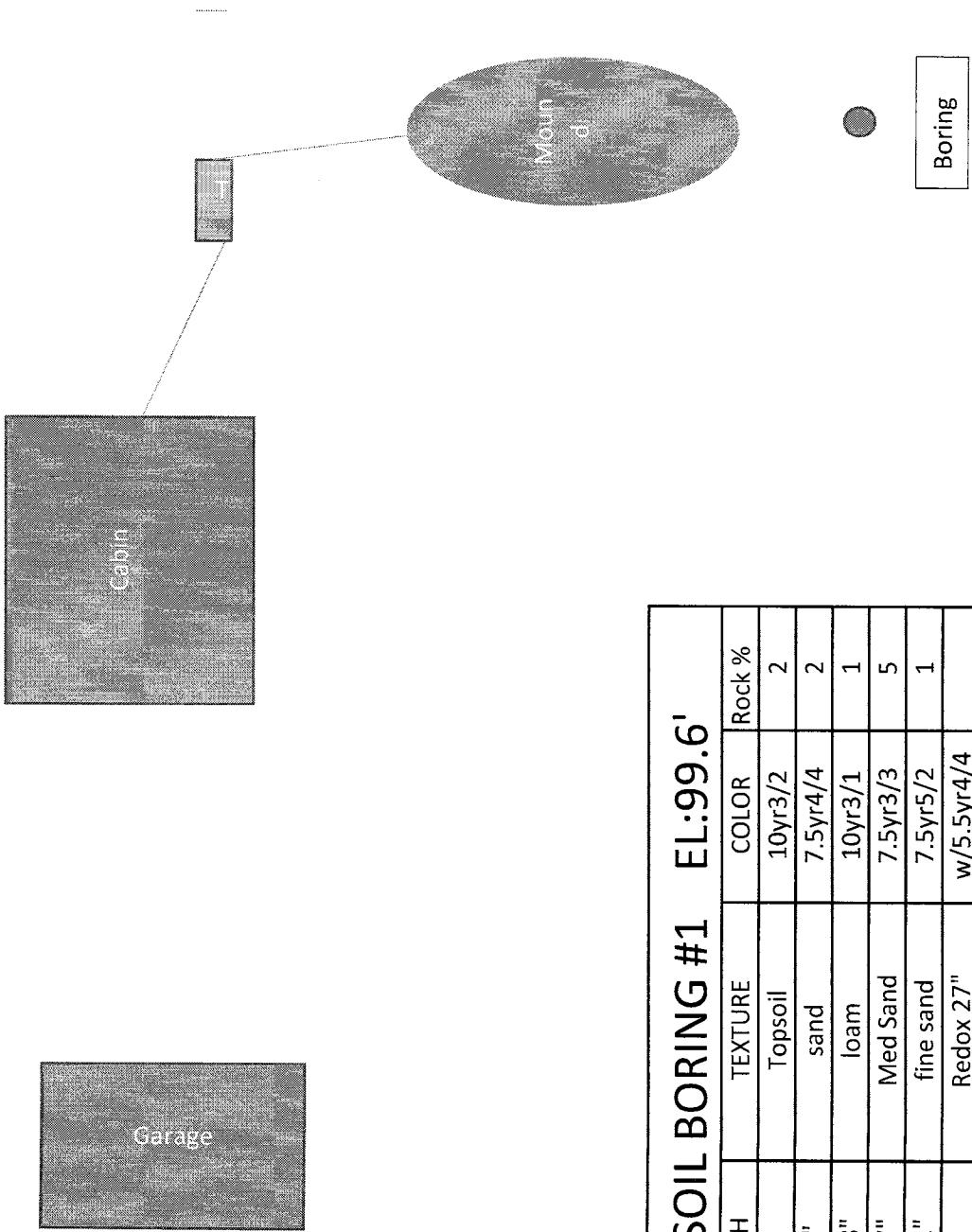
# SKETCH SHEET AND SOIL BORING LOG



**INSPECTOR:** Jody Grund  
**DATE:** 11/06/2025  
**PID#:** 09-0-015609  
**SITE ADDRESS:** 32859 Nuthatch, Atkin, Mn

Equipment: Bucket Auger  
Elevation of Limiting Layer: 97.4  
Vegetation: Mowed Grass  
Weather: Sunny & Clear

**Benchmark (EL = 100'):** Bottom of Rock in STA100



SOIL BORING #1 EL:99.6'			
DEPTH	TEXTURE	COLOR	Rock %
0-5"	Topsoil	10yr3/2	2
5-13"	sand	7.5yr4/4	2
13-18"	loam	10yr3/1	1
18-27"	Med Sand	7.5yr3/3	5
27-31"	fine sand	7.5yr5/2	1
	Redox 27"	w/5.5yr4/4	

# 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 Noble, Matt

 Property address: 32859 Nuthatch Ave, Aitkin, MN 56431

 Local Regulatory Authority: Aitkin County

 Parcel ID: 09-0-015609

### System status

 System status on date (mm/dd/yyyy): 11/05/2025
 **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\*  No

The SSTS has a sewage tank that leaks below the designed operating depth - "Failure to Protect Groundwater."

 Yes\*  No

The 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 Inc

 Business license number: L455

### Designated Certified Individual (DCI) information

 Print name: Dan Swanson

 Certification number: C6023

*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: Dan Swanson

*(This document has been electronically signed.)*

 Date (mm/dd/yyyy): 11/05/2025



## Minnesota Pollution Control Agency

520 Lafayette Road North  
St. Paul, MN 55155-4194

# Compliance Inspection Form

## Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

**Inspection results** based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.

For local tracking purposes:

Submit completed form to Local Unit of Government (LUG) and system owner within 15 days

### System Status

System status on date (mm/dd/yyyy): 6/8/2016

**Compliant – Certificate of Compliance**

*(Valid for 3 years from report date, unless shorter time frame outlined in Local Ordinance.)*

**Noncompliant – Notice of Noncompliance**

*(See Upgrade Requirements on page 3.)*

**Reason(s) for noncompliance (check all applicable)**

- Impact on Public Health (Compliance Component #1) – *Imminent threat to public health and safety*
- Other Compliance Conditions (Compliance Component #3) – *Imminent threat to public health and safety*
- Tank Integrity (Compliance Component #2) – *Failing to protect groundwater*
- Other Compliance Conditions (Compliance Component #3) – *Failing to protect groundwater*
- Soil Separation (Compliance Component #4) – *Failing to protect groundwater*
- Operating permit/monitoring plan requirements (Compliance Component #5) – *Noncompliant*

### Property Information

Parcel ID# or Sec/Twp/Range: 090015609 & 091092601

Property address: 32859 Nuthatch Avenue

Reason for inspection: property sale

Property owner: David & Jacqueline Egberg  
or

Owner's phone:

Owner's representative: Woods and Shores

Representative phone: 218-927-3725

Local regulatory authority: Aitkin County

Regulatory authority phone: 218-927-3725

Brief system description: 1860 combo tank, 10 x 25 mound

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.

Inspector name: LouAnn Maschler/Dan Maschler

Certification number: 3743/7907

Business name: Maschler Septic Consultants

License number: L2264

Inspector signature: Dan Maschler

Phone number: 218-839-3042

### Necessary or Locally Required Attachments

Soil boring logs

System/As-built drawing

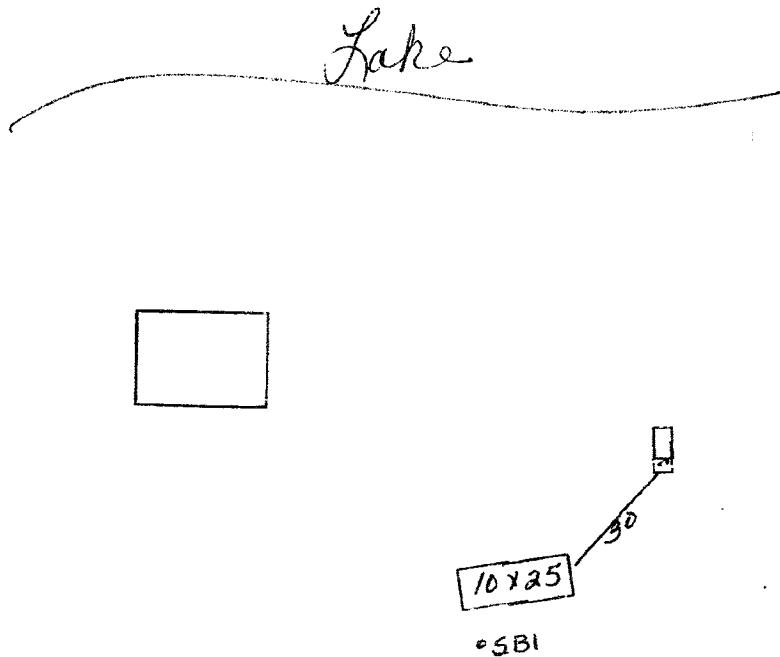
Forms per local ordinance

Other information (list):

# SITE SKETCH

NAME Eggers

RE: 090015409 + 091092601



## Soil Boring #1

0	Yposoil 10x2 3/3
6	
12	sand 10x2 3/3
20	
20	mottling

System size at installation (if available) \_\_\_\_\_

System appears to be working and in compliance with MN 7080 on the date of inspection. The inspection in no way warranties the system and its functioning beyond this date.

This system fail to meet requirements.

RECEIVED SEP 26 1997

Minnesota Pollution Control Agency (MPCA)  
Inspection Form for Existing Septic Systems

DRAFT

DATE OF INSPECTION: 9/22/97 TIME: 7PM WEATHER CONDITIONS: Clear ISTS PERMIT NUMBER: \_\_\_\_\_

## REASON FOR INSPECTION

Bedroom or bathroom addition  
 Variance  
 Complaint  
 Property Transfer  
 Other \_\_\_\_\_

## IDENTIFICATION

Property Owner(s) Richard Bradford Telephone (218) 549-3532  
 Site Address Rt 4 Box 457 City Aitkin  
 Zip Code 56431 County Aitkin  
 Fire No. none Township Name Glen  
 Is system opened up?  Y  N  Full  Partial

Parcel # 0#

## SYSTEM

Has tank(s) ever been pumped?  Y  N Year System Built 1989If Yes, how often? 1995 For what reason:  routine  basement backup  sluggish plumbing  other \_\_\_\_\_Any repair done on system?  Y  N What \_\_\_\_\_ When \_\_\_\_\_ By whom \_\_\_\_\_Usage:  other establishment  dwelling  seasonal Other \_\_\_\_\_ No. Bedrooms 4 No. of occupants \_\_\_\_\_Water using appliances:  Clothes washer  Dishwasher  Garbage disposal  Whirlpool bath  Water conditioning unit  Self-cleaning humidifier in furnaceNearest Surface Water: 90 ft from which type of surface water:  river  lake  stream  other \_\_\_\_\_

(Check appropriate sewer system component and indicate location on site sketch on back of form).

Tank(s):	Tank(s) Material:	Soil Treatment System:	Other:
<input type="checkbox"/> Septic tank	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> rock trench	<input type="checkbox"/> alternative system (identify type) _____
<input checked="" type="checkbox"/> Aerobic tank	<input type="checkbox"/> Plastic	<input type="checkbox"/> gravelless trench	<input type="checkbox"/> experimental system (identify type) _____
<input checked="" type="checkbox"/> Pump tank	<input type="checkbox"/> Metal	<input type="checkbox"/> chamber trench	<input type="checkbox"/> other (identify type) _____
<input type="checkbox"/> Holding tank	<input checked="" type="checkbox"/> Concrete	<input type="checkbox"/> seepage bed	_____
	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> mound	_____
		<input type="checkbox"/> at-grade	_____

Tank(s) Size: Combo tank 1250 gals Soil treatment area size(s): 330 sq. ft.

