

**DISCLOSURE STATEMENT: SUBSURFACE SEWAGE TREATMENT SYSTEM**

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- 1. Date SEPT 6 2019
- 2. Page 1 of 11 pages: THE REQUIRED MAP IS
- 3. ATTACHED HERETO AND MADE A PART HEREOF

4. Property located at 16047 HAVEN LN in the City of Park Rapids  
 5. County of Hubbard State of Minnesota, legally described as follows or on  
 6. attached sheet (the "Property") FD# 16.68.00300 1.54 AC LKE Northwoods  
 7. SHORES Lot 3 BLK 1

8. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any party(ies) in this transaction, and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.

10. **BUYER(S) AND SELLER(S) MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND/OR INSPECTIONS OF THE SUBSURFACE SEWAGE TREATMENT SYSTEM AND TO PROVIDE FOR APPROPRIATE PROVISIONS IN A CONTRACT BETWEEN BUYER(S) AND SELLER(S) WITH RESPECT TO ANY ADVICE/INSPECTION/DEFECTS.**

13. **SELLER'S INFORMATION:** The following Seller disclosure satisfies MN Statutes Chapter 115.55. Seller discloses the following information with the knowledge that even though this is not a warranty, prospective Buyers may rely on this information in deciding whether and on what terms to purchase the Property. The Seller(s) authorizes any licensee(s) representing or assisting any party(ies) in this transaction to provide a copy of this statement to any person or entity in connection with any actual or anticipated sale of the Property.

18. Unless Buyer and Seller agree to the contrary in writing before the closing of the sale, a Seller who fails to disclose the existence or known status of a subsurface sewage treatment system at the time of sale, and who knew or had reason to know of the existence or known status of the system, is liable to Buyer for costs relating to bringing the system into compliance with subsurface sewage treatment system rules and for reasonable attorney fees for collection of costs from Seller. An action under this subdivision must be commenced within two years after the date on which Buyer closed the purchase of the real property where the system is located.

24. Legal requirements exist relating to various aspects of location and status of subsurface sewage treatment systems. Buyer is advised to contact the local unit(s) of government, state agency or qualified professional which regulates subsurface sewage treatment systems for further information about these issues.

27. The following are representations made by Seller(s) to the extent of Seller(s) actual knowledge. This information is a disclosure and is not intended to be part of any contract between Buyer and Seller.

29. **SUBSURFACE SEWAGE TREATMENT SYSTEM DISCLOSURE:** (Check the appropriate boxes.)

30. Seller certifies that the following subsurface sewage treatment system is on or serving the above-described Property.

- 31. TYPE: (Check appropriate box(es) and indicate location on attached Location Map.)
- 32.  Septic Tank:  with drain field  with mound system  seepage tank  with open end
- 33. Is this system a straight-pipe system?  Yes  No  Unknown

- 34.  Sealed System (holding tank)
- 35.  Other (Describe): \_\_\_\_\_

- 36. Is the subsurface sewage treatment system(s) currently in use?  Yes  No
- 37. Is the above-described Property served by a subsurface sewage treatment system
- 38. not located on the Property?  Yes  No

39. If "Yes," please explain: \_\_\_\_\_

41. If "No," is subsurface sewage treatment system entirely within Property boundary lines, including set back requirements? YES

43. Comments: \_\_\_\_\_





DISCLOSURE STATEMENT: SUBSURFACE SEWAGE TREATMENT SYSTEM

45. Property located at 16047 HAVEN LN Park Rapids, MN

46. Is the subsurface sewage treatment system(s) a shared system? [ ] Yes [X] No

47. If "Yes,"

48. (1) How many properties or residences does the subsurface sewage treatment system serve? N/A

49. (2) Is there a maintenance agreement for the shared subsurface sewage treatment system? [ ] Yes [ ] No

50. If "Yes," what is the annual maintenance fee? \$ N/A

51. NOTE: If any water use appliance, bedroom or bathroom has been added to the Property, the system may no longer comply with applicable sewage treatment system laws and rules.

