



**Minnesota Pollution  
Control Agency**

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

# Compliance Inspection Form



061013000

(STS)

**Existing S**

Parcel number: 061013000

System status: ☒ Compliant ☐ Noncompliant  
(based on all compliance requirements)

<b>RECEIVED</b> AUG 19 2008 ZONING	For Local Tracking Purposes:
--	------------------------------

## Summary Form

### Property Information

Property owner name(s): Vergil Torgerson  
 Property address: 13512 Maple Rd.  
 Property owner's address (if different): 321 2nd Ave S Kindred ND 58051  
 County: Becker Property owner phone: \_\_\_\_\_ Permitting authority: zoning  
 Date system constructed: \_\_\_\_\_ Reason for inspection: County letter

### System Description

Brief system description: 1000 gal tank 330 gal pump tank + 400 sq ft drainfield

Local permit number: \_\_\_\_\_ Number of bedrooms: \_\_\_\_\_ Design flow rate: \_\_\_\_\_

#### Is the system:

In Shoreland area?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	In Wellhead Protection Area?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
An U.S. Environmental Protection Agency (EPA) Class V Injection Well?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	System serving a Minnesota Department of Health (MDH) licensed facility?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### Compliance Status (Based on state requirements – additional local requirements may also apply.)

Based on the information gathered and reported on attached forms, the compliance status of this system is (check one):

☒ Certificate of Compliance – valid until (3 years from date of report): 8-14-2011  
☐ Notice of Noncompliance - For Noncompliant systems:

The reason for noncompliance is: \_\_\_\_\_

This noncompliant system is classified as (check one below):

☐ Imminent threat to public health & safety ☐ Failing to protect ground water ☐ Not in compliance with operating permit

### Certification (Completed form must be submitted to the local unit of government within 15 days.)

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.

Name: Rick Renner Certification number: \_\_\_\_\_  
 Business license name and number: Renner Excavating 2567 or \_\_\_\_\_  
 Name of local unit of government: Becker County Zoning  
 Signature: Rick Renner Date: 8-14-08

### Required Attachments

Inspector Complete: This Inspection Report is \_\_\_\_\_ pages long.

Check compliance forms attached: ☐ Hydraulic Performance ☐ Tank Integrity ☐ Soil Separation ☐ Operating Permit Form (if applicable) ☐ System drawing/As-built drawing ☐ An assessment of any local requirements that are different from what is required on this form ☐ Soil Boring Logs ☐ Abandonment form (if appropriate) ☐ Other information (list): \_\_\_\_\_

**Upgrade Requirements** (derived from 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.

Parcel number: 061013000

System status: ☒ Compliant ☐ Noncompliant  
(as determined by this form)

## Hydraulic Performance and Other Compliance

### Compliance Issue #1 of 4

Date of observation: 8-14-08 Reason for observation: County letter

This form expires upon next inspection or in three years, whichever occurs first: 8-14-2011

#### Compliance questions/criteria: (Required) (Check the appropriate box)

Does the system discharge sewage to the ground surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the system discharge sewage to drain tile or surface waters?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the system cause sewage backup into dwelling or establishment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Do other situations exist that have the potential to immediately and adversely impact or threaten public health or safety (electrical, unsafe covers, etc.)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Any "yes" answer indicates that the system is an imminent threat to public health and safety.	
Does the system pose a threat to ground water for any conditions deemed non-protective as determined by the inspector?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

"Yes" indicates that the system is failing to protect ground water. If "yes", describe the condition noted:

#### Verification Method\*: (Optional) (Check the appropriate box)

- ☒ Searched for surface outlet
- ☐ Performed hydraulic test
- ☒ Searched for seeping in yard
- ☐ Checked for backup in home
- ☐ Excessive ponding in soil system/D-boxes
- ☒ Homeowner testimony
- ☒ Examined for surging in tank
- ☐ "Black soil" above soil dispersal system
- ☐ System requires "emergency" pumping
- ☐ Performed dye test
- ☐ Other: \_\_\_\_\_

\* No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.

## Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Vergil Torgerson  
 Property address: 13512 Maple Rd. Lake Park  
 Property owner's address (if different): \_\_\_\_\_  
 County: Becker Phone: \_\_\_\_\_

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Rick Renner Certification number: \_\_\_\_\_  
 Business license name and number: Renner Excavating 2567 or  
 Name of local unit of government: Becker County Zoning  
 Signature: Rick Renner Date: 8-14-08

Parcel number: 061013000

System status: ☒ Compliant ☐ Noncompliant  
(as determined by this form)

## Tank Integrity and Safety Compliance

### Compliance Issue #2 of 4

Date of observation: 8-14-08 Reason for observation: County letter

This form expires on (three years): 8-14-2011

#### Compliance questions/criteria: (Required)

(Check the appropriate box)

Does the system consist of a seepage pit\*, cesspool, drywell, or leaching pit? ☐ Yes ☒ No

Do any sewage tank(s) leak below their designed operating depth? ☐ Yes ☒ No

If yes, identify which sewage tank leaks.

Any "yes" answer indicates that the system is failing to protect ground water.

\* Seepage pits meeting 7080.2550 may be compliant if allowed in ordinance by local permitting authority.

#### Verification Method\*\*: (Optional)

(Check the appropriate box)

☒ Probed tank bottom

☐ Observed low liquid level

☐ Examined construction records

☐ Examined empty (pumped) tank

☒ Probed outside tank for "black soil"

☐ Pressure/vacuum check

☐ Other: \_\_\_\_\_

\*\* No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.

## Safety Check

- Are any maintenance hole covers damaged, cracked, or appeared to be structurally unsound? ☐ Yes\* ☒ No
- Were all maintenance hole covers replaced in a secured manner (e.g., all screws replaced)? ☒ Yes ☐ No\*
- Was secondary access restraint present (safety pan, second cover, or safety netting) - highly recommended. ☐ Yes ☒ No
- Was any other safety/health issue present? ☐ Yes\* ☒ No

Explain: \_\_\_\_\_

\*System is an imminent threat to public health and safety.

## Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector, maintainer, or service provider. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Vergil Torgerson

Property address: 13512 Maple Rd. Lake Park

Property owner's address (if different): 321 2nd Av. S Kindred ND

County: Becker Phone: \_\_\_\_\_

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Rick Renner Certification number: \_\_\_\_\_

Business license name and number: Renner Excavating 2567 or

Name of local unit of government: Becker County Zoning

Signature: Rick Renner Date: 8-14-08

Parcel number: 060013000

System status: ☒ Compliant ☐ Noncompliant  
(as determined by this form)

## Soil Separation Compliance and Other Compliance

### Compliance Issue #3 of 4

Date of observation: 8-14-08 Reason for observation: County letter  
This information on this form does not expire.

#### Compliance questions/criteria: (Required) (Check the appropriate box)

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:

Does the system have at least a two-foot vertical separation distance from periodically saturated soil or bedrock?

☐ Yes ☐ No

For 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:

Does the system have a three-foot vertical separation distance from periodically saturated soil or bedrock?

☒ Yes ☐ No

For reduced separation distance systems (i.e., "performance" systems under old 7080.0179 or Type IV or V system under new 7080.2350 or 7080.2400):

Does the system meet the designed vertical separation distance from periodically saturated soil or bedrock?

☐ Yes ☐ No

Any "no" answer indicates that the system is failing to protect ground water.

#### Verification Method\*\* (Optional)

(Check the appropriate box)

☒ Conducted soil observation(s) (attach boring logs)

☐ Two previous verifications (attach boring logs)

☐ Other: \_\_\_\_\_

Soil observation does not expire. Previous observations by two independent parties are sufficient, unless site conditions have been altered.

\* May be reduced by up to 15 percent if allowed in local ordinance.

\*\* No standard protocol exists. This list is not exhaustive, in sequential order, nor does it indicate which combinations are necessary to make this determination.

## Certification

This form is to be completed and attached to the Summary Form of the Minnesota Pollution Control Agency's (MPCA) Compliance Inspection Form for Existing Subsurface Sewage Treatment Systems. Observations, interpretations, and conclusions must be completed by an inspector or designer. Completed form must be submitted to the local unit of government within 15 days.

Property owner name(s): Vergil Torgerson

Property address: 13512 Maple Rd. Lake Park

Property owner's address (if different): \_\_\_\_\_

County: Becker Phone: \_\_\_\_\_

I hereby certify that I personally made the observations, interpretations, and conclusions reported on this form and that they are correct.

Name: Rick Renner Certification number: \_\_\_\_\_

Business license name and number: Renner Excavating 2567 or

Name of local unit of government: Becker County Zoning

Signature: Rick Renner Date: 8-14-08

Distance from Well  
 Distance from Property Line  
 Tank Capacity  
 Area of Drainfield  
 Distance from Ordinary High  
 Water Mark

to Tank  
60  
20  
1000  
 \_\_\_\_\_

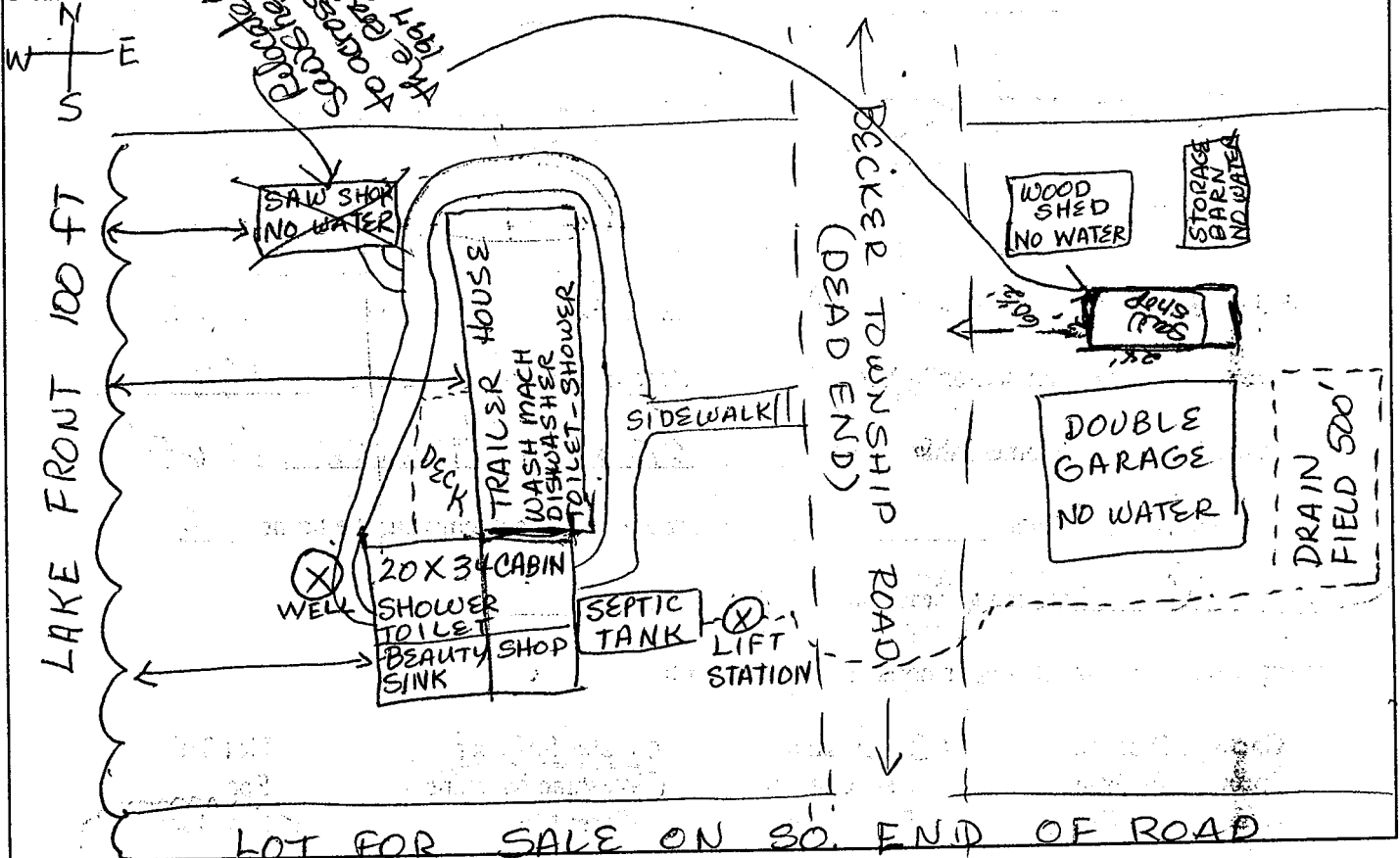
to Drainfield  
135  
20  
500 sq ft.  
 \_\_\_\_\_

