



080266000

# ATION FOR SEWAGE SYSTEM CERTIFICATE OF COMPLIANCE With The Becker County Zoning Ordinance.

Compliance only

1993

Application Number	0747
Tax Parcel Number	08.0000.000
Fire Number of Project Location	

### A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.) Maloney, Pat		2. Authorized Agent (if applicable)	
3. Mailing Address (Street, RFD, Box Number, City, State, Zip Code) RR 3 Box 48 Detroit Lakes MN 56501			
4. Day Phone	5. Evening Phone	6. Section 16	7. Township Detroit

### B. PROPERTY DESCRIPTION

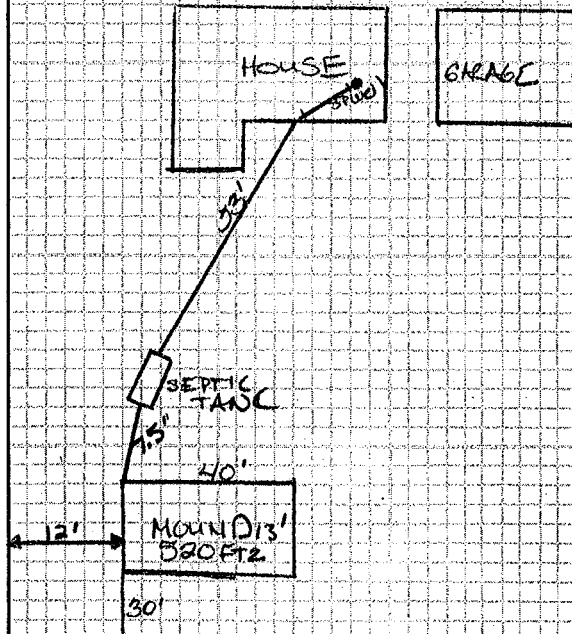
1. Lot(s), Block, Subdivision Name  
Pt 1 of 1 Beg 185' S + 175' W of NE Cor Lot 1 th NE 141.5'

7. Note: If the property is a metes and bounds description, check here [ ] and attach a copy of the exact legal description.

#### SEWAGE SYSTEM DATA

- Anticipated Use
- a.  Single Family
  - b.  Multiple Family
  - c.  Commercial
  - d.  Agricultural
  - e.  Other (specify)
- Type of System
- a.  Septic Tank Only
  - b.  Drainfield Only
  - c.  Septic Tank & Drainfield
  - d.  Holding Tank
  - e.  Alternative System (specify)
- Type of Drainfield
- a.  Standard System
  - b.  Mound (pressure distribution)
  - c.  Mound (gravity distribution)
- Well Data
- a. Depth: \_\_\_\_\_
  - b. Diameter: 2"
- Type of Well
- a.  Drilled
  - b.  Sand Point

1 Inch Equals \_\_\_\_\_  
DESIGN



Show Distance Between Sewage System And Buildings, Property Lines, Lake, Roads And All Wells Within 125 Feet.

	Tank	Drainfield		Tank	Drainfield
Distances to Well:	- 50'	* 60'	Distance to Pressure Line:	-	-
Distance to Building:	- 27'	53'	Tank Capacity (gal.) & Area of Drainfield (ft. 2):	- 1000	520
Distance to Property Line:	- 12'	12'	Distance to Ordinary High Water Level:	- 80'	80'
Distance to Suction Line:	- +50'	+50'	Drainfield Separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:	- N/A	4'

I hereby certify with my signature that all data on my application forms, plans and specifications are true and correct:

Signature of Applicant

Date

### TO BE COMPLETED BY ZONING OFFICE

- CERTIFICATE IS HEREBY DENIED: (See Back For Reasons)
- CERTIFICATE IS HEREBY GRANTED; Based upon the application, addendum form, plans, specifications and all other supporting data. With proper maintenance this system can be expected to function satisfactorily, however this is not a guarantee.