52. Seller or transferor shall disclose to Buyer or transferee what Seller or transferor has knowledge of relative to the compliance status of the subsurface sewage treatment system. System was installed & compliant on 10/25/13

53. Any previous inspection report in Seller's possession must be attached to this Disclosure Statement.

54. When was the subsurface sewage treatment system installed? SEE ATTACHED

55. Installer Name/Phone SEE ATTACHED

56. Where is tank located? County Report

57. What is tank size? UNKNOWN

58. When was tank last pumped? UNKNOWN

59. How often is tank pumped? UNKNOWN

60. Where is the drain field located? SEE REPORT

61. What is the drain field size? SEE REPORT

62. Describe work performed to the subsurface sewage treatment system since you have owned the Property. SEE REPORT

63. Date work performed/by whom:

64. Approximate number of people using the subsurface sewage treatment system 2

65. showers/baths taken per week 6

66. wash loads per week 4

67. NOTE: Changes in the number of people using the subsurface sewage treatment system or volume of water used may affect the subsurface sewage treatment system performance.

68. Distance between well and subsurface sewage treatment system? SEE REPORT (Approx 60')

69. Have you received any notices from any government agencies relating to the subsurface sewage treatment system? (If "Yes", see attached notice.) [ ] Yes [X] No

70. Are there any known defects in the subsurface sewage treatment system? [ ] Yes [X] No

71. If "Yes", please explain:

72. \_\_\_\_\_

73. \_\_\_\_\_

74. \_\_\_\_\_

75. \_\_\_\_\_

76. \_\_\_\_\_

77. \_\_\_\_\_

78. \_\_\_\_\_

79. \_\_\_\_\_

80. \_\_\_\_\_

81. \_\_\_\_\_

82. \_\_\_\_\_

83. \_\_\_\_\_

84. MN-DS-SSTS-2 (8/14)



**SUBSURFACE SEWAGE TREATMENT  
SYSTEM DISCLOSURE STATEMENT**

85. Page 3

86. Property located at 16047 HAVEN LN PARK RAPIDS, MN

87. **SELLER'S STATEMENT:** *(To be signed at time of listing.)*

88. Seller(s) hereby states the facts as stated above are true and accurate and authorizes any licensee(s) representing or  
89. assisting any party(ies) in this transaction to provide a copy of this Disclosure Statement to any person or entity in  
90. connection with any actual or anticipated sale of the property. A seller may provide this Disclosure Statement to a real  
91. estate licensee representing or assisting a prospective buyer. The Disclosure Statement provided to the real estate  
92. licensee representing or assisting a prospective buyer is considered to have been provided to the prospective buyer.  
93. If this Disclosure Statement is provided to the real estate licensee representing or assisting the prospective buyer, the  
94. real estate licensee must provide a copy to the prospective buyer.

95. **Seller is obligated to continue to notify Buyer in writing of any facts that differ from the facts disclosed herein**  
96. **(new or changed) of which Seller is aware that could adversely and significantly affect the Buyer's use or**  
97. **enjoyment of the property or any intended use of the property that occur up to the time of closing. To disclose**  
98. **new or changed facts, please use the Amendment to Disclosure Statement form.**

99. X Thomas Sauer 9-6-2019 X Keith W. Johnson 9-6-19  
(Seller) (Date) (Seller) (Date)

100. **BUYER'S ACKNOWLEDGEMENT:** *(To be signed at time of purchase agreement.)*

101. I/We, the Buyer(s) of the property, acknowledge receipt of this *Disclosure Statement: Subsurface Sewage Treatment*  
102. *System and Location Map* and agree that no representations regarding facts have been made other than those made  
103. above.

104. \_\_\_\_\_ (Buyer) \_\_\_\_\_ (Date) \_\_\_\_\_ (Buyer) \_\_\_\_\_ (Date)

105. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS HEREIN AND ARE**  
106. **NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.**





**LOCATION MAP**

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1. Page \_\_\_\_\_ of \_\_\_\_\_ pages

2. Please use the space below to sketch the real property being sold and, to Seller's knowledge, the approximate location of any of the following on the property.