Well Data

Depth 23'  
 Diameter 1 1/4"  
 Depth of Casing \_\_\_\_\_

[ ] Drilled Well  
 [X] Sandpoint Well

Please draw a site plan of your property. Include buildings, wells, septic systems, and setback distances.



R 06.1013.000

JAMES O & DONNA J GRONDAHL  
 RT 2 BOX 270  
 LAKE PARK, MN 56554

PLACE  
 FIRST-CLASS  
 STAMP  
 HERE

BECKER COUNTY ZONING OFFICE  
 829 LAKE AVE  
 PO BOX 787  
 DETROIT LAKES, MN 56502-0787

# SEWER SYSTEM STUDY

Please complete the Study, to the best of your knowledge, for review by the Zoning Office. If you have any questions, please contact the Zoning Office at (218) 846-7314.

Please circle the letter that best describes your system.

 Septic Tank (Sealed)      Drainfield	 Cesspool (Open Bottom)	 Septic Tank      Drywell (Seepage)	 Privy
 Direct Discharge To Body of Water	 Direct Discharge To Land Surface or Ditch	 Holding Tank	 Other (Describe Below)

H. (other) Please describe

What is the capacity of the septic tank? 1000 gal      Area of drainfield? 500 sq ft

Does your system have a lift station? (Yes) No      Date the system was installed 1992

Total Square Footage of Home/Cabin CABIN IS 20' X 34' / TRAILER 16' X 65'

Number of Bedrooms in home 2      Number of people occupying the home 2

Is your home/cabin year around or seasonal seasonal

Circle the following items that your home is equipped with:

Garbage Disposal  
Foundation Drains  
Low Flow Toilets

Dishwasher  
Rain Gutters  
Suds Saver

Water Softener  
Washing Machine  
Water Meter

Hot Tub  
Spa  
Low Flow Showerheads

List the above items that are connected to the sewer system ALL

How often do you have your system pumped? ONCE EVERY 2 YRS FOR SLUDGE ONLY

Most recent date system was pumped 1992

Most recent date of any repair to system 1992

Do you object if your system is inspected by one of our inspectors? NO

I hereby certify with my signature that all data is true and correct to the best of my knowledge.

Donna Grondahl      2-27-96  
Signature      Date

Fire Number \_\_\_\_\_

# SEWAGE SYSTEM DATA

Distance from Well  
Distance from Property Line  
Tank Capacity  
Area of Drainfield  
Distance from Ordinary High  
Water Mark