## COMPLIANCE INSPECTION\*

Is there or has there ever been any evidence of:

Discharge of sewage to the ground surface?

Response

YES  NO \_\_\_\_\_

Discharge of sewage to a surface water?

YES  NO \_\_\_\_\_

A seepage pit, drywell, cesspool or leaching pit?

YES  NO \_\_\_\_\_

Less than three feet of vertical separation between the soil treatment system bottom and saturated soil or bedrock?

YES  NO \_\_\_\_\_

Sewage backup into dwelling or other establishment?

YES  NO \_\_\_\_\_

Situations with the potential to immediately and adversely impact or threaten public health or safety?

YES  NO \_\_\_\_\_

\* if YES was answered for any of the above questions, the system is failing according to Minn. R. ch. 7080.0060.

## STATUS OF THE SYSTEM

Based on the compliance inspection conducted above the system status is in compliance therefore,this document is a Certificate of Compliance (Choose: in compliance OR failing)(Choose: Certificate of Compliance OR Notice of Noncompliance)

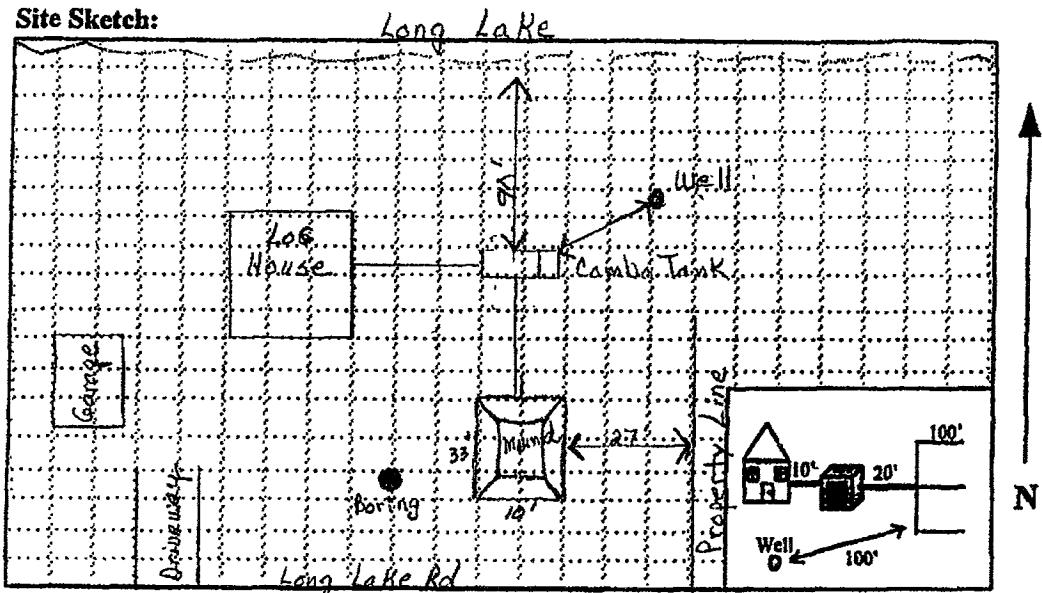
## CERTIFICATION

I hereby certify as a state of Minnesota licensed Inspector, Designer I or Qualified Employee that my observations recorded on this form are accurate as of the date at the top of this form for the site stated above. No determination of future hydraulic performance can be made due to unknown conditions during system construction, future water usage over the life of the system, abuse of the system, and/or inadequate maintenance all of which will adversely affect the life of the system.

Baldwin

Inspector's name Jeff S. Olsen Phone No. 218-546-7766 License and/or Registration Number 1083  
(please print)Inspector's signature Jeff S. Olsen Date 9/23/97

Site Sketch:



Please indicate the location of: 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). Include sizes and length and approximate distances from fixed reference points such as streets and buildings. Please attach as-built drawings, inspection reports, Certificat(s) of Compliance and Notice(s) of Noncompliance, if available.

**Soil Borings (BR #):** Locate each boring on the map above, indicate on the right of the column the soil texture, structure, color, depth of each different soil type, evidence of mottling, bedrock and standing water. Also indicate if the material is fill.

BR #	BR #	BR #	BR #	BR #	BR #
0 - 2" - Topsoil, 10YR, 4/2, Dark grayish brown	2" - 38" - Clay Loam, 10YR, 6/2, Light brownish gray	38" - 60" - Sand, 10YR, 4/4, Dark Yellowish Brown			

RECORD DEPTH OF MOTTLING, SEASONAL HIGH WATER OR BEDROCK ON ABOVE LINES

Comments: \_\_\_\_\_

What needs to be completed to bring the above system into compliance if found not in compliance? \_\_\_\_\_

## Analysis Report

December 22, 2025

**REPORT TO:**

Noble, Matthew  
32859 Nuthatch Ave  
Aitkin MN 56431

**INVOICE TO:**

<b>Date Rcvd-Brnd:</b>	12/19/2025	<b>Sampled By:</b>	Matthew Noble	<b>LOCATION:</b>
<b>Time Rcvd-Brnd:</b>	11:06	<b>Sample Type:</b>	DW	Noble, Matthew
		<b>Recv Temp°C:</b>	3.1 on ice	32859 Nuthatch Ave
		<b>TYPE:</b>	Well Water	Aitkin MN 56431

<b>SITE / TEST PERFORMED</b>	<b>Sample Date/Time</b>	<b>Your Result</b>	<b>Units</b>	<b>Acceptable Level</b>	<b>Analytical Method</b>	<b>Analysis Date/Time</b>	<b>Analyst</b>	<b>Code #</b>
Kitchen Tap	12/19/2025 @ 08:00							
Coliform, Total		ABSENT	/100mL	ABSENT	SM 9223 B (COLISURE)-2016	12/19/25 13:40	KU	123536
Escherichia coli (E. coli)		ABSENT	/100mL	ABSENT	SM 9223 B (COLISURE)-2016	12/19/25 13:40	KU	123536
Nitrate, as N		< 0.500	mg/L	< 10	EPA 353.2 REV 2.0	12/19/25 13:22	ZP	123536

Sample 123536: 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: 

