



3444

LEGAL DESCRIPTION AND LOCATION: 5 1/2 OF SW 1/4 OF SEC 17.

Becker County #3
 01.0062.001

Lake No. _____ Lake Name _____ Lake Classif. _____ Sec. 17 TWP 14 Range 43 ATLANTA TWP Name

IDENTIFICATION: Please Print All Information

Owner	Last Name <u>Schultz</u>	First Initial <u>KEN</u>	Mailing Address— No. Street, City and State <u>WLER MN. BX 14</u>	Zip No.	Tel. No.
Contractor	Name _____				

TYPE OF IMPROVEMENT:

() New Building () Alteration
 Other sewer system

RESIDENTIAL PROPOSED USE:

One Family Dwelling
 () Multiple Dwelling _____ Units

NON-RESIDENTIAL PROPOSED USE:
 Specify: _____
 Size: _____

ESTIMATED COST OF IMPROVEMENT \$ _____ Construction Starting Date: _____

PRINCIPAL TYPE OF FRAME:

() Masonry () Wood Frame
 () Structural Steel () Other — Specify _____

Type of Roof: _____

TYPE OF SEWAGE DISPOSAL:

() Public
 Individual Septic Tank, etc.

WATER SUPPLY:

() Public
 Individual Well

MECHANICAL EQUIPMENT:

Elevator: () Yes () No
 Air Conditioning: () Yes () No
 () Central () Unit

DIMENSIONS:

Basement: () Yes () No
 Stories above basement: _____
 Sq. feet (outside dimension) _____
 Bedrooms 3 Baths 1

HEATING:

() Electric () Gas () Oil
 () Coal () None
 Other: dep 15x25

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity	<u>1000</u> Gls.	<u>375</u> Sq. Ft.	Sq. Ft.
Distance from nearest well	<u>50</u> Ft.	<u>50</u> Ft.	Ft.
Distance from lake or stream	_____ Ft.	_____ Ft.	_____ Ft.
Distance from occupied building	<u>50</u> Ft.	<u>10</u> Ft.	Ft.
Distance from property line	<u>10</u> Ft.	<u>10</u> Ft.	Ft.
Distance from bottom to Water Table	Ft.	<u>4</u> Ft.	Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS:

Lot Area is 80 AC square feet. Water frontage is N/17 feet.
 Building set back from high water mark is N/A feet. (Building Line)
 Land height above high water mark at building line is 0.0016 feet
 Building set back from State highway is _____ feet — from road or street is _____ feet.
 Side yard is 10 and 10 feet. Rear yard is _____ feet.
 Building will be located 10 feet from septic tank (Sewage System Permit must be obtained before installation).
 Building will be located 10 feet from soil absorption system (Cesspool, Drainfield, etc.).

Agreement: I hereby certify that the information contained herein is correct and agree to do the proposed work in accordance with the description above set forth and according to the provisions of the ordinances of Becker County, Minnesota. I further agree that any plans and specifications submitted herewith shall become a part of this permit application. I also understand that this permit is valid for a period of six (6) months. Applicant further agrees that no part of the sewage system shall be covered until it has been inspected and accepted. It shall be the responsibility of the applicant for the permit to notify the County Zoning Administrator, 48 hours before the job is ready for inspection.

Dated 9-20-77
 Signature of Owner [Signature]

Permit: Permission is hereby granted to the above named applicant to perform the work described in the above statement. This permit is granted upon the express condition that the person to whom it is granted, and his agent, employees and workmen shall conform in all respects to the ordinances of Becker County, Minnesota. This permit may be revoked at any time upon violation of said ordinances.

Dated 9-20-77
 Becker County Zoning Administrator [Signature]

Permit Fee \$ 10 State Surcharge \$ 50

Comments: rel 9-20-77 Rec'd by Mail.
will send in sketch.

01-0066001

01-0066001

BECKER COUNTY

Sewage Permit No. SP No. 1925013

Location: Lake No. Sec. 17 Twp. 144 Range 42 Twp. Name ARTANNA

SP SP

Issued SEPT. 21 1927, To ANN SCHUBERTZ Work Authorized

From nearest well, 50 ft., from occupied building; 10 ft., from property line, seepage bed will be 575 sq. ft., 50 ft., from nearest well, 10 ft., from occupied building, 10 ft., from property line, and 4 ft., from bottom to water table. Lot area is 20 acres, land height above high water mark at building time is over 6 ft., side yards are over 10 ft., and over 10 ft.

NOTE: This card must be placed in a conspicuous place not more than 12 feet above grade on the premises on which work is to be done and must be maintained there until completion of such work. No part of system shall be covered until it has been inspected and approved. Notify Zoning Administrator (847-3938) office when job is ready for inspection.