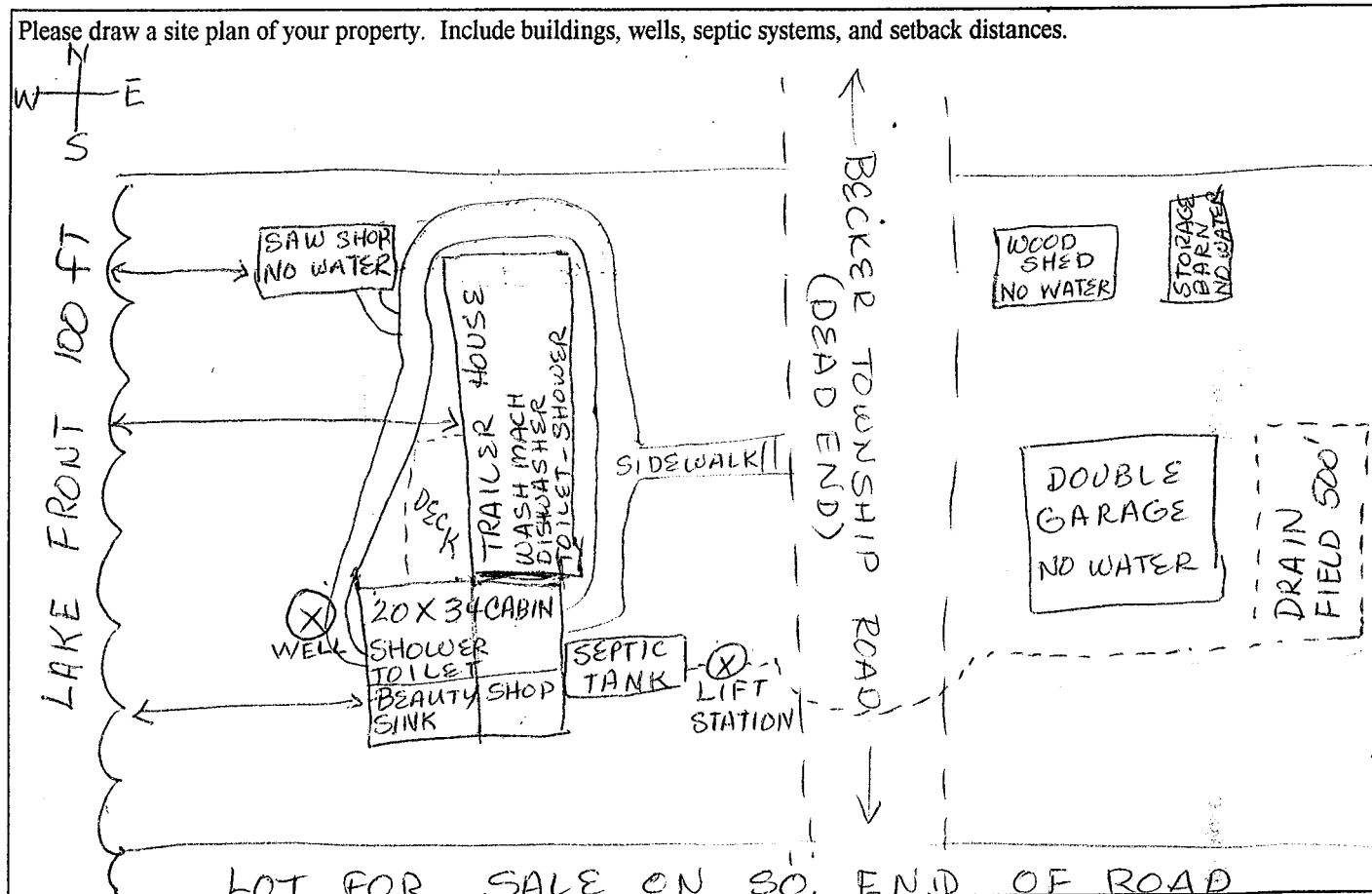
to Tank  
60  
20  
1000

to Drainfield  
135  
20  
500 sq ft.

Well Data  
Depth 23'  
Diameter 1 1/4"  
Depth of Casing

[ ] Drilled Well  
[X] Sandpoint Well

Please draw a site plan of your property. Include buildings, wells, septic systems, and setback distances.



R 06.1013.000

JAMES O & DONNA J GRONDAHL  
RT 2 BOX 270  
LAKE PARK, MN 56554

PLACE  
FIRST-CLASS  
STAMP  
HERE

BECKER COUNTY ZONING OFFICE  
829 LAKE AVE  
PO BOX 787  
DETROIT LAKES, MN 56502-0787

## INSPECTION REPORT

FIRE NUMBER

LEGAL  
DESCRIPTION  
AND  
LOCATION

J 06.1013.000

Ross Siebert  
10 AM  
Tuesday  
CarmantLake No. U. Carmant RD 16  
Lake Name Lake Classif. Sec. TWP Range

TWP Name

## IDENTIFICATION: Please Print All Information

Owner	Last Name	First	Initial	Mailing Address - No. Street, City, and State	Zip No.	Tel. No.
	Jim	Grondahl		RR 2 BOX 270 Lake Park mn	55414	
Contractor	Name					

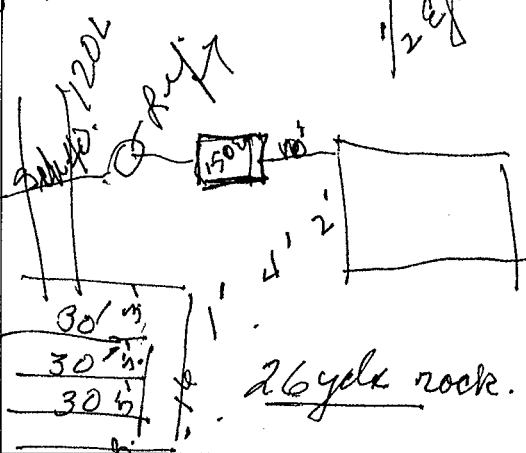
	ACTUAL IS ↓	MINIMUM Shall Be ↓	Sq. Ft.
Building Set Back From High Water Mark			
Building Set Back From Highway			
Side Yard	_____ & _____ Ft.	_____ & _____ Ft.	
Rear Yard			
Elevation above High Water Mark at Building Setback Line			

## SEWAGE DISPOSAL SYSTEM STATISTICS

Drive Point Well -

CATEGORY	SEPTIC TANK				SEEPAGE BED				DRAIN FIELD			
	Actual	Minimum	Actual	Minimum	Actual	Minimum	Actual	Minimum	Actual	Minimum	Actual	Minimum
Capacity	1600	Gls.		Gls.	528	SF		SF		SF		SF
Distance from Nearest Well	55'	F		F	175'	F		F		F		F
Distance from Lake or Stream	115'	F		F	235'	F		F		F		F
Distance from Occupied Building	10	F	10	F	150	F	20	F		F	20	F
Distance from Property Line	15	F	10	F	30	F	10	F		F	10	F
Distance from Bottom to Water Table	--	F	--	F	25'	F	4	F		F	4	F

Inspector's Comments:

INTERPRETATION  
OF ABBREVIATIONSGls -- Gallons  
SF -- Square Feet  
F -- Linear FeetWater Use per Station  
270 - 300Margaret M. Foster  
Inspector's Signature & TitleInspection  
Dated

November 22 19 91



CERTIFICATE OF COMPLIANCE  
SEWAGE DISPOSAL SYSTEM

This certificate has been issued this 22ND day of NOVEMBER 1991  
to certify compliance on described premises and has been inspected by myself or my assigns on  
NOVEMBER 14, 1991 and that the applicable codes, ordinances, and supporting data on  
file were correct.