Date Approved: 12/22/2025

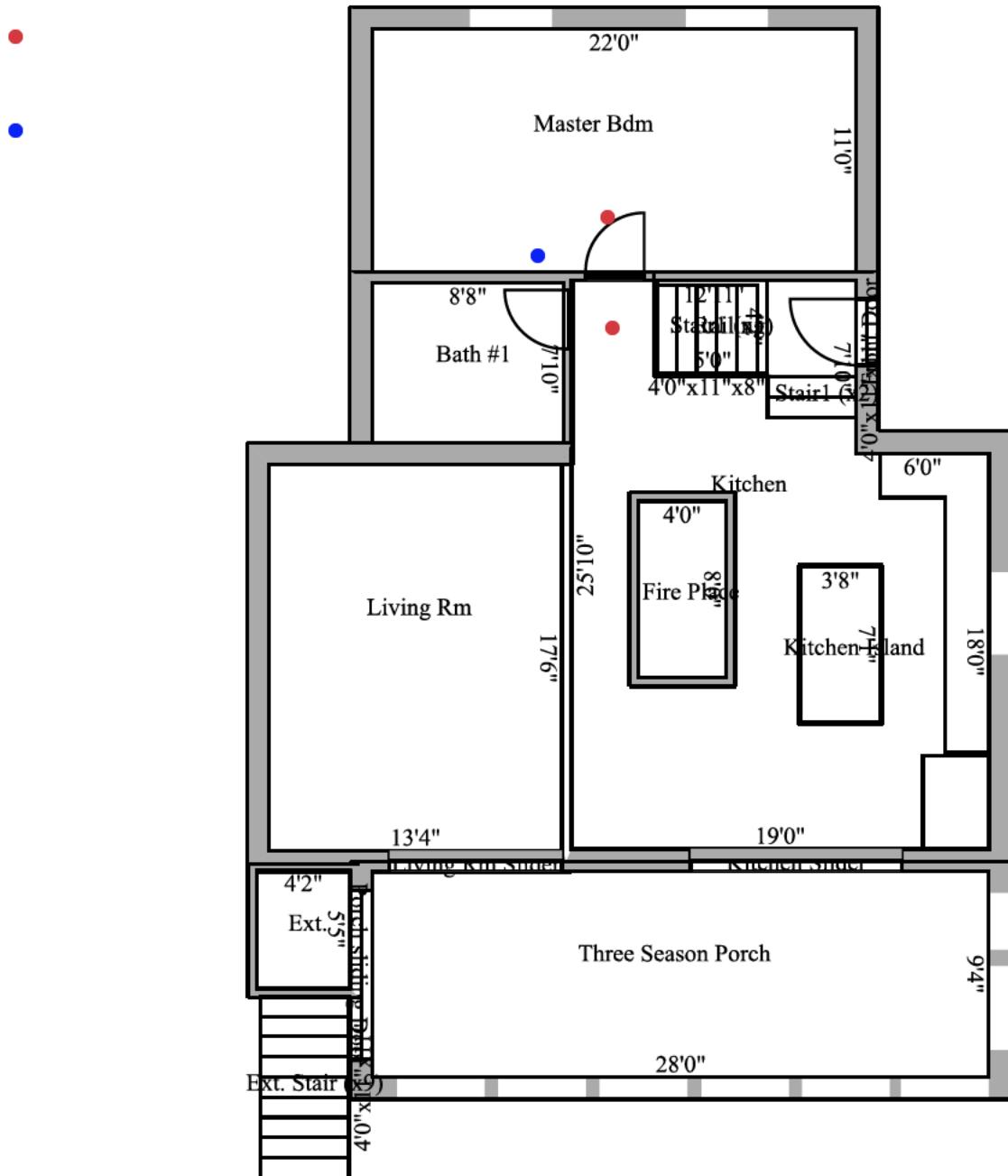
Stephanie Kuesel, Laboratory Manager

*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~**

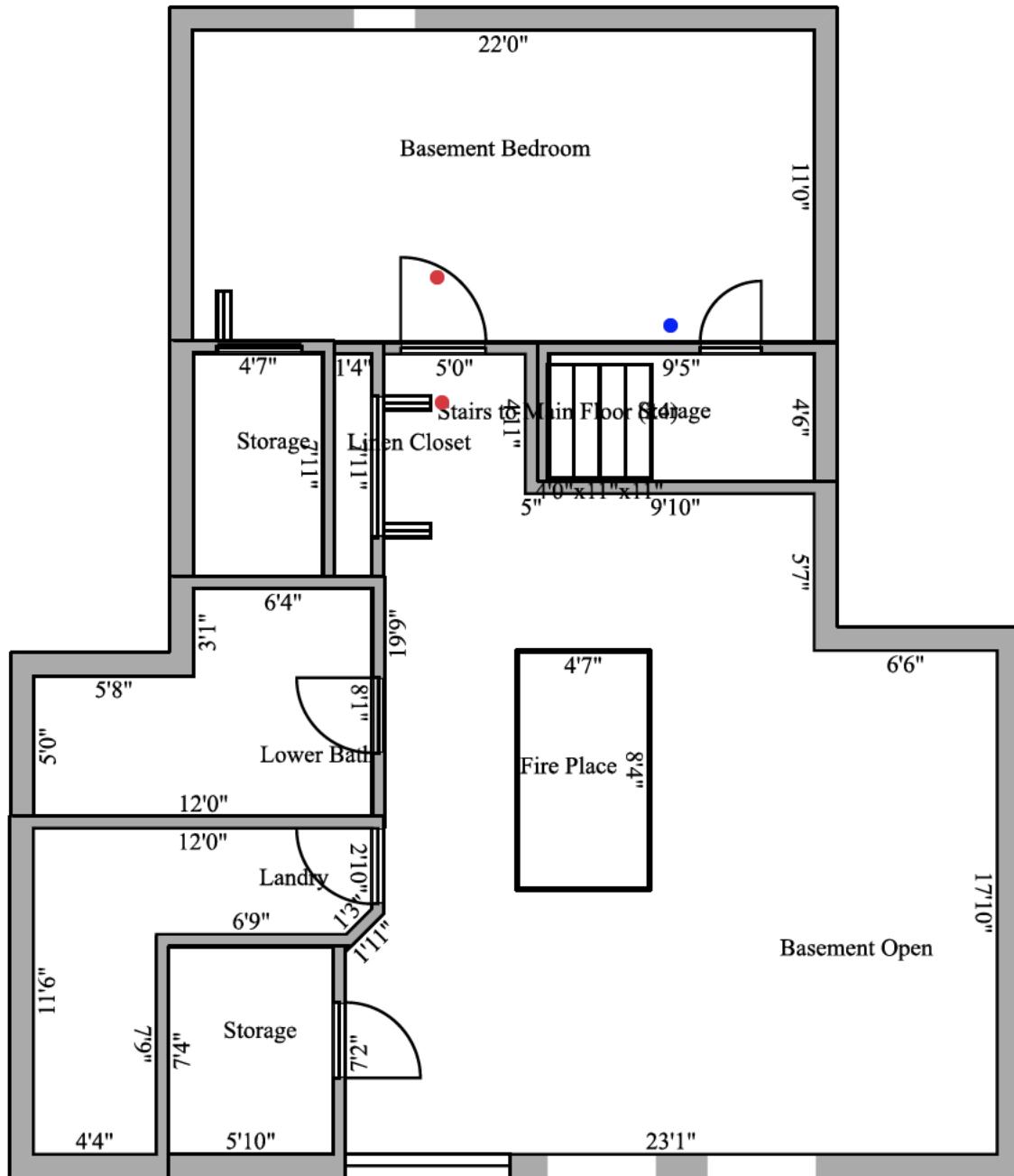


## Main Floor



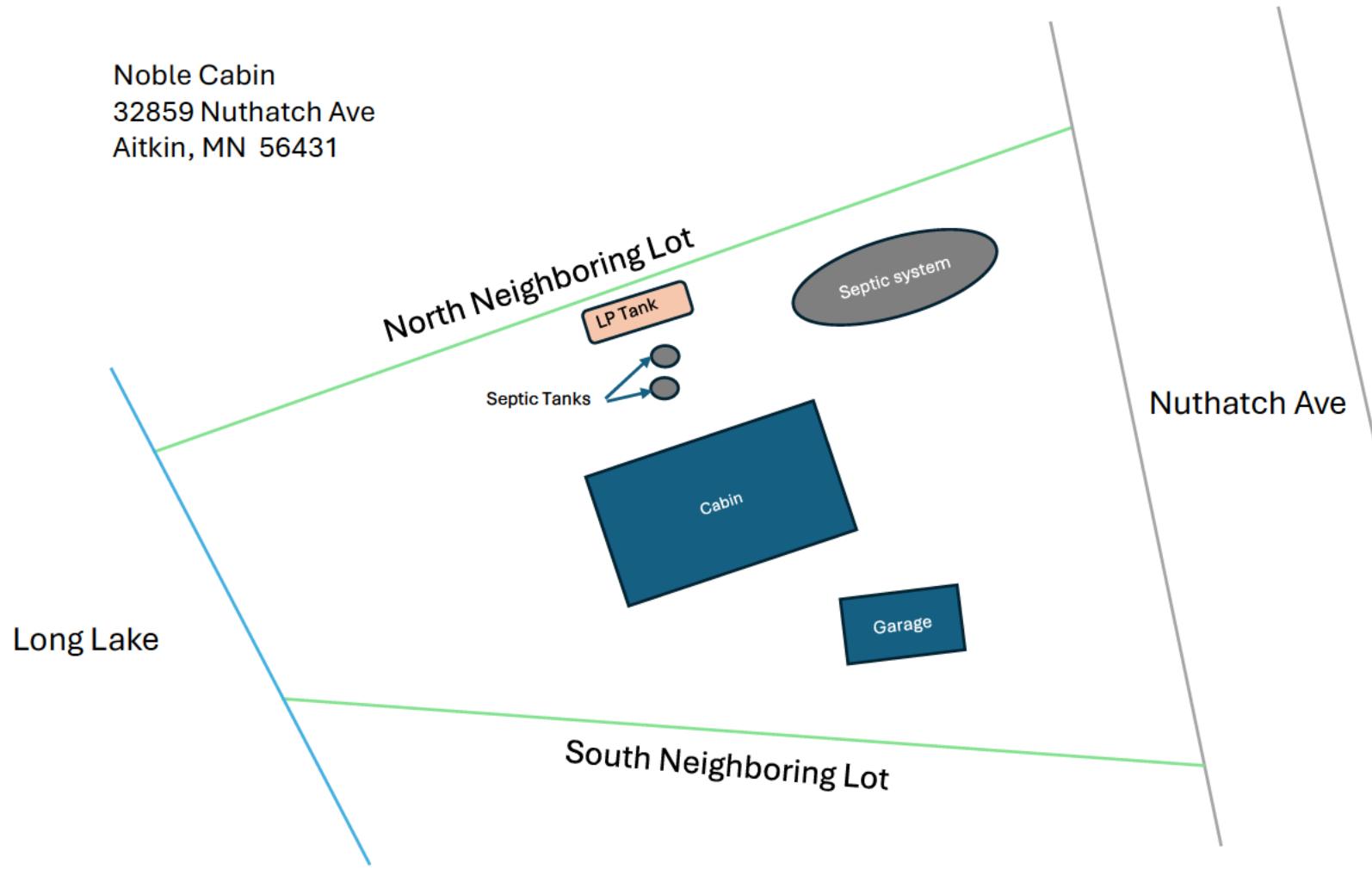
# of rooms	9	# of doors	6
# of windows	11	# of stairs	3
Interior floor area	1,350.00 SF	Exterior floor area	1,611.00 SF
Interior wall area	3,179.00 SF	Interior wall area (less window/door)	2,743.00 SF

## Lower Level



# of rooms	9	# of doors	8
# of windows	3	# of stairs	1
Interior floor area	1,077.00 SF	Exterior floor area	1,296.00 SF
Interior wall area	3,565.00 SF	Interior wall area (less window/door)	3,348.00 SF

Noble Cabin  
32859 Nuthatch Ave  
Aitkin, MN 56431





Vacation/Short-Term Rental IUP App. # 2026-000009, UID # 218984

Renewal of [Permit # 2021-6298](#)

App. Status: Pending Review

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

### Applicant

	<p>Name: Deborah Rudnitski</p> <p>Phone: [REDACTED]</p> <p>Email Address: [REDACTED]</p> <p>Mailing Address: 11704 Arnold Palmer Trail NE Blaine MN 55449</p>
Applicant Contact Information:	
Are you the property owner?	<u>Yes</u>

### 60 Minute Contact Person

60 Minute Contact Person:	<p>Name: Tina unknown Davis</p> <p>Phone: [REDACTED]</p> <p>Email: [REDACTED]</p>
---------------------------	---

## 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
	29-0-019812	19810 508th Ln MCGREGOR, MN 55760	SHAMROCK TWP	DC INVESTMENTS MINNESOTA LLC	DC INVESTMENTS MINNESOTA LLC	1.16 AC OF LOT 3 IN DOC #264790		S:9 T:49 R:23	GD	BIG SANDY LAKE

Directions (if no address):	169-210 East to 65 north to 14 turn right to 202nd place turn left to 508th Lane turn left to T turn right and our place is the last on the left.
-----------------------------	---

**Brief Narrative**

Brief Narrative:	I would like to rent my home out to families wanting to vacation for a weekend or week. Or a group of 4-10 from a group for scrapbooking, quilting, book club etc. I am going to plan on trying to work from referrals and word of mouth, contacting church groups and possible advertising if need be. Our family plans on being there the majority of the time but would like to have the opportunity to share our vocation home with others.
List all current advertising sources:	I have not advertised it
Proposed number of overnight guests:	6
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:	07 : 00 <u>AM</u>
The septic system or well will need a flow-measuring device installed. 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?	<u>Yes</u>
Is the septic system holding tanks (no drainfield)? If yes, the application for an Operating Permit will begin after you submit this app	<u>Yes</u>
Do you have a blue E911 address sign at your driveway?	<u>No</u>

## Floor Plan

What year was the rental unit built?	2018
How many rooms will be used for sleeping?	<u>3</u>
How many carbon monoxide alarms are located in the rental?	2
How many smoke detector alarms are located in the rental?	4
A fire extinguisher must be placed in an easily accessible location within each rental unit. Where is a fire extinguisher located?	Kitchen

## Sleeping Area #1

Name of Room:	Master Suite
Room Size (Excluding closet or attached bathroom):	214.5 ft <sup>2</sup>
Number of Guests:	2
Select egress escape:	<u>Sliding or Side-Hinged Door</u>
Was this window installed before March 31, 2020?	<u>No</u>
What is the distance from the floor to the bottom of this window (finished sill):	0 inches
What is the OPENABLE height of this window:	96 inches
What is the OPENABLE width of this window:	36 inches

**Sleeping Area #2**

Name of Room:	Bedroom 2
Number of Guests:	2
Room Size (Excluding closet or attached bathroom):	200.25 ft <sup>2</sup>
Select egress escape:	<u>Sliding or Side-Hinged Door</u>
Was this window installed before March 31, 2020?	<u>No</u>
What is the distance from the floor to the bottom of this window (finished sill)?	0 inches
What is the OPENABLE height of this window?	96 inches
What is the OPENABLE width of this window?	36 inches

**Sleeping Area #3**

Name of Room:	Bedroom 3
Number of Guests:	2
Room Size (Excluding closet or attached bathroom):	160 ft <sup>2</sup>
Select egress escape:	<u>Double Hung</u>
Was this window installed before March 31, 2020?	<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?	32 inches
What is the OPENABLE width of this window?	32 inches

## Guest Information Handbook

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 &amp; 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>Notice that all ordinances and IUP conditions will be enforced by the Aitkin County Sheriff's Office and Aitkin County Environmental Services</u>
Where in the rental will your handbook will be located?	On the coffee nook counter in the kitchen
Where in the rental will the emergency contact information be posted?	in the front entry on right side of front door wall.

## Pet Policy

Pet Policy:	No pets allowed, I want to respect our neighbors and I am not going to trust that renters will keep control of their pets.
-------------	--

## Garbage Disposal Plan

How often will the garbage be collected?	each time someone leaves
Enter the name of the garbage service or describe your disposal plan:	we remove ourself each week

## Supporting Documents

Attach the property deed:	File 1: <a href="#"> deed_lake.pdf</a>
Attach Water Test:	File 1: <a href="#"> 007-26.pdf</a> File 2: <a href="#"> 034-26.pdf</a>
Attach septic Certificate of Compliance:	<a href="#"> COC_-_19810_508th_Lane.pdf</a>
Attach a floor plan of the rental unit(s):	File 1: <a href="#"> 19810_508th_Lane_.pdf</a>
Attach a scaled site plan:	File 1: <a href="#"> Lot_map.pdf</a>

## Additional Info

	I am excited to have a few women come and do their hobby together such as a reading group, scrapbook or quilting group etc. I plan on advertising thru some churches and there group outing of 4-6 people. Or a family of 4-6 enjoy a week at our lake place. I am going to have a coffee bar, snack bar for them and welcome packets along with maybe a pontoon ride one day where I would come and take them out. I am excited to share my home. I am not planning on renting to snowmobilers even though we have them due to respecting neighbors and nice ordnance and property damage.
Additional Info (optional):	Thanks and have a good safe new year!  Debbie Rudnitski  Thank you and have a good day!