Myra Hardy
Becker County Zoning Administrator

BECKER COUNTY, MINNESOTA
Board of County Commissioners



APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

3444

LEGAL DESCRIPTION AND LOCATION: 5 1/2 of Subdivision and 4th Street from 16th St
17 1/2 4S 77 1/2

IDENTIFICATION: Please Print All Information:
 Owner: SCHULTZ, KEN DAVE M
 Contractor: ALVINSON, WISCONSIN

TYPE OF IMPROVEMENT: New Building Alteration
 RESIDENTIAL PROPOSED USE: One Family Dwelling Multiple Dwelling
 NON-RESIDENTIAL PROPOSED USE: _____

ESTIMATED COST OF IMPROVEMENTS: _____ Construction Starting Date: _____
 PRINCIPAL TYPE OF FRAME: Masonry Wood Frame Structural Steel Other - Specify _____
 TYPE OF SEWAGE DISPOSAL: Public Individual Septic Tank, etc. Individual Well
 MECHANICAL EQUIPMENT: Elevator Air Conditioning Central _____
 DIMENSIONS: Basement Stories above basement _____
 HEATING: Electric Gas Oil Coal None Other _____

SEWAGE DISPOSAL SYSTEM DATA	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity: _____	_____ Gals.	_____ Sq. Ft.	_____ Sq. Ft.
Distance from nearest well: _____	_____ Ft.	_____ Ft.	_____ Ft.
Distance from lake or stream: _____	_____ Ft.	_____ Ft.	_____ Ft.
Distance from occupied building: _____	_____ Ft.	_____ Ft.	_____ Ft.
Distance from property line: _____	_____ Ft.	_____ Ft.	_____ Ft.
Distance from bottom to water table: _____	_____ Ft.	_____ Ft.	_____ Ft.

CHARACTERISTICS:
 Lot Area is _____ square feet. Water frontage is _____ feet.
 Building set back from high water mark is _____ feet (Building Line).
 Land height above high water mark at building line is _____ feet.
 Building set back from State highway is _____ feet - from road or street is _____ feet.
 Side yards _____ and _____ feet. Rear yard is _____ feet.
 Building will be located _____ feet from septic tank (Sewage System Permit must be obtained before installation).
 Building will be located _____ feet from soil absorption system (Cesspool, Drainfield, etc.).

Agreement: I hereby certify that the information contained herein is correct and agree to do the proposed work in accordance with the description above set forth and according to the provisions of the ordinances of Becker County, Minnesota. I further agree that any plans and specifications submitted herewith shall become a part of this permit application. I also understand that this permit is valid for a period of six (6) months. Applicant further agrees that no part of the sewage system shall be covered until it has been inspected and accepted. It shall be the responsibility of the applicant for the permit to notify the County Zoning Administrator 48 hours before the job is ready for inspection.

Dated 9-20-77 Signature of Owner _____

Permit: Permission is hereby granted to the above named applicant to perform the work described in the above statement. This permit is granted upon the express condition that the person to whom it is granted, and his agent, employees and workmen shall conform in all respects to the ordinances of Becker County, Minnesota. This permit may be revoked at any time upon violation of said ordinances.

Dated 9-20-77 Signature of _____
 Becker County Zoning Administrator

Permit Fee \$ 10.00 State Surcharge \$ 50.00
 Comments: pld 7-20-77 Read by Man.
Will send in sheet

01.0062.001

INSPECTOR'S CHECK LIST
Make all measurements and computations

	ACTUAL IS ↓	MINIMUM Shall Be ↓	Sq. Ft.
Building Set Back from High Water Mark	Ft.		Ft.
Building Set Back from State Highway	Ft.		Ft.
Side Yard	& Ft.	& Ft.	
Rear Yard	Ft.		Ft.
Elevation at Building Line above High Water Mark	Ft.		Ft.

SEWAGE DISPOSAL SYSTEM STATISTICS

CATEGORY	SEPTIC TANK		SEEPAGE PIT		DRAIN FIELD	
	Actual	Should be	Actual	Should be	Actual	Should be
Capacity	1000 Gls.		400 SF			
Distance from Nearest Well	50 F	F	70 F	75 F	F	50 F
Distance from Lake or Stream	— F	F	— F	F	F	F
Distance from Occupied Building	25 F	10 F	35 F	20 F	F	20 F
Distance from Property Line	over 10 F	10 F	over 10 F	10 F	F	10 F
Distance from Bottom to Water Table	— F	— F	over 4 F	4 F	F	4 F

Inspector's Comments: Called In - 10-13-77

INTERPRETATION
OF ABBREVIATIONS
 Gls — Gallons
 SF — Square Feet
 F — Linear Feet

Inspector's Signature By Marty

Title _____

Inspection Dated 10-13 19 77

Agency _____

CERTIFICATE OF COMPLIANCE
SEWAGE SYSTEM

This certificate has been issued this _____ day of _____ 19____

to certify compliance with regulations of Zoning Ordinance, Becker County, Minnesota.