Parcel # 06.1013.000

Property description SEVERSON BEACH LOTS 13&14

CORPORANT TOWNSHIP

Lake Name: UPPER CORCORANT

All horizontal distances meet the Becker County Zoning Ordinance and codes. With proper  
maintenance this system can be expected to function satisfactorily, however this is not a  
guarantee.

This certificate was issued to: Name: JAMES GRONDAHL

Address: RR 2 BOX 270

City, State, & Zip: LAKE PARK, MN 56544

PERMIT NO. 20437

Signed by David Stenke ml  
Zoning Administrator Becker County



MINNESOTA DEPARTMENT OF HEALTH  
Division of Environmental Health

*Revised  
Minnesota  
Public Health  
Department*

Information Necessary for Review of Individual Sewage Disposal Systems

Submitted with plans and specifications for individual sewage disposal systems serving:

Facility Grondahl Beauty Shop Location \_\_\_\_\_  
(County) (City or Two.)

Prepared and submitted by Marg. Foster

Ownership Jim Grondahl Date \_\_\_\_\_

Plans required:

The site plans shall show isolation distances from the septic tank and drainfield to wells, surface waters, property lines and buildings.

The drainfield plan shall show overall dimensions, spacing between pipes, location of and connection to drop or distribution boxes.

Estimate of sewage flow:

Water Use Chart

300

Gallons per day, or

1 Bed room Home

300

Beauty Shop

Number of people served by the system

1 Station Beauty Shop

270

Number of days used per year 500 SF

If food service, number of hours of operation per day

Soil data:

.83

Percolation rate (minutes per inch)

Depth of water table in drainfield area (must be at least 3 feet below bottom of drainfield)

70 SLOPE OF LAND

Septic tank:

1300

Size (gallons) Existing 1600 gal.

Construction (such as concrete or fiberglass)

Provide: Inlet and outlet tees or baffles, inspection pipe and manhole

Disposal system:

Bed.

pressure pipe 2" pressure

Type (such as trenches, bed or mounds)

Pressure

Distribution (gravity or pressure)

528 SF

Soil treatment area (square feet)

straw rec.

3' /

Beauty Shop

from Lift station under road PVC = Sch 40  
2"

4" Pipe size(s) (inches)  
ASTM Pipe material(s)  
1/2 HP Ejector Lift or pumping station(s) (must be provided with alarm system)  
500 gal round tank

Details for drainfield trench or bed construction:

33' Length of trenches or bed (feet) (maximum 100' from distribution point)  
16' Width of trenches (18-36 inches), or bed  
12" Depth of rock below the drain pipes (6-24 inches)  
2" Depth of rock above the pipes (at least 2 inches)  
Straw & Red Rosin Provision of a permeable layer above the rock (such as straw, hay, untreated building paper)  
6" Depth of earth backfill above rocks (6-36 inches)  
yes Provision of top soil and grass cover

Details for mounds construction:

         Filter rock area length (feet)  
         Filter rock area width (feet) (ten feet or less per bed)  
         Depth of sand fill (at least 12 inches)  
         Depth of rock below pipes (at least 9 inches)  
         Depth of rock above pipes (at least 2 inches)  
         Provision of permeable layer above the rock (such as straw, hay, untreated building paper)  
         Slope of sides (3 to 1 maximum)  
         Provision of top soil and grass cover

# BUILDING AND SEWAGE SYSTEM PERMIT

BECKER COUNTY ZONING AND PLANNING

829 LAKE AVENUE, BOX 787, PHONE 847-4427, DETROIT LAKES, MN 56502

*Tuesday AM*  
10:00 AM  
20437  
06.1613.000  
06.1114.523

Parcel No. 13, 14, 21, 22 Lake Name Upper Cormorant Permit No. 06.1613.000  
Fire No. R2367 Township Cormorant Section 16 Description Suenson Beach  
7000 1344 Lot Size 100 X 251

Issued to: Name Jim Grondahl Tel. No. 532-3752  
Address RR# 2 Box 270 Lake Park 56554  
Work Authorized Sludge disposal system

Type of Improvement: ( ) New Home ☒ Alteration ( ) Garage ( ) Mobile Home Yr. \_\_\_\_\_

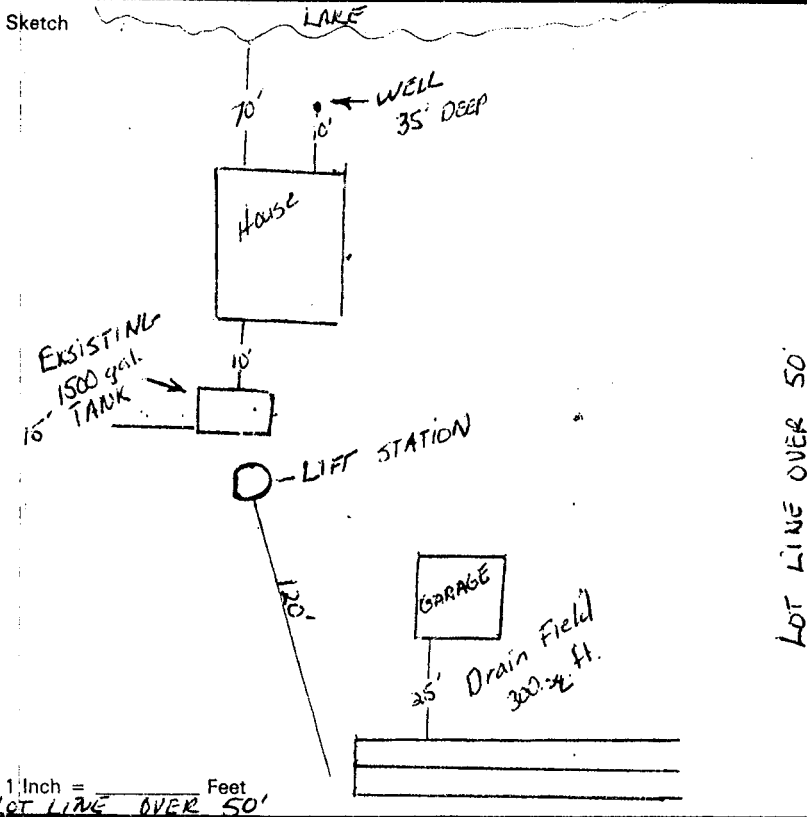
( ) Cottage (X) Septic System ( ) Other Building ( ) Multiple Dwelling \_\_\_\_\_ Units.