## 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

## Shamrock Township Lodging Tax Ordinance

If the proposed VRBO is located within Shamrock Township, please be aware there is a Lodging Tax Ordinance that will apply to this rental. For more information, please contact Shamrock Township at (218) 426-3736.

## 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 APPLICANT'S SOLE RESPONSIBILITY TO CONTACT OTHER LOCAL, COUNTY, STATE, OR FEDERAL AGENCIES 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 #67982 (01/05/2026) Expected Payment Method: Pay Online - Card or ECheck**

Charge	Cost	Quantity	Total
Recording Fee added 01/07/2026 9:39 AM This fee is non-refundable if denied.	\$46.00	x 1	\$46.00
Vacation/Short-Term Rental added 01/07/2026 9:39 AM This fee is non-refundable if denied.	\$650.00	x 1	\$650.00
<b>Grand Total</b>			<b>\$696.00</b>
		Payment 01/13/2026	\$696.00
		Due	\$0.00

## Conditions of Permit

None

[Results \(Go to top\)](#)

Signature accepted

Sent [Vacation/Short Term Rental App is scheduled for Planning Commission](#) notification to: wesellmn@yahoo.com

## Approvals

Approval	Signature
Applicant	Deborah Rudnitski 01/15/2026 12:14 PM witnessed by Shannon Wiebusch 502db634188f24bfc6824a74f3aaaf33e 1e5c3223448b0c9a5bd43174f4ca8708
#1 Administrative Staff	Shannon Wiebusch - 01/22/2026 3:46 PM 8dc1ffff66ef23f0492614c6b591134d7 a90a41cc8cfbc6dc9f7c9074cfb843ee
#2 Planning Commission	

[Print View](#)

NO DELINQUENT TAXES AND TRANSFER ENTERED  
THIS 23 DAY OF Jan 2020  
CERTIFICATE OF REAL ESTATE VALUE  
( )FILED - CRV#        (✓)NOT REQUIRED

Kurt Pysar

AITKIN COUNTY AUDITOR

Elizabeth Harmon

DEPUTY



A455307

Office of the County Recorder  
Aitkin County, Minnesota

I HEREBY CERTIFY THE WITHIN INSTRUMENT WAS  
FILED, AND/OR RECORDED ON 1/23/2020 11:00 AM

PACKAGE: 64970

REC FEE: \$46.00

Michael T. Moriarty, Aitkin County Recorder

## WARRANTY DEED

Individual(s) to Business Entity

STATE DEED TAX DUE HEREON: \$1.65

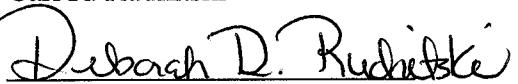
Date: January 21, 2020

FOR VALUABLE CONSIDERATION, Carl R. Rudnitski and Deborah D. Rudnitski, married to each other, Grantors, hereby convey and warrant to DC Investments Minnesota LLC, a Limited Liability Company under the laws of Minnesota ("Grantee"), real property in Aitkin County, Minnesota, legally described as follows:

→ See attached Exhibit A

together with all hereditaments and appurtenances belonging thereto, subject to the following exceptions: None

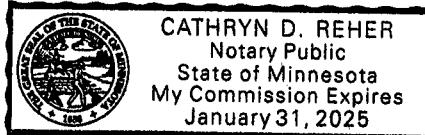
CONSIDERATION FOR THIS TRANSFER IS LESS THAN \$500.

  
Carl R. Rudnitski  
  
Deborah D. Rudnitski

STATE OF MINNESOTA      )  
                                  )ss.  
COUNTY OF HENNEPIN      )

The foregoing instrument was acknowledged before me this 21<sup>st</sup> day of January, 2020, by Carl R. Rudnitski and Deborah D. Rudnitski, married to each other, Grantors.

Notarial Stamp or Seal



  
SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT

THIS INSTRUMENT WAS DRAFTED BY:  
Long, Reher, Hanson & Price, P.A.  
5881 Cedar Lake Road  
Minneapolis, MN 55416  
(952) 929-0622

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

DC Investments Minnesota LLC  
11704 Arnold Palmer Trail NE  
Blaine, MN 55449

## EXHIBIT A

That part of Government Lot Three (3) of Section Nine (9), Township Forty-nine (49), Range Twenty-three (23), Aitkin County, Minnesota, to be described as follows:

Commencing at the Southwest corner of Lot 1, Ponderosa Shores, Aitkin County, Minnesota, according to the recorded plat thereof, on file in the office of the County Recorder; thence North 00 degrees 28 minutes 33 seconds East on an assigned bearing along the west line of said Lot 1 (the east line of said Government Lot 3) a distance of 624.88 feet to an iron pin monument, the actual point of beginning of the following tract of land to be described; thence South 44 degrees 04 minutes 20 seconds West a distance of 100.00 feet; thence North 07 degrees 13 minutes 49 seconds West a distance of 409.61 feet, more or less, to the shore line of Big Sandy Lake; thence Northeasterly, along said shore line to its intersection with the west line of said Lot 1, Ponderosa Shores; thence South 00 degrees 28 minutes 33 seconds West a distance of 400 feet, more or less, to the actual point of beginning.

Together with a 20 foot wide perpetual easement for road purposes over, under and across the following described property:

Government Lot Three (3) of Section Nine (9), Township Forty-nine (49), Range Twenty-three (23), Aitkin County, Minnesota.

Said easement being 10 feet to the right and 10 feet to the left of the following center line to be described: Commencing at the Southwest corner of Lot 1, Ponderosa Shores, Aitkin County, Minnesota; thence North 00 degrees 28 minutes 33 seconds East along the west line of said Lot 1 a distance of 624.88 feet; thence South 44 degrees 04 minutes 20 seconds West a distance of 100.00 feet; thence North 07 degrees 13 minutes 49 seconds West a distance of 62.70 feet to the point of beginning of said center line to be described; thence South 82 degrees 54 minutes 10 seconds West a distance of 47.31 feet; thence South 20 degrees 21 minutes 45 seconds West a distance of 195.48 feet; thence South 27 degrees 32 minutes 15 seconds East a distance of 364.00 feet; thence South 03 degrees 35 minutes 56 seconds East a distance of 189.42 feet, to the center line of Chippewa Trail (Shamrock Township Road) and said center line there terminating. This easement benefits That part of Government Lot Three (3) of Section Nine (9), Township Forty-nine (49), Range Twenty-three (23), to be described as follows: Commencing at the Southwest corner of Lot 1, Ponderosa Shores, Aitkin County, Minnesota, according to the recorded plat thereof, on file in the office of the County Recorder; thence North 00 degrees 28 minutes 33 seconds East on an assigned bearing along the west line of said Lot 1 (the east line of said Government Lot 3) a distance of 624.88 feet to an iron pin monument, the actual point of beginning of the following tract of land to be described; thence South 44 degrees 04 minutes 20 seconds West a distance of 100.00 feet; thence North 07 degrees 13 minutes 49 seconds West a distance of 409.61 feet, more or less, to the shore line of Big Sandy Lake; thence Northeasterly, along said shore line to its intersection with the west line of said Lot 1, Ponderosa Shores; thence South 00 degrees 28 minutes 33 seconds West a distance of 400 feet, more or less, to the actual point of beginning.

Aitkin County, Minnesota  
(Abstract Property)

### AITKIN COUNTY DEED TAX

No 12413 Date 1-23-20

1.65 Dollars Paid

Sue Shores  
COUNTY TREASURER

By Julie Hughes Deputy



## Septic System Compliance Inspection – Existing System

**Date:** 1/5/2026

**Property Owner:** DC Investments Minnesota LLC

**Ordered By:** Debbie

**Address:** 19810 508<sup>th</sup> Lane McGregor MN 55760

**Property ID:** 29-0-019812

**Inspector:** Tim Woodrow

A compliance inspection was performed at the above location. Previous evaluations were used to determine the level of seasonal saturated soil. The Soil Treatment Area (Drain field) was also inspected to ensure there was no ponding or leaking. The septic tank was 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**  
Soils are compliant
- **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

218-927-6175

1037 1st St. NW Aitkin, MN 56431

WWW.TIMBERLAKESSEPTIC.COM



**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 septic/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

Parcel ID# or Sec/Twp/Range:	29-0-019812	Local tracking number:	
Local regulatory authority info:	Aitkin County	Reason for Inspection	Permit
Property address:	19810 508 <sup>th</sup> Lane McGregor MN 55760		
Owner/representative:	DC Investments MN LLC	Owner's phone:	612-750-0897
Brief system description: 1100/550 Septic/Lift to a 15x38 pressure bed			

### System status

 System status on date (mm/dd/yyyy): 1/5/2026
 **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.

#### 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*

#### 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.

### Comments or recommendations

This system was snow covered at time of inspection

### 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):

## 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

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

**Attached supporting documentation:**

Other: \_\_\_\_\_

Not applicable

**Describe verification methods and results:**

## 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:	

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

**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 12/30/2025  
(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: \_\_\_\_\_

**Describe verification methods and results:**

**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  Unknown3b. 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\*  No3d. 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 requiredIs 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  Nob. 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)

## 5. Soil separation – Compliance component #5 of 5

Date of installation 8/23/2019  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:

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)

Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Yes  No\*

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)
- \_\_\_\_\_

### Indicate depths or elevations

A. Bottom of distribution media	100
B. Periodically saturated soil/bedrock	Below 97.0'
C. System separation	>36"
D. Required compliance separation*	31"

\*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:

**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 DC Investments Minnesota LLC, Debbie - Rep

 Property address: 19810 508th Ln, McGregor, MN 55760

 Local Regulatory Authority: Aitkin County

 Parcel ID: 29-0-019812

### System status

 System status on date (mm/dd/yyyy): 12/30/2025
 **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\*  No

 The SSTS has a sewage tank that leaks below the designed operating depth - **"Failure to Protect Groundwater."**
 Yes\*  No

 The 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 Inc

### Designated Certified Individual (DCI) information

 Print name: Dan Swanson

 Business license number: L455

 Certification number: C6023

*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: Dan Swanson

*(This document has been electronically signed.)*

 Date (mm/dd/yyyy): 12/30/2025

**SUBSURFACE SEWAGE TREATMENT SYSTEM INSPECTION FORM  
AITKIN COUNTY, MINNESOTA**

Township Shamrock Date of Inspection 06/06/2019 08/23/2019 App. Number 43798

Owner Carl & Debbie Rudnitski Parcel Number 29-0-019812

Project Address 19810 508th Ln Installer Brad Eddy

City McGregor Zip Code 55760 Type 1 3BR PB

New  Repair  DIST. or DROP BOX & TYPE Pressure Bed

**SETBACKS:**

Buildings to tank(s) 35@ TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:

Buildings to drainfield 100@+ Trench/Bed depth 24"

Well(s) 50' or 100' DW: 70@ to tank; 53@ to adj. DW Trench/Bed length 38@

Lake/Creek/Wetland 100@+ to Big Sandy Lake Trench/Bed bottom width 15@

SEPTIC TANKS: New  Existing  Trench spacing (4) 1.5" lats; 3@ sp.

Number of tanks installed 1 Drainfield rock below pipe 9"

Liquid capacity and type 1120 part 1650 Jac. combo Size of gravelless pipe NA

Type of baffle Plastic Depth of backfill 12"

Inspection pipes --- Absorption area: square feet 570 sq. ft.

