

DOUGLAS COUNTY LAND AND RESOURCE MANAGEMENT
Point of Sale/Transfer Certification Requirements for Subsurface Sewage Treatment
Systems for Nonconforming or Non-Certified Systems

On _____ five thousand (\$5000.00) dollars was placed in escrow with
Date

Name of escrow holder

Address of escrow holder

for the purpose of certifying compliance and/or updating the individual/subsurface sewage treatment system (SSTS) located on the property described as:

Address or legal description of property

Parcel Number

It is the responsibility of: _____ (buyer/seller)
Name circle one

to complete the compliance inspection and/or update.

The system shall be inspected by a State Licensed SSTS Inspector within two (2) months following the date of closing or, if frozen ground conditions exist within such two (2) month period or if the closing otherwise occurs during frozen ground conditions, such inspection shall occur by the following July 1.

If the system is found to be compliant, the State Licensed SSTS Inspector shall execute the Certification in accordance with State Statute 115.55 and Minnesota Rule Chapters 7080 through 7083 by the Minnesota Pollution Control Agency and the ***excess escrow funds shall be dispersed to:***

Name and Address of person to receive excess escrow monies

If the State Licensed SSTS Inspector finds the system to be non compliant, the system shall be updated so as to be compliant with the provisions of Minnesota Rule Chapters 7080 through 7083 within two (2) years following the date of closing the real estate transaction unless evidence is found identifying an imminent threat to public health and safety, in which event the system shall be updated within ten (10) months following the closing of the transaction, and a State Licensed SSTS Inspector shall provide the Department with Certification of compliance once the update is completed.

The five thousand (\$5000.00) dollar escrow amount is to be utilized for this update and any ***additional funds required will be paid by:***

Name and Address of liable party

In the alternative, any ***remaining funds will be refunded to:***

Name and Address of Party to receive excess escrow monies

Buyer

Seller

Closing Agent

Buyer

Seller