Size \_\_\_\_\_ Stories \_\_\_\_\_ Basement NO No. of Bedrooms 1 1/2 Bathrooms 1

Contractor: Name & Address Sherbrooke Septic Service (Ross Seifert) Tel. No. 863-2800

Estimated Cost \_\_\_\_\_ Permit Fee \$45.00 State Fee 50 Receipt No. 5112

Commercial System



## HORIZONTAL DISTANCE IN FEET FROM NEW CONSTRUCTION TO:

High Water Mark of Lake \_\_\_\_\_  
Side Lot Lines \_\_\_\_\_ and \_\_\_\_\_ rear yard \_\_\_\_\_  
Center Line of Public Road \_\_\_\_\_  
Right of way State or Co. \_\_\_\_\_  
APPROVED: Board of Adjustment Date: \_\_\_\_\_  
Planning Commission Date: \_\_\_\_\_  
County Commissioners Date: \_\_\_\_\_  
Zoning Administrator Date: \_\_\_\_\_

## \* Determined by Installer SEWAGE DISPOSAL SYSTEM DATA

Installed in 19	<u>91</u>	EXISTING 1500	Septic Tank	Drain Field
Capacity	<u>1500</u>	Gls.	<u>X</u>	Sq. Ft.
Distance from nearest well	<u>55'</u>	Ft.	<u>175</u>	Ft.
Distance from lake or stream	<u>115'</u>	Ft.	<u>235</u>	Ft.
Distance from occupied building	<u>10</u>	Ft.	<u>150</u>	Ft.
Distance from property line	<u>15</u>	Ft.	<u>30</u>	Ft.
Distance from bottom to Water Table	<u>4'</u>	Ft.	<u>25'</u>	Ft.
Lift Pump	<u>(X)</u>	Yes	( ) No	Well Depth <u>35'</u> type <u>Sand</u>

AGREEMENT: I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS CORRECT AND AGREE TO DO THE PROPOSED WORK IN ACCORDANCE WITH THE DESCRIPTION ABOVE AND ACCORDING TO THE PROVISIONS OF THE ORDINANCE OF BECKER COUNTY. I AGREE TO POST THIS PERMIT ON THE PREMISES ON WHICH THE WORK IS TO BE DONE. AND MAINTAINED THERE UNTIL COMPLETION OF THE WORK. I AGREE THAT ANY VIOLATION OF THIS PERMIT OR THE BECKER COUNTY ZONING IS A MISDEMEANOR AND UPON CONVICTION THEREOF SHALL BE PUNISHED BY A FINE NOT TO EXCEED \$700.00 FOR EACH VIOLATION. NOTIFY THE BECKER COUNTY ZONING ADMINISTRATOR (847-4427) BEFORE BUILDING FOOTINGS HAVE BEEN COMPLETED. NO PART OF THE SEWAGE SYSTEM SHALL BE COVERED UNTIL IT HAS BEEN INSPECTED AND APPROVED. NOTIFY THE ZONING ADMINISTRATOR 24 HOURS BEFORE THE JOB IS READY FOR INSPECTION.

863-2800  
240-83  
473

SIGNATURE OF OWNER

Received By RSWENSON  
Approved By Floyd Swenby  
Becker County Zoning Administrator