Manholes size 24" lineal feet NA

Manhole to grade Yes  No  MOUNDS:

PUMPS: New  Existing  Percent slope \_\_\_\_\_

Tank capacity and type 533 part combo Upslope sand width \_\_\_\_\_

Pump manufacturer & model # Zoeller BN 152 Downslope sand width \_\_\_\_\_

Horsepower & GPM 0.5 HP 28 GPM Sideslope sand width \_\_\_\_\_

Feet of head 18@ Drainfield rock below pipe \_\_\_\_\_

Gallons per cycle 113 GPC Depth of sand below rock \_\_\_\_\_

Size of discharge line 1.5" Perforation size & spacing \_\_\_\_\_

Type & location of alarm Electronic on tank Pipe size & spacing \_\_\_\_\_

Water meter NA Dimensions of rock bed \_\_\_\_\_

Dimensions of sand base \_\_\_\_\_

Final cover \_\_\_\_\_

**DRAWING OF SYSTEM: (include soils)**

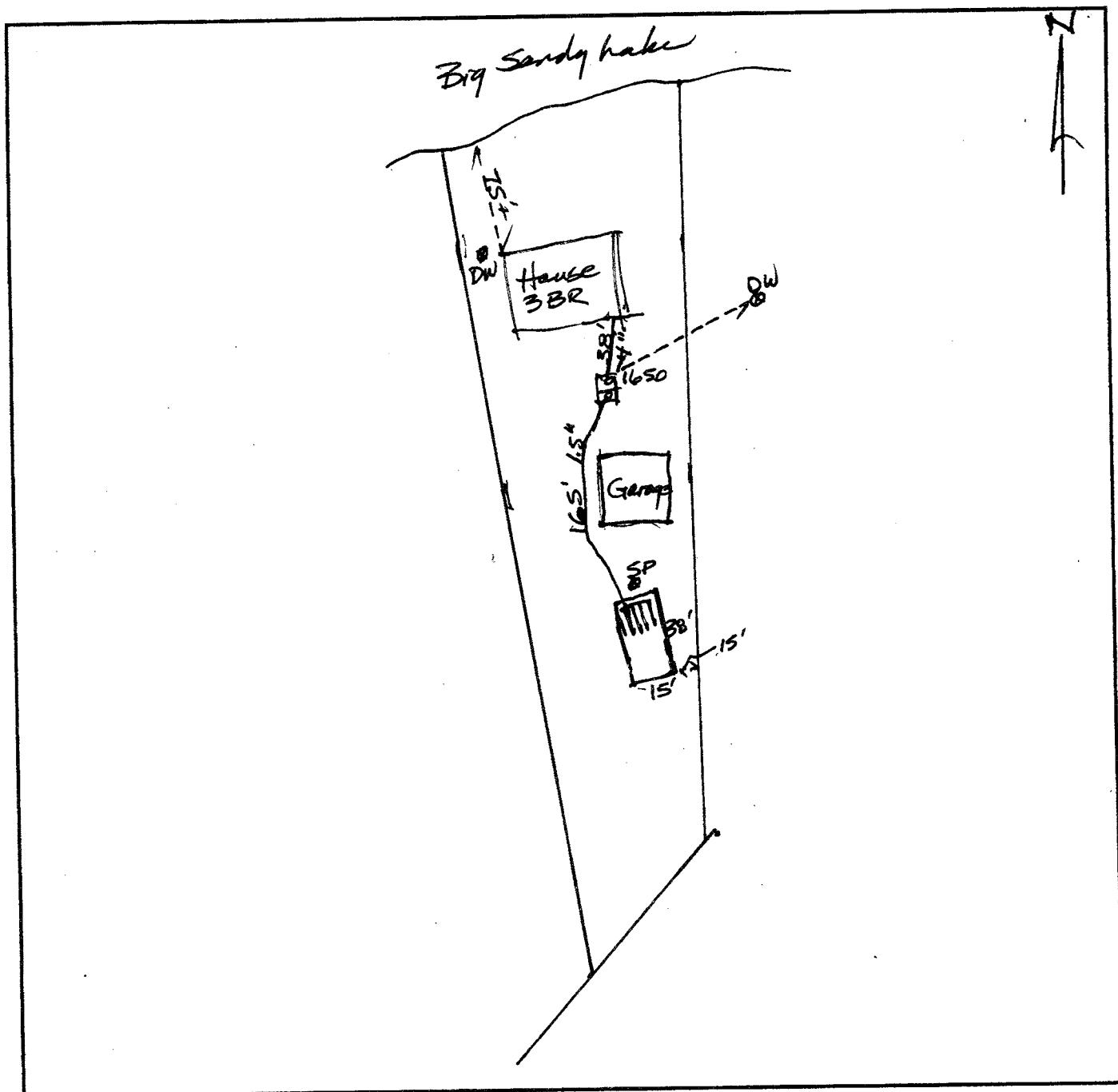
See attached site plan

Inspector's Comments: \_\_\_\_\_

Inspector's Signature Bryan Hargrave Installer's Signature Brad Eddy

Rev:1/13 White - County Yellow - Applicant Pink - Installer

## Site Drawing



Soils			
A	0-4"	10 YR 3/2	LS <5
Bw	4-25"	7.5 YR 4/4	LS <5
C1	25"-42"	7.5 YR 6/5	MS 5-10
C2	42-61"	7.5 YR 5/4	MS <5
C3	61-70"	7.5 YR 6/4	MS <10

# FIELD EVALUATION SHEET

PRELIMINARY EVALUATION DATE

PROPERTY OWNER: Carl & Debbie Radnitski  
ADDRESS: 14810 508th Ln CITY, STATE, ZIP: McGregor MN 55760  
PHONE 612-750-0897

LEGAL DESCRIPTION:

PIN# 39-0-019812 SEC. T. R. TWP NAME Shore Rock  
FIRE# LAKE/RIVER LAKE CLASS OHWL FT.

## DESCRIPTION OF SOIL TREATMENT AREAS

	AREA #1	AREA #2	REFERENCE BM ELEV. 100 FT.
DISTURBED AREAS	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	REFERENCE BM DESCRIPTION
COMPACTED AREAS	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	HW1 mark 01 0410
FLOODING	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	Tree
RUN ON POTENTIAL	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	
SLOPE %			
DIRECTION OF SLOPE			
LANDSCAPE POSITION			
VEGETATION TYPES	Young Aspen - Under brush		

DEPTH TO STANDING WATER OR MOTTLED SOIL: BORING# 1 72", 1A , 272", 2A

BOTTOM ELEVATION--FIRST TRENCH OR BOTTOM OF ROCK BED: #1 91-2 FT., #2 FT.

SOIL SIZING FACTOR: SITE #1 .76 , SITE #2 .78

## CONSTRUCTION RELATED ISSUES:

LIC# L552

SITE EVALUATOR SIGNATURE: 

SITE EVALUATOR NAME: Bradley Eddy

TELEPHONE# 218-426-4285

LUG REVIEW

DATE

Comments:

SOIL BORING LOGS ON REVERSE SIDE

## SOILS CHARTS FOR BOTH PROPOSED AND ALTERNATE SITES

### 1 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-6"	Topsoil	
6"-36"	7.5 YR 5/4 Sandy with few rocks	
36"-72"	10 YR 6/4 Sandy less rocks	

### 2 (PROPOSED) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR

### 1 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR
0-6"	Topsoil	
6"-36"	7.5 YR 5/4 Sandy with few rocks	
36"-72"	10 YR 6/4 Sandy	

### 2 (ALTERNATE) SOILS DATA

DEPTH (INCHES)	TEXTURE	MUNSELL COLOR

ADDITIONAL SOIL BORINGS MAY BE REQUIRED



# Instrumental Research, Inc.

7800 Main Street NE

Fridley, MN 55432.

**Ph. 763-571-3698 Fax. 763-571-3372**

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## LABORATORY ANALYSIS REPORT 007-26

Monday, January 12, 2026

### MDH CERTIFIED LABORATORY 027-003-130 EPA LAB CODE MN 00076

Attn: Debbie Rudnitski

11704 Arnold Palmer Trl  
Blaine, MN 55449

Date Collected: 1/5/2026  
Date Received: 1/5/2026  
Collected By: Client

---

Parameter/Method	Sample ID	Results	Units	MDL	Reporting Limit	Analysis Date
19810 508th Ln, MacGregor MN						
(Total) Coliform Bacteria SM 9223 B (Colilert)	Kitchen Faucet (007-26-01B)	Present	(P-A)	Absent	Absent	1/5/2026
Arsenic** EPA 200.9 Rev 2.2	Kitchen Faucet (007-26-01C)	<2.0	ug/L		2.0	1/8/2026
Escherichia coli SM 9223 B (Colilert)	Kitchen Faucet (007-26-01B)	Absent	(P-A)	Absent	Absent	1/5/2026
Lead** SM 3113 B-99	Kitchen Faucet (007-26-01A)	<2.5	ug/L		2.5	1/7/2026
Manganese** Hach 8149:PAN	Kitchen Faucet (007-26-01C)	0.074	mg/L			1/12/2026
Nitrate SM 4500-NO3 E-11	Kitchen Faucet (007-26-01D)	0.041	mg/L	0.0025	0.030	1/9/2026

---

The results in this report apply only to the samples analyzed in accordance with the chain of custody document. This report must be reproduced in its entirety.

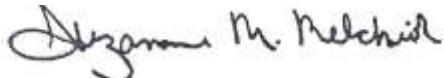
**MDH CERTIFIED LABORATORY 027-003-130 EPA LAB CODE MN 00076**

MDL = Method detection level Temp Blank >4.0 degrees C \*\* Subcontracted to Water Labs File #103988

Sample was collected on 1/5/26 at 13:15, received at IRI on 1/5/26 at 15:51, and processed for Total Coliform on 1/5/26 at 16:11. Sample DOES NOT meet MDH and EPA primary drinking water requirements for safe drinking water. The results are only indicative for the sample tested from the sample point on the date collected.

All analyses were performed using Minnesota Department of Health approved methodologies.

Report submitted by,



SUZANNE MELCHIOR, LABORATORY MANAGER

SM/kg

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7800 Main Street NE

Fridley, MN 55432.

**Ph. 763-571-3698 Fax. 763-571-3372**

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**LABORATORY ANALYSIS REPORT** 034-26

Tuesday, January 13, 2026

**MDH CERTIFIED LABORATORY 027-003-130 EPA LAB CODE MN 00076**

Attn: Debbie Rudnitski

11704 Arnold Palmer Trl  
Blaine, MN 55449

Date Collected: 1/12/2026  
Date Received: 1/12/2026  
Collected By: Client

---

Parameter/Method	Sample ID	Results	Units	MDL	Reporting Limit	Analysis Date
(Total) Coliform Bacteria SM 9223 B (Colilert)	19810 508th Ln- McGregor	Absent	(P-A)	Absent	Absent	1/12/2026

MDL = Method detection level Temp Blank >4.0 degrees C

Sample was collected on 1/11/26 at 11:30, received at IRI on 1/12/26 at 12:19, and processed for Total Coliform bacteria at 1/12/26 at 12:35. Sample DOES MEET MDH and EPA primary drinking water requirements for safe drinking water. The results are only indicative for the sample tested from the sample point on the date collected.

All analyses were performed using Minnesota Department of Health approved methodologies.

Report submitted by,

SUZANNE MELCHIOR, LABORATORY MANAGER

SM/kg

The results in this report apply only to the samples analyzed in accordance with the chain of custody document. This report must be reproduced in its entirety.



FRONT ELEVATION

NOTICE: THESE PLANS ARE DESIGNED EXCLUSIVELY FOR THE USE OF  
HOME PLANNING ASSOCIATES INC. AND  
ANY  
REPRODUCTION OR OTHER USE IS STRICTLY PROHIBITED, WITHOUT THE  
EXPRESS WRITTEN CONSENT OF HOME PLANNING ASSOCIATES INC.