4.  SUBSURFACE SEWAGE TREATMENT SYSTEM  WELL  METHAMPHETAMINE PRODUCTION AREA  
(Check all that apply.)

5. Include approximate distances from fixed reference points such as streets, buildings and landmarks.

6. Property located at 16047 HAUEN LN PARK RAPIDS, MN

7. \_\_\_\_\_

SEE ATTACHED  
COUNTY REPORT

8. ATTACH ADDITIONAL SHEETS AS NEEDED.

9. Seller and Buyer initial: XAS 9-6-2019  
(Seller) (Date) (Buyer) (Date)

10. [Signature] 9-6-19  
(Seller) (Date) (Buyer) (Date)

11. ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER

**HUBBARD COUNTY ENVIRONMENTAL SERVICES  
UNIFORM RECORD OF INDIVIDUAL SEWAGE TREATMENT SYSTEM**

DATE	10/25/2013	PERMIT NO.	131-SS-13
OWNER	Oscar Vaadeland		
LAKE NAME	Potato	PARCEL NO.	16.68.00300
LEGAL DESCRIPTION	Lot 3 Blk 1 Northwood Shores		
INSTALLER	Backhoe Pete # 909		

**SEPTIC TANK**

- a. Permit required (size) N/A
- b. Size/Type/Manufacturer 1000 gal. precast - existing tank
- c. Distance from well 50ft+
- d. Distance from house 10ft+
- e. Distance from property line 10ft+

**ABSORPTION AREA**

Sized For: 3 br type 1

- a. Permit required (size) Adding 304 sqft (101 Lnft) to existing SB-2
- b. Elevation of trench bottom to water table 3ft+
- c. Distance from lake 150ft+
- d. Distance from house 50ft
- e. Distance from well 50ft+
- f. Distance from property line 20ft+-
- g. Distance from wetland N/A

**PUMPING STATION**

N/A

- a. Permit required (size)
- b. Distance from well
- c. Distance from house
- d. Distance from property line

**TRENCH**

GRAVELLESS[ ] ROCK [ \* ] Q-4 [ ] H-10 [ ] OTHER [ ]

- a. Type of loading DROP BOX [ \* ] TOP LOAD [ ] OTHER [ ]
- b. Length #1= 80ft #2= 22ft
- c. Width 36"
- d. Inches of rock under pipe 12"
- e. Depth of backfill #2= 17" (35" total depth)
- f. Amount of rock 17 cu yds

**PRESSURE BED/AT GRADE**

N/A

- a. Length
- b. Width
- c. Depth of backfill
- d. Amount of rock

**PUMPING STATION**

N/A

- a. Pump model & size
- b. Distance to absorption
- c. Size of line
- d. Total dynamic head

**DISTRIBUTION PIPES**

N/A

- a. Size of line
- b. Perforations & spacing
- c. Distance between laterals (60" max)
- d. Distance from rock bed edge (12" min, 30" max)

**TYPE OF SOIL/SSF**

1.27 sand

**SEE REVERSE SIDE FOR PLAN LAYOUT**

DISTANCE TO NEIGHBORS' WELL

N/A

NEIGHBORS' WELL DRAWN

SEPTIC TANK 1000 gal. precast - existing

- \* ] DRAIN HOLES SEALED
- \* ] OUTLET SCH. 40 (SEALED)
- ] INLET SCH. 40 (SEALED)
- \* ] 6" INSP. PIPES (SEALED)
- ] RISERS ON MANHOLE (IF NEEDED)