Date Nov. 14, 1991

BECKER COUNTY  
DETROIT LAKES, MN 56501

**Scale:** Each grid equals 30 feet/inches.

## GRID PLOT PLAN SKETCHING FORM

Application for Building Permit Dated \_\_\_\_\_ 19\_\_\_\_

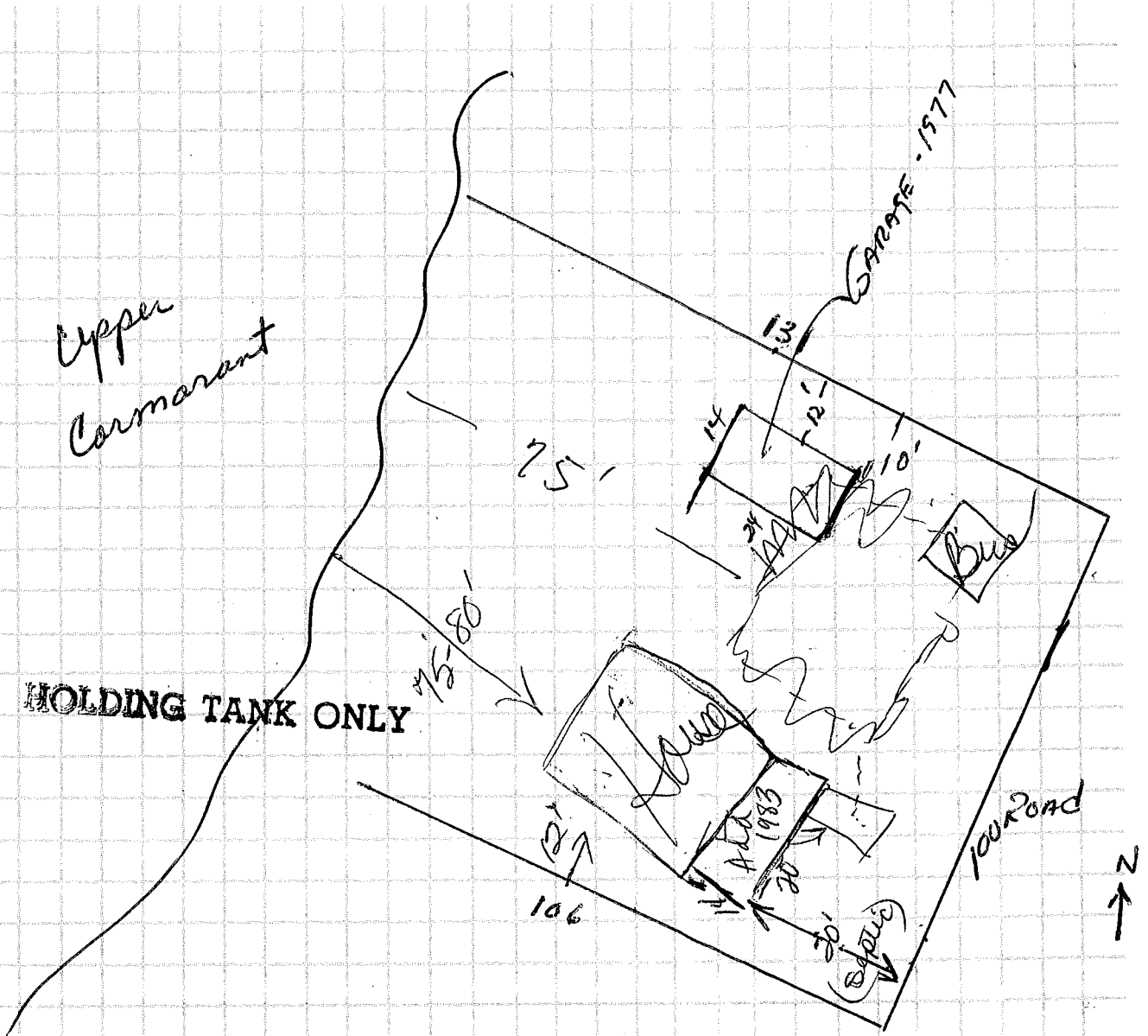
Application for Sewage System Permit Dated\_\_\_\_\_19\_\_\_\_

Building Permit Number \_\_\_\_\_ Sewage System Permit Number \_\_\_\_\_

**Applicant agrees that this plot plan is a part of application (s) indicated above.**

Dated \_\_\_\_\_ 19\_\_\_\_.

**Signature**



only 4 ft above lake level = will  
Need Holding only. School Bus used for lining  
now in place where cottage should be. School Bus  
should go. Mark { dead end road this is the  
last lot.

W — File  
Y — Owner  
B — Building Inspector

10/10/1917

10/10/1917

1

1

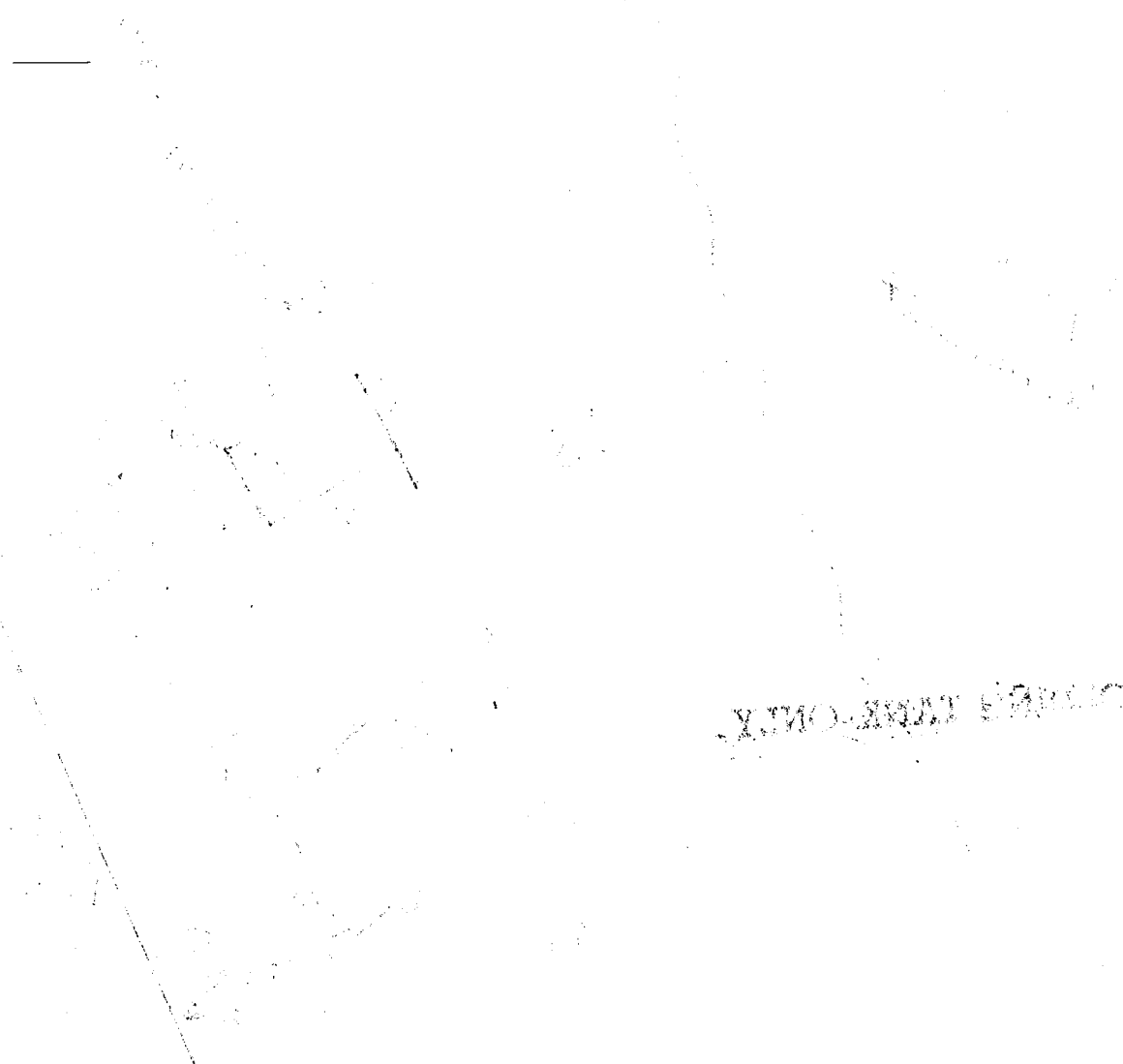
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10/10/1917