ALTHOUGH EVERY EFFORT HAS BEEN MADE IN DESIGNING AND  
PREPARING THESE PLANS AND CHECKING FOR ACCURACY, THE  
INSTALLER, OWNER, OR CONTRACTOR MUST VERIFY ALL DETAILS AND  
DIMENSIONS AND BE RESPONSIBLE FOR ANY CHANGES OR  
ADJUSTMENTS REQUIRED DURING CONSTRUCTION.

REVISIONS  
8-23-18

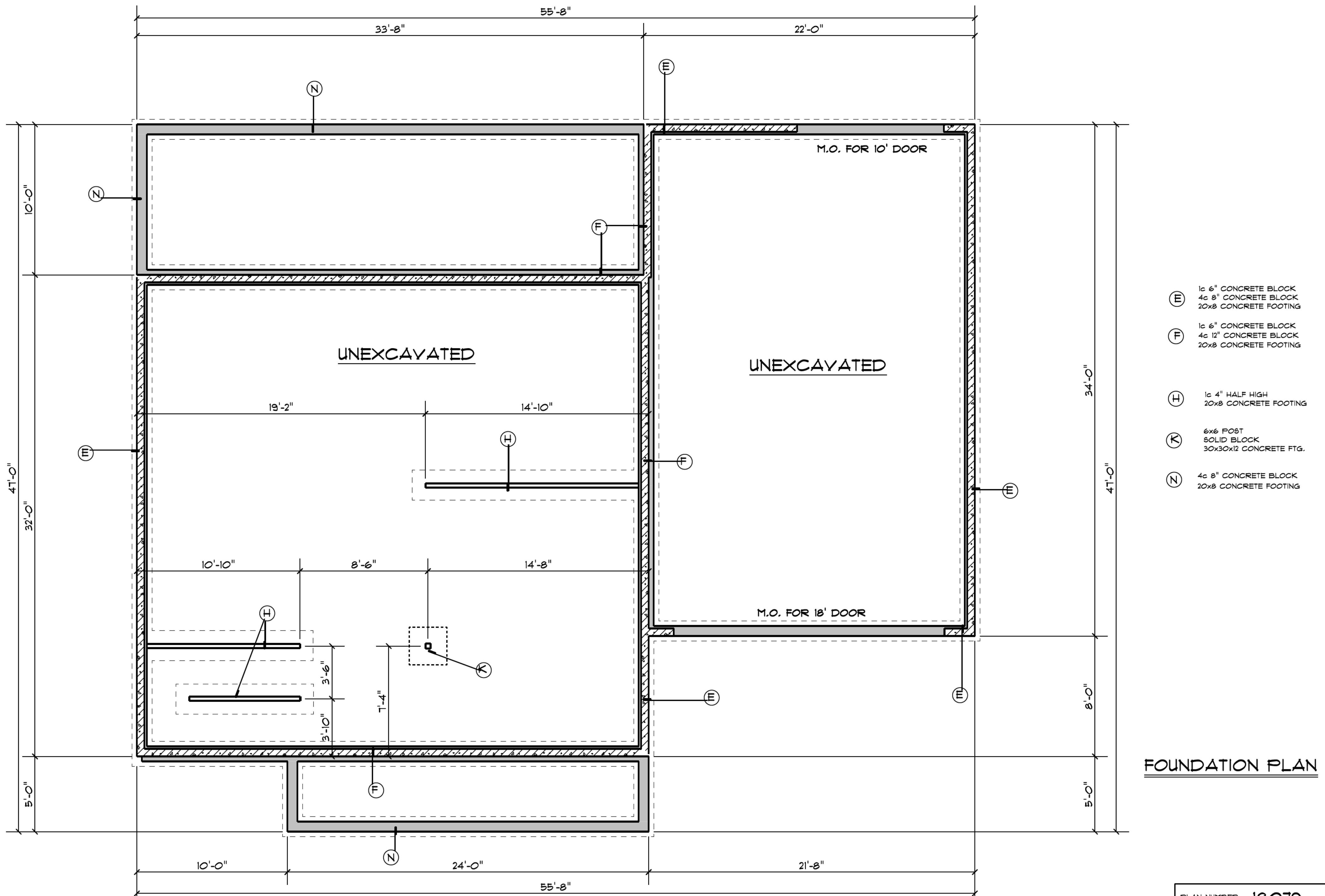
SHEET NUMBER  
OF 6 ONE SHEETS  
PLAN NUMBER  
18079

HOME PLANNING ASSOCIATES INC.

8329 CENTRAL AVENUE NE  
SPRING LAKE PARK, MINNESOTA 55432  
(763) 786-6069 fax (763) 786-5820  
SPRING LAKE PARK LUMBER BLDG