PUMP TANK N/A

- ] MANHOLE AT GRADE (REQUIRED)
- ] ALARM SYSTEM

STATUS OF OLD TANKS/SYSTEM

TANK INSULATED  YES  \* ] NO

- ] PUMP CURVE
- ] PRESSURE TEST BLDG SEWER
- ] PRESSURE TEST PUMP LINE

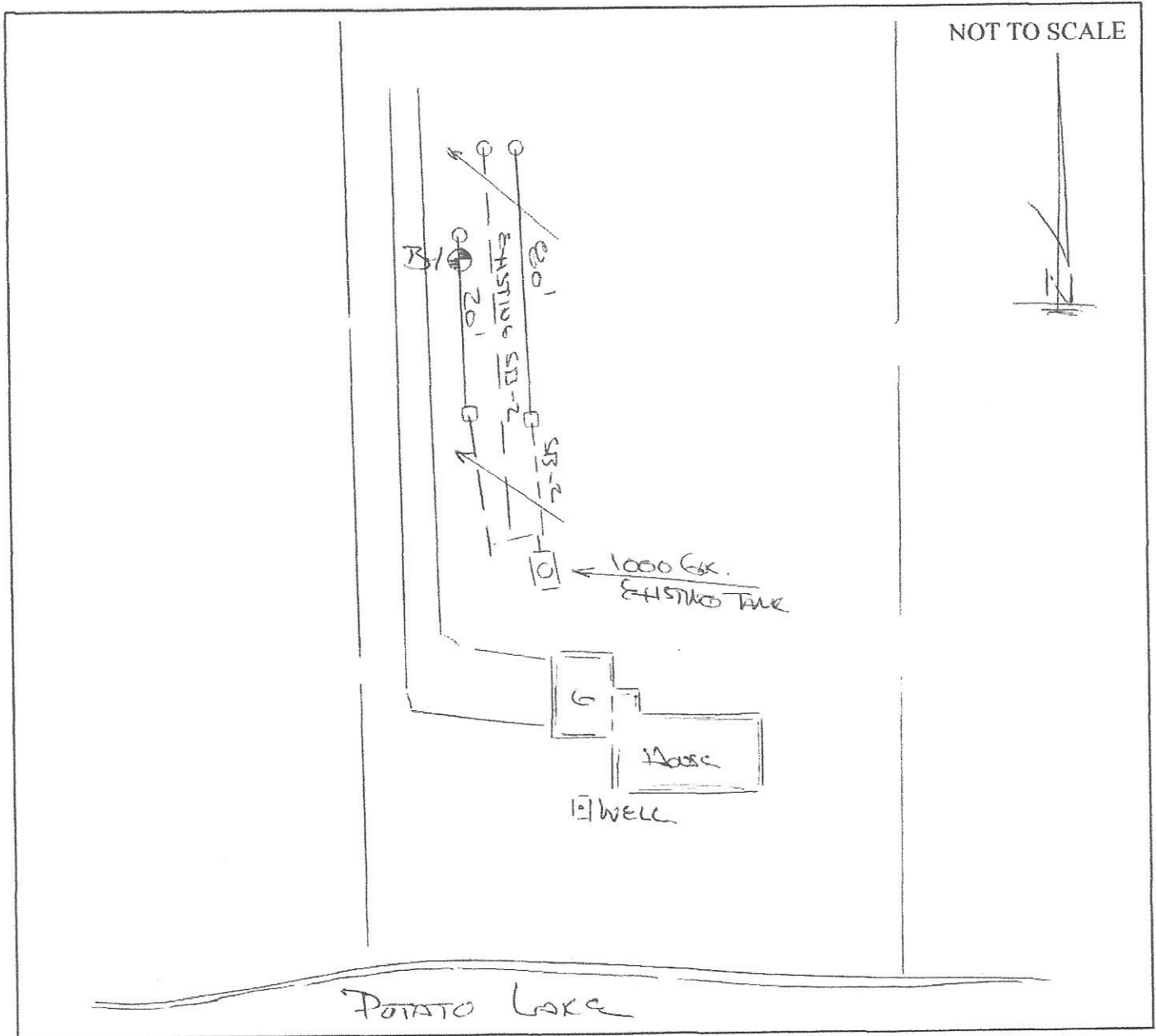
DRAINFIELD

- \* ] 4" INSP. PIPES ON LATERALS

COMBO TANK

- ] MANHOLE IN EACH COMPARTMENT

N/A



INSPECTOR: Al Winterberger

MPCA # 1565

OTHER INSP. # \_\_\_\_\_

SIGNATURE: Al Winterberger

SYSTEM:  APPROVED  
 NOT APPROVED

# WINTERBERGER INSPECTIONS

Al Winterberger-Inspector/Designer

State License #1565

24685 Washington Drive

Osage, MN 56570

Telephone: (218) 573-2275

E-mail: winterberger@arvig.net

Date 10/25/13

Property owner O. VANDELAND

Permit # 131-55-13

Parcel # 16-68-00300

Installer D. Logan #5400

**Soil Verified**

B-1

DEPTH, INCHES	TEXTURE	MUNSELL COLOR
0-6	FSL	10R 3/2
6-35	M. SAND	10R 6/4
35-75	M. SAND	10R 5/6

B-2

DEPTH, INCHES	TEXTURE	MUNSELL COLOR

Depth to system bottom 35"

Depth to system bottom \_\_\_\_\_

auger  Pit \_\_\_\_\_

auger \_\_\_\_\_ Pit \_\_\_\_\_

*This report satisfies the requirements as outlined in Minnesota rules chapter 7082.0700 Inspection Program subpart 4, item B, sub item 2.*

**CERTIFIED STATEMENT**

I, the undersigned Designated Registered Professional Installer party to Minnesota State Licence # 909, do hereby certify that the installation of this onsite system is in accordance with all provisions of ISTS Minnesota Rules Chapter 7080 and all applicable Hubbard County Ordinances. I also certify that the inspectors as-built schematic will serve as the construction as-built schematic.

10/25/13      [Signature]  
DATE                      DESIGNATED REGISTERED PROFESSIONAL INSTALLER

SANITARY PERMIT # 131-SS-13

PROPERTY OWNER O VADLAND

LAKE / RIVER NAME POTU

LEGAL DESCRIPTION #16.68.00300

[Signature]  
RECEIVED BY



HUBBARD COUNTY

CERTIFICATE OF COMPLIANCE OR NOTICE OF NONCOMPLIANCE  
FOR INDIVIDUAL SEWAGE TREATMENT SYSTEMS (ISTS)