10/10/1917

10/10/1917

10/10/1917

10/10/1917

**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	1600	Gls.	—	Gls.		S F		S F		S F		S F
Distance from Nearest Well	50	F	50	F		F	75	F		F	50	F
Distance from Lake or Stream	100	F	75	F		F		F		F		F
Distance from Occupied Building	20	F	10	F		F	20	F		F	20	F
Distance from Property Line	10	F	10	F		F	10	F		F	10	F
Distance from Bottom to Water Table	—	F	—	F		F	4	F		F	4	F

Inspector's Comments: Holding tank only.  
Richard Westlund Installer

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

Mark Kuehn  
 Inspector's Signature

Inspection  
 Dated 8-2 19 77

Title

Agency



3938

**IDENTIFICATION: Please Print All Information**

**TYPE OF IMPROVEMENT:**

**RESIDENTIAL PROPOSED USE:**

**NON-RESIDENTIAL PROPOSED USE:**

ESTIMATED COST OF IMPROVEMENT \$

**Construction Starting Date:**

**PRINCIPAL TYPE OF FRAME:**

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

Type of Roof:

**TYPE OF SEWAGE DISPOSAL:**

☒ 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) 104.00

Bedrooms ..... Baths .....

**HEATING:**

( ) Electric      ( ) Gas      ( ) Oil

( ) Coal ( ) None

Other: 270

SEEPAGE PIT DSEWAGE DISPOSAL SYSTEM DATA:

## SEPTIC TANK

SEEPAGE PIT

## DRAIN FIELD

Capacity	Gls.	Sq. Ft.	Sq. Ft.
Distance from nearest well	52	52	52
Distance from lake	55	75	75
Distance from occupied building	55	10	10
Distance from property line	55	10	10
Distance from bottom to Water Table	55	5	5

*All distances are shortest distance between nearest points*

**CHARACTERISTICS:**

Lot Area is 13,500 square feet. Water frontage is 100 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 yard is 82'0" and 11'0" feet. Rear yard is 11'0" 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**

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**

Becker County Zoning Administrator

Permit Fee \$ 10.00 State Surcharge \$ 30.00

**Comments:**

**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



White - Owner  
Yellow - Assessor  
Pink - Assessor  
Blue - Inspector

APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

LEGAL DESCRIPTION AND LOCATION	Lots 13 & 14 SEVERSON BEACH — — South East Subdiv.						
	588	U. - Cormorant	RD	16	13P	43	Cormorant
	Lake No.	Lake Name	Lake Classif.	Sec.	TWP	Range	TWP Name

IDENTIFICATION: Please Print All Information

Owner	Last Name	First	Initial	Mailing Address— No. Street, City and State	Zip No.	Tel. No.
	THORESON	William		1814 6th Ave N		
Contractor	Name					
		MOORHEAD, MN. 56560				

TYPE OF IMPROVEMENT:	RESIDENTIAL PROPOSED USE:	NON-RESIDENTIAL PROPOSED USE:
( ) New Building ( ) Alteration Other <u>USED Bldg</u>	( ) One Family Dwelling ( ) Multiple Dwelling _____ Units	Specify: _____ Size: _____

ESTIMATED COST OF IMPROVEMENT \$ <u>1000</u>	Construction Starting Date:	
PRINCIPAL TYPE OF FRAME:	TYPE OF SEWAGE DISPOSAL:	DIMENSIONS:
( ) Masonry (X) Wood Frame ( ) Structural Steel ( ) Other — Specify	( ) Public (X) Individual Septic Tank, etc. WATER SUPPLY: ( ) Public (X) Individual Well MECHANICAL EQUIPMENT : Elevator: ( ) Yes ( ) No Air Conditioning: ( ) Yes ( ) No ( ) Central ( ) Unit	Basement: ( ) Yes (X) No Stories above basement: <u>1</u> Sq. feet (outside dimension) <u>10x30 w/20x20 AD</u> Bedrooms _____ Baths _____ HEATING: ( ) Electric ( ) Gas ( ) Oil ( ) Coal ( ) None Other: <u>BED</u>
Type of Roof:		

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PITS	DRAIN FIELD
Capacity	1000 Gls.	200 Sq. Ft.	Sq. Ft.
Distance from nearest well	over 50 Ft.	over 50 Ft.	Ft.
Distance from lake or stream	over 75 Ft.	over 75 Ft.	Ft.
Distance from property line	over 10 Ft.	over 10 Ft.	Ft.
Distance from bottom to Water Table	over 10 Ft.	over 10 Ft.	Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS:

Lot Area is 13,000 square feet. Water frontage is 100 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 yard is over 10 and over 10 feet. Rear yard is 45 feet.

Building will be located over 10 feet from septic tank (Sewage System Permit must be obtained before installation).

Building will be located over 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 \_\_\_\_\_  
Signature of Owner William Thoreson

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 7-6-76  
Becker County Zoning Administrator Floyd Swenby

Permit Fee \$ 10.00 State Surcharge \$ 50

Comments: Mark - Check for best location of building 10x30  
Swenson moving in building - 7-6-76 Place Building  
when school bus is located, remove bus

HOLDING TANK ONLY