PLAN FOR:  
DEBBIE AND  
CARL RUDNITSKI

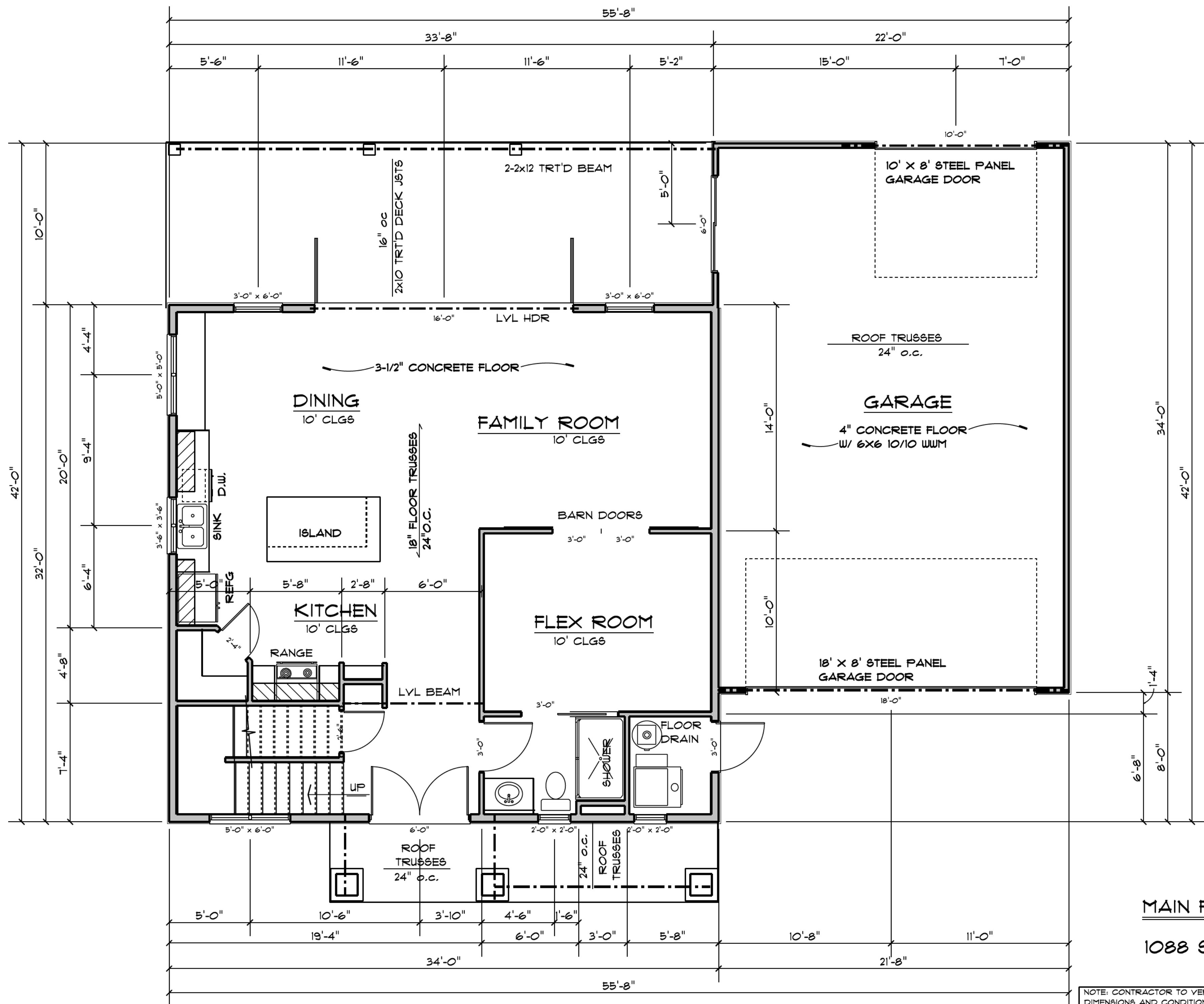
SQ. FT.  
2176  
DATE:  
6-26-2018

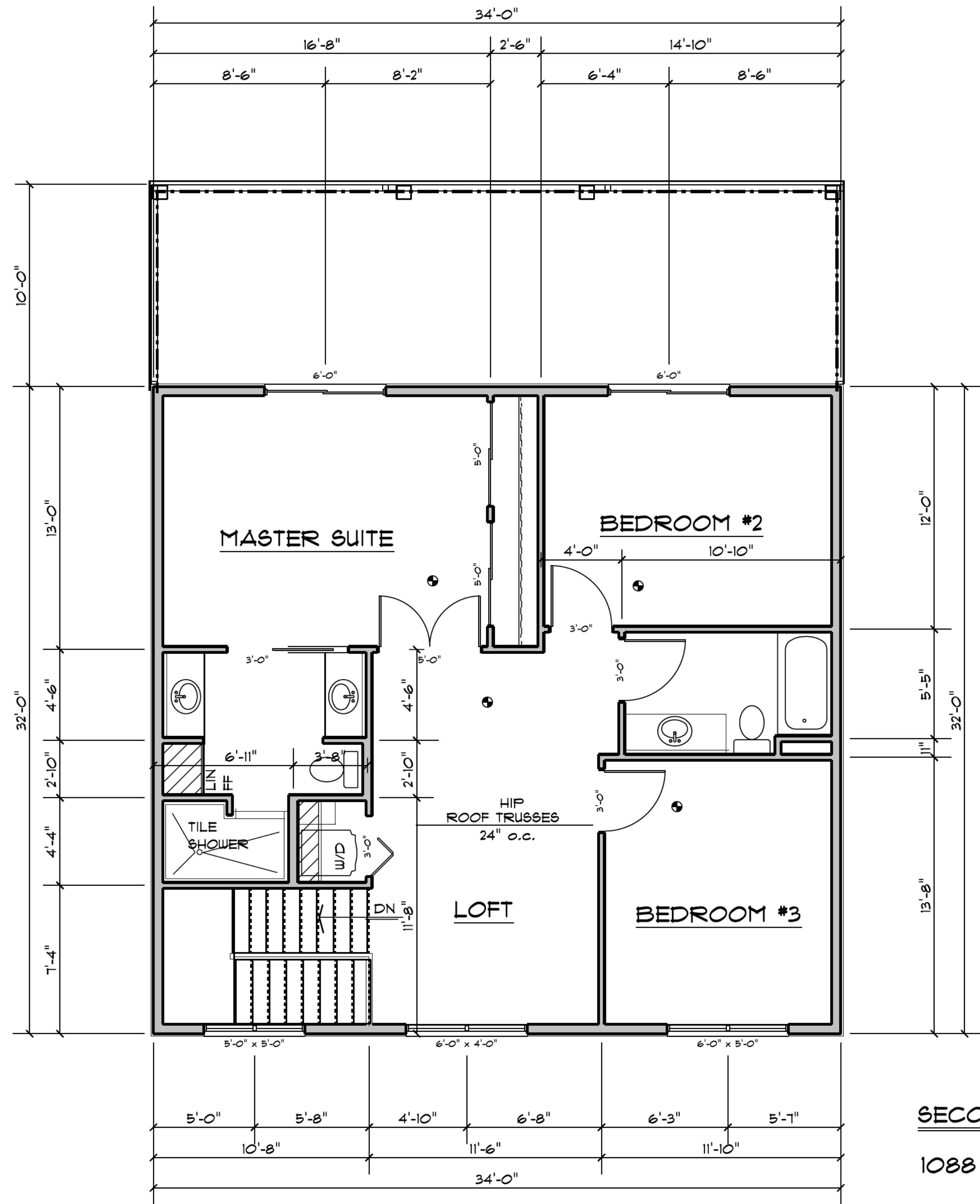


NOTE: CONTRACTOR TO VERIFY ALL  
DIMENSIONS AND CONDITIONS IN THE FIELD  
AND BE RESPONSIBLE FOR SAME

PLAN NUMBER: 18079

SHEET 2 OF 6

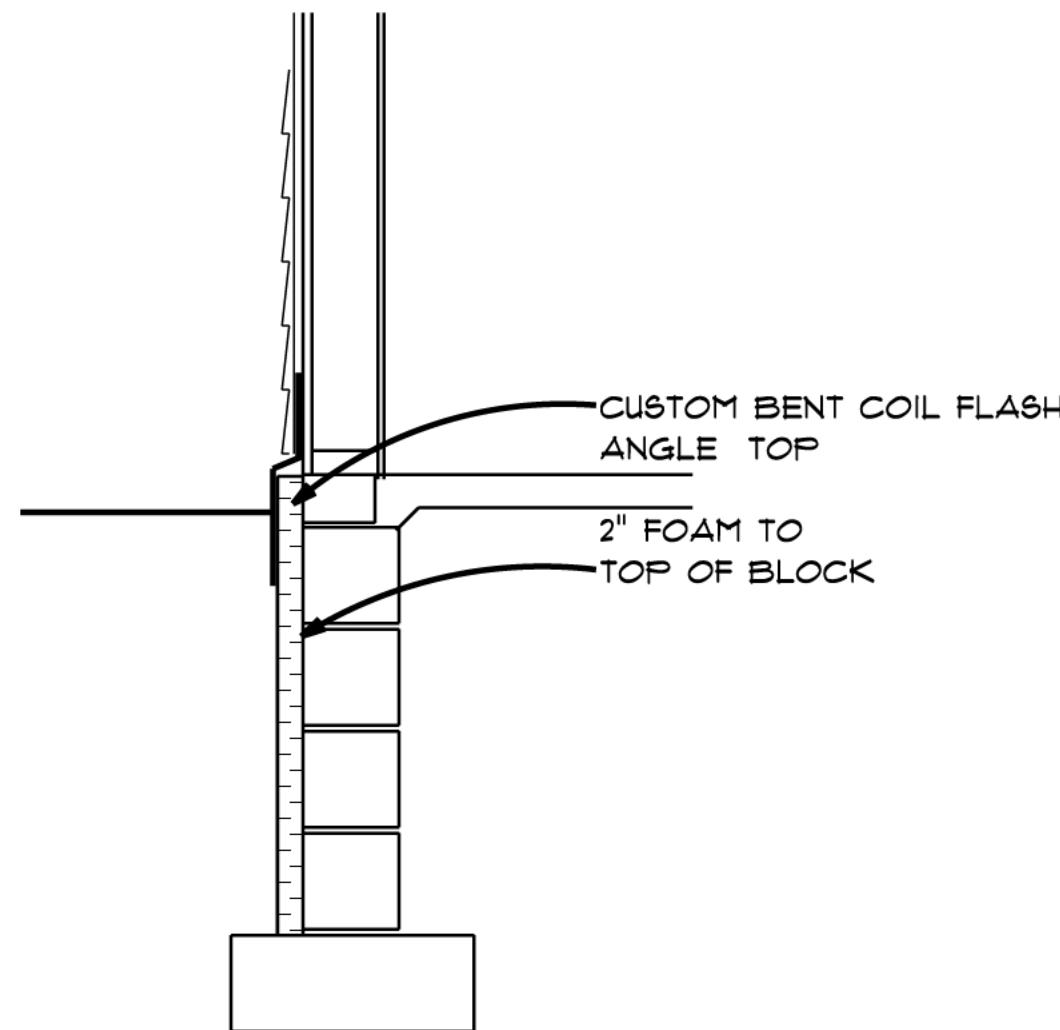




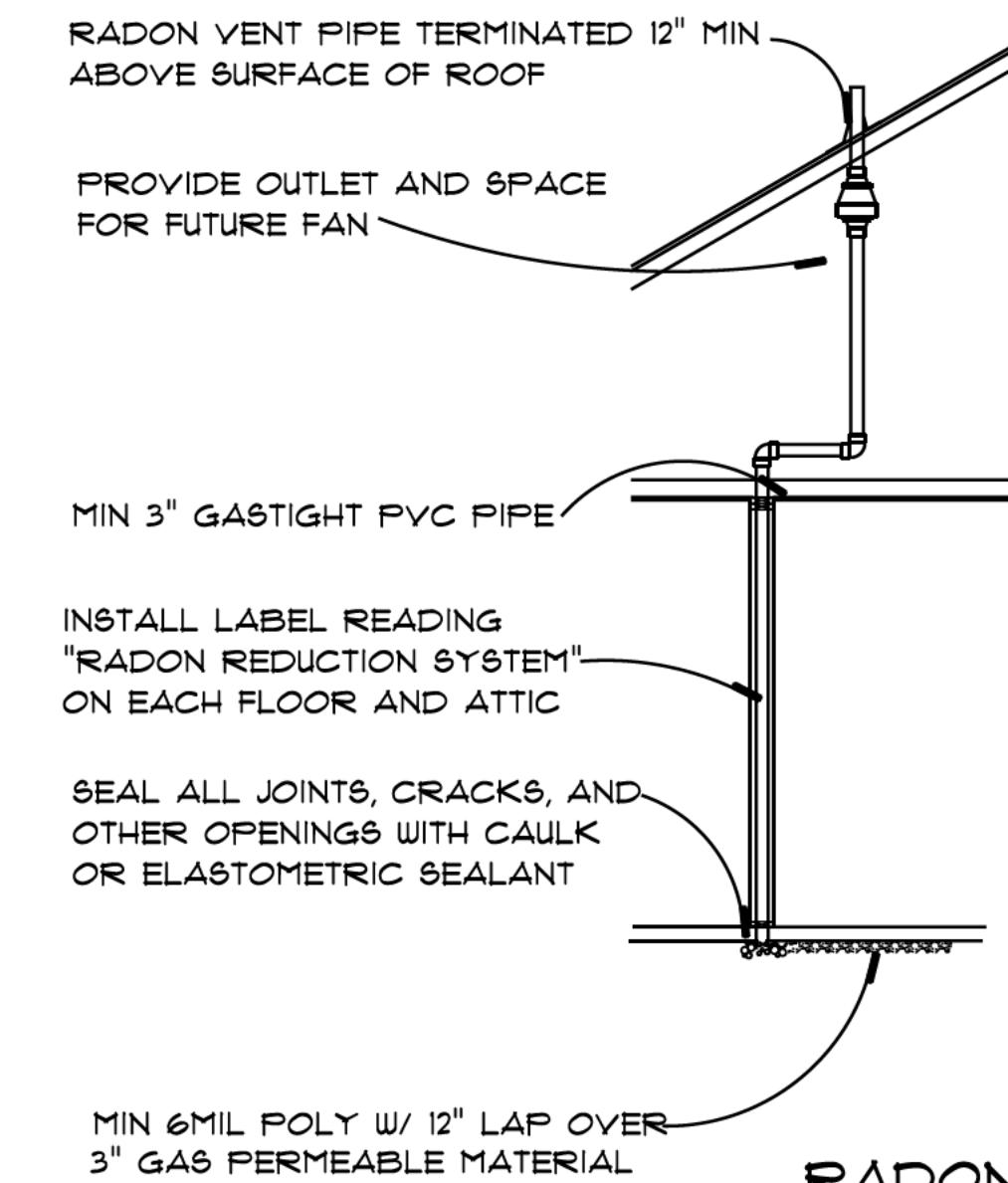
NOTE: CONTRACTOR TO VERIFY ALL  
DIMENSIONS AND CONDITIONS IN THE FIELD  
AND BE RESPONSIBLE FOR SAME

PLAN NUMBER: 18079

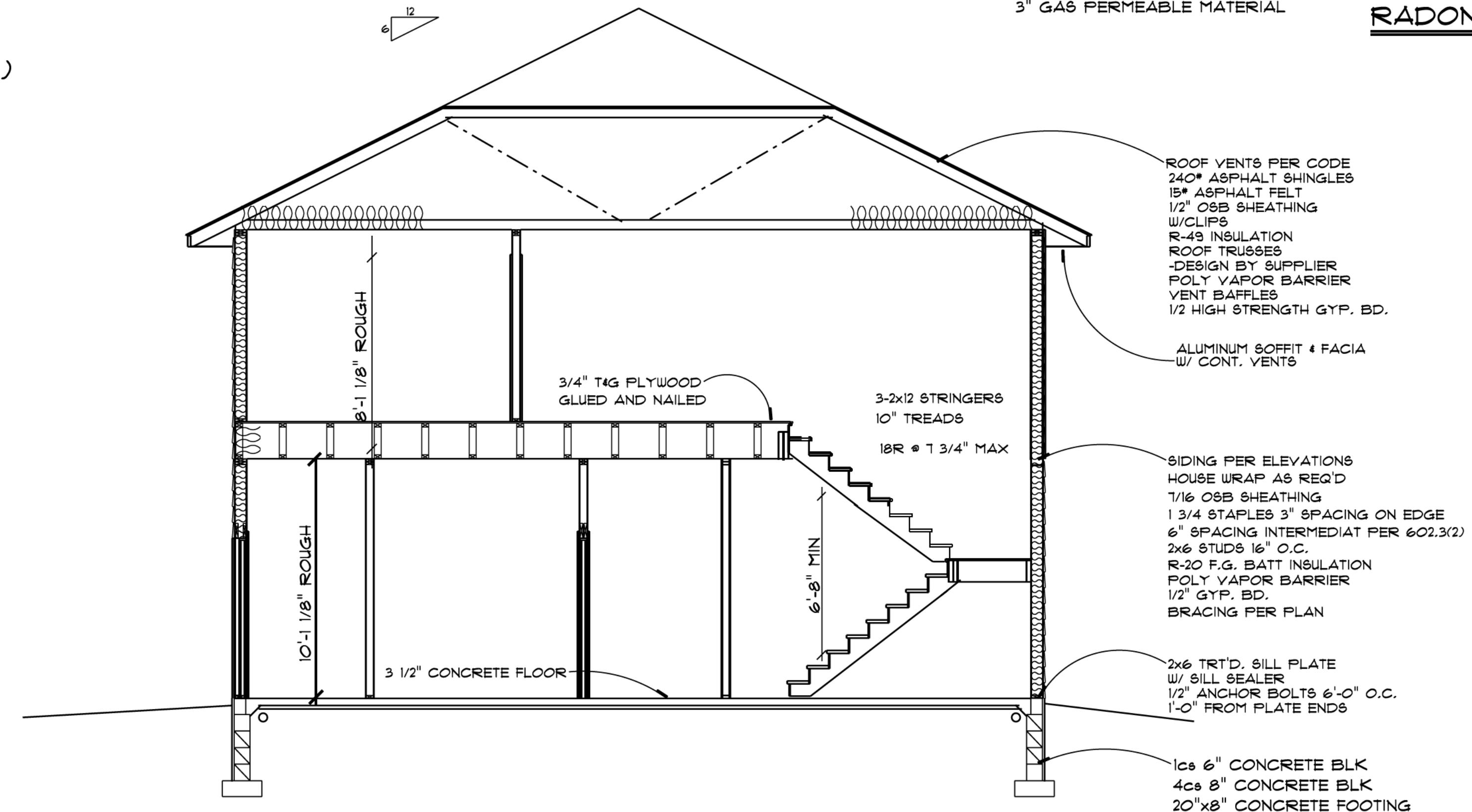
SHEET OF



FLASHING DETAIL (TYP)