PROPERTY OWNER OSCAR VADELAND

ADDRESS 16047 Haven Lane Park Rapids MN

LEGAL DESCRIPTION LOTS 15&16 NORTHWOODS SUBD

PARCEL NUMBER 16-68-00300

LAKE NAME POTATO LAKE

STATUS OF SYSTEM:

Based on the compliance inspection conducted on 10/25/13 the ISTS is,

IN COMPLIANCE, therefore, this document is a  
(Choose: in compliance OR failing)

CERTIFICATE OF COMPLIANCE  
(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 the inspection date of the individual sewage treatment system for the site stated above. This certificate is valid for 5 years from the date of issuance unless the L.U.G. finds evidence of imminent threat to public health or safety. 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.

Electrical components and systems must be compliant with applicable rules and regulations of the State of Minnesota, as detailed in Minnesota Rule Section 7080.0700. It is the owners responsibility to insure that any electrical work is compliant with the law and inspected as required under state law. This certificate of compliance does not extend to any electrical components and work and the County has undertaken no inspection of any electrical system or components thereof.

INSPECTOR'S NAME: AL WINTERBERGER PHONE: 218-573-2275

LICENSE AND/OR REGISTRATION NUMBER: 1565

INSPECTOR'S SIGNATURE Al Winterberger DATE: 10/25/13





# *Septic Inspection Request*

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<i>Date Received</i>	10/25/2013	<i>Time Received</i>	7:50:00 AM
<i>Date Needed</i>	10/25/2013	<i>Time Needed</i>	1:00:00 PM
<i>Date Rescheduled</i>		<i>Time Rescheduled</i>	

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*Installer Name*      Backhoe Pete  
*Installer Lic*        909  
*Contact*  
*Phone*

---

*Property Owner*    Oscar Vaadeland  
*Phone*

---

*Lake Name*  
 *Pressure Test*      *Permit Number*      131-SS-13      *PIN #*    16.68.00300

*Comments*          16047 Haven Lane, Park Rapids, MN 56470  
*Initials*             MS