The premises covered by this certificate are legally described as:

Lake No. _____ Sec. _____ Twp. _____ Range _____ Twp. Name _____

Owner: Name _____

Address _____

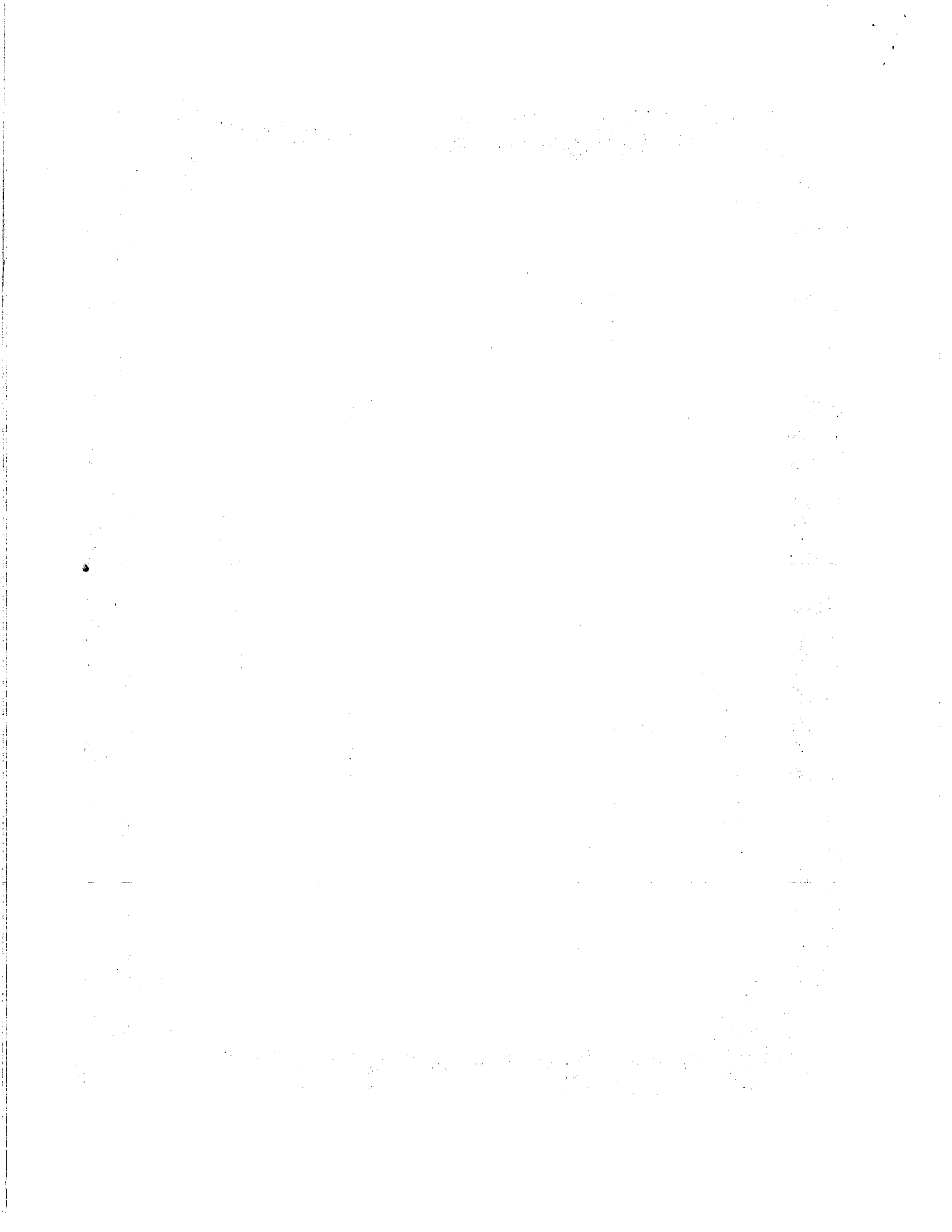
Zip No. _____

Permit No. SP _____

Signed by: _____

Zoning Administrator
Becker County, Minnesota

Theresa Swartz



BECKER COUNTY

Sewage Permit No. SP No. _____

Location: Lake No. _____ Sec. _____ Twp. _____ Range _____ Twp. Name _____

Issued _____ 19____, To _____
Work Authorized _____

NOTE: This card must be placed in a conspicuous place not more than 12 feet above grade on the premises on which work is to be done, and must be maintained there until completion of such work. No part of system shall be covered until it has been inspected and approved. Notify Zoning Administrator, (847-3938) office when job is ready for inspection.



Becker County Zoning Administrator

BECKER COUNTY, MINNESOTA
Board of County Commissioners