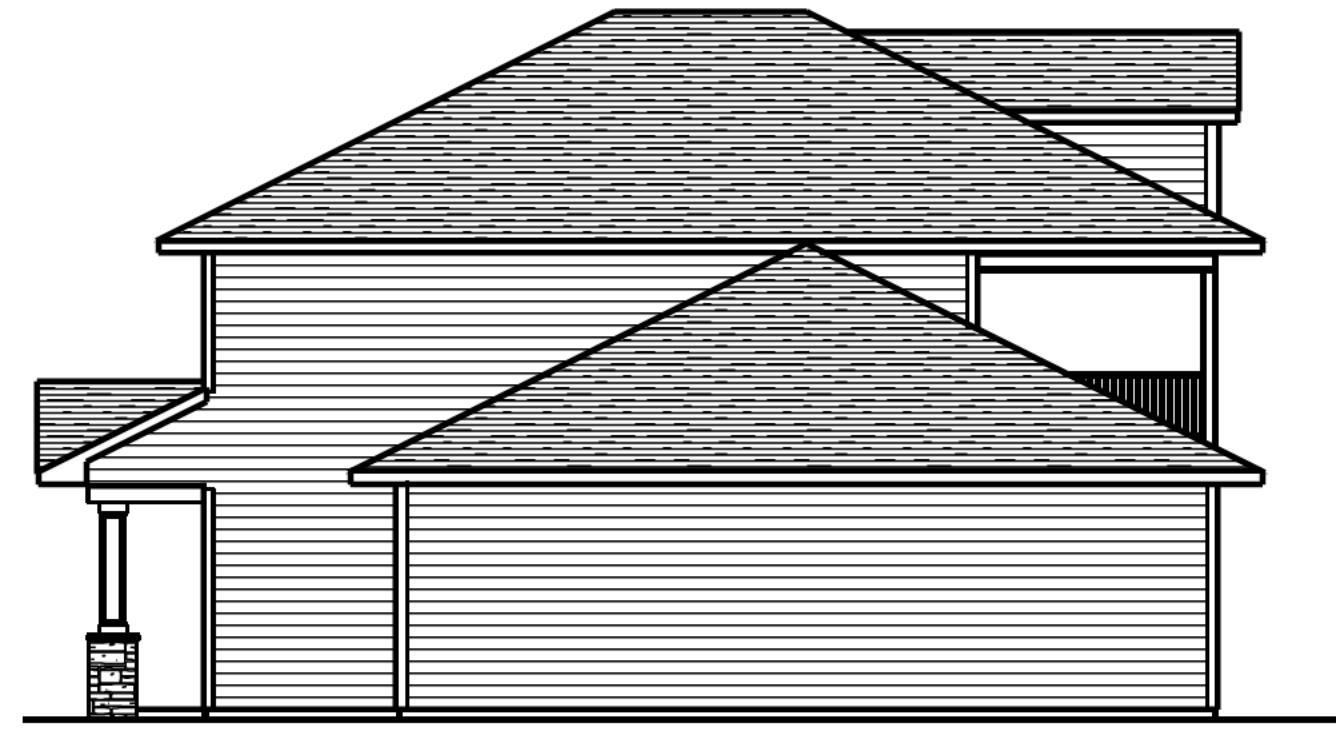
**RADON DETAIL**  
NO SCALE



**CROSS SECTION**

NOTE: CONTRACTOR TO VERIFY ALL DIMENSIONS AND CONDITIONS IN THE FIELD AND BE RESPONSIBLE FOR SAME

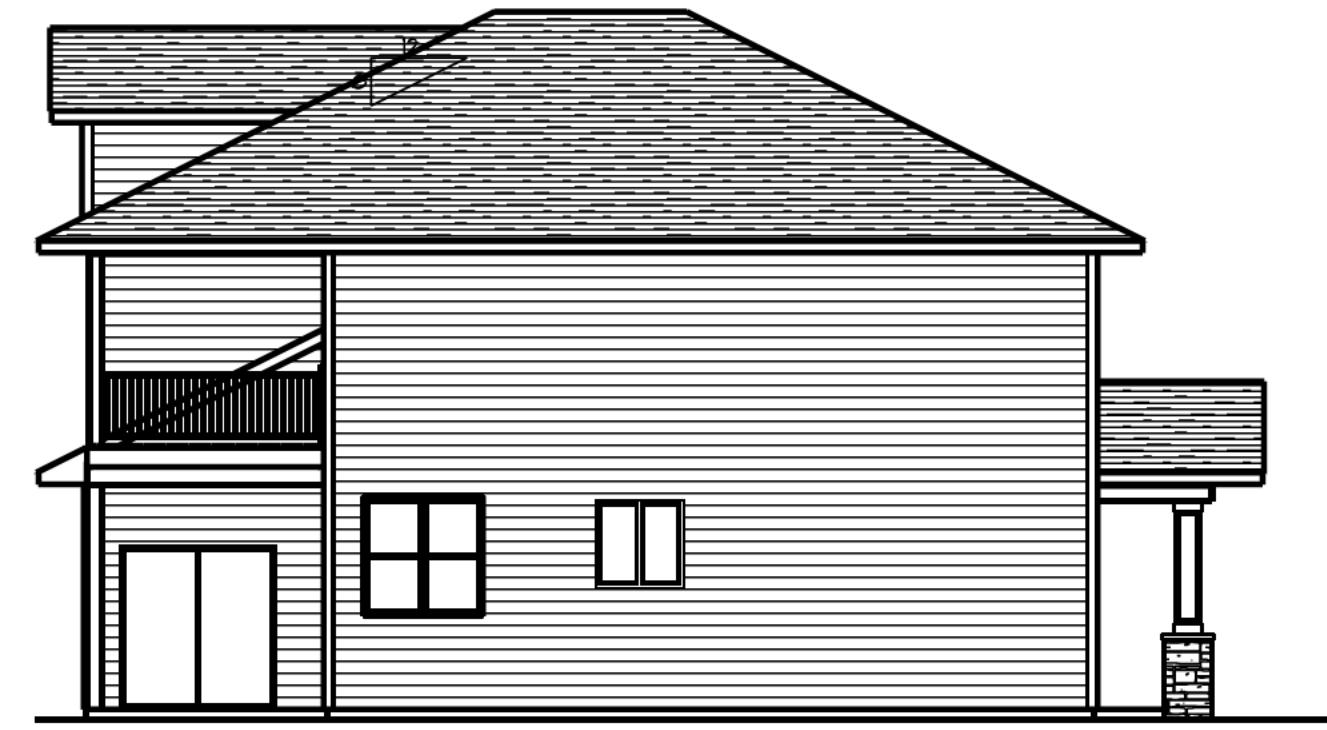
PLAN NUMBER: 18079  
SHEET 5 OF 6



RIGHT ELEVATION

24O\* ASPHALT SHINGLES

8" HARDIEPLANK  
LAP SIDING



LEFT ELEVATION



REAR ELEVATION

12/6

FLASE DORMER

PLAN NUMBER: 18079

NOTE: CONTRACTOR TO VERIFY ALL  
DIMENSIONS AND CONDITIONS IN THE FIELD  
AND BE RESPONSIBLE FOR SAME

SHEET 6 OF 6

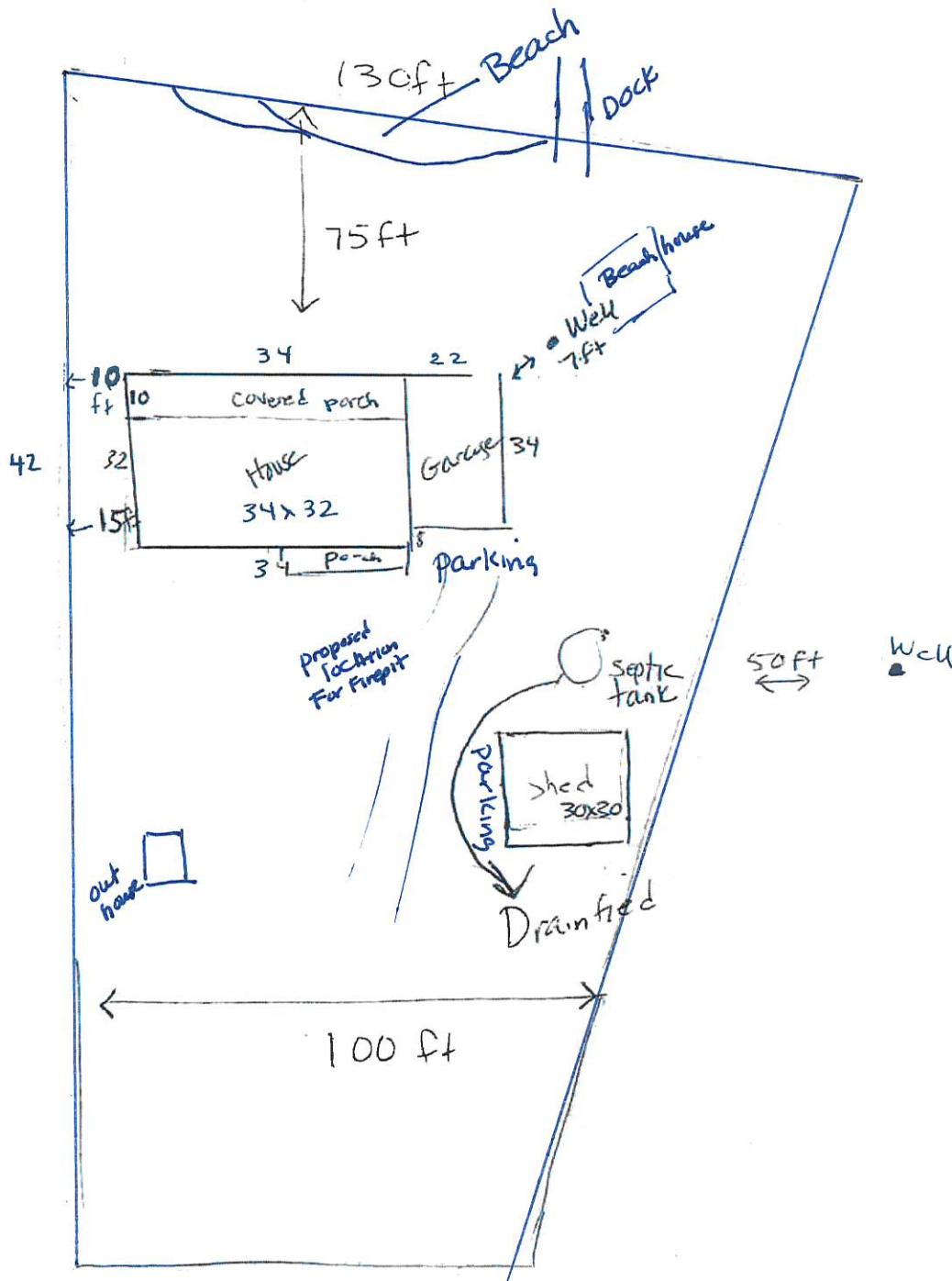
Shannon

Amended site plan

8-27-18

Big Sandy  
Lake

Approved by Bryan on 8/30/18. SW



19810 508½ Ln. Mc Gregor