BECKER COUNTY ZONING OFFICE

*Hayden Swenby*  
Signature

Zoning Administrator 6-28-93  
Title Date

\*Systems installed Per the code at the time of installation shall be considered conforming until found to be failing

**APPLICATION  
FOR SEWAGE SYSTEM  
CERTIFICATE OF COMPLIANCE**  
With The Becker County Zoning Ordinance

Application Number <u>0747</u>
Tax Parcel Number <u>08.0006.000</u>
Fire Number of Project Location

**A. GENERAL INFORMATION**

1. Applicant's Name (Last, First, M.I.) <u>Maloney, Pat</u>		2. Authorized Agent (If applicable)	
3. Mailing Address (Street, RFD, Box Number, City, State, Zip Code) <u>RK 3 Box 48 Detroit Lakes MN 56501</u>			
4. Day Phone	5. Evening Phone	6. Section <u>16</u>	7. Township <u>Detroit</u>

**B. PROPERTY DESCRIPTION**

1. Lot(s), Block, Subdivision Name  
P4 Plot 1 Reg 185' S + 175' W of NE Cor Lot 1 th NE 141.5'

7. Note: If the property is a metes and bounds description, check here [ ] and attach a copy of the exact legal description.

**SEWAGE SYSTEM DATA**

Anticipated Use

- a.  Single Family
- b.  Multiple Family
- c.  Commercial
- d.  Agricultural
- e.  Other (specify)

Type of System

- a.  Septic Tank Only
- b.  Drainfield Only
- c.  Septic Tank & Drainfield
- d.  Holding Tank
- e.  Alternative System (specify)

Type of Drainfield

- a.  Standard System
- b.  Mound (pressure distribution)
- c.  Mound (gravity distribution)

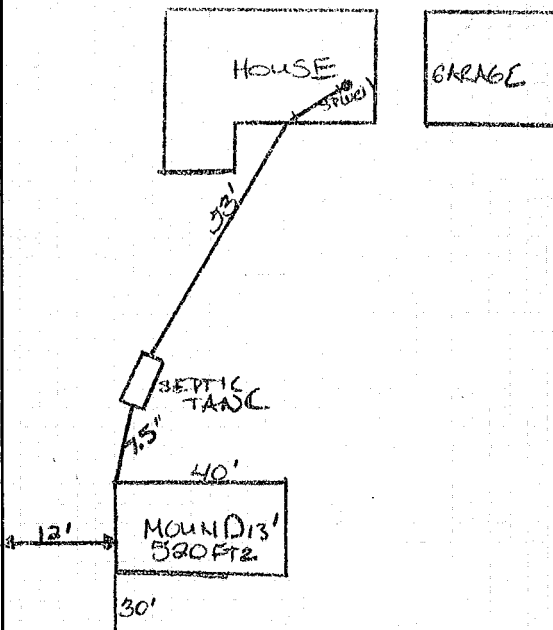
Well Data

- a. Depth: \_\_\_\_\_
- b. Diameter: 2"

Type of Well

- a.  Billed
- b.  Sand Point

**1 Inch Equals \_\_\_\_\_  
DESIGN**



Show Distance Between Sewage System And Buildings,  
Property Lines, Lake, Roads And All Wells Within 125 Feet.

	Tank	Drainfield		Tank	Drainfield
Distances to Well:	- <u>50'</u>	- <u>*60'</u>	Distance to Pressure Line:	- _____	- _____
Distance to Building:	- <u>27'</u>	- <u>53'</u>	Tank Capacity (gal.) & Area of Drainfield (ft. 2):	- <u>1000</u>	- <u>530</u>
Distance to Property Line:	- <u>12'</u>	- <u>12'</u>	Distance to Ordinary High Water Level:	- <u>80'</u>	- <u>100'</u>
Distance to Suction Line:	- <u>150'</u>	- <u>150'</u>	Drainfield Separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:	- <u>N/A</u>	- <u>4'</u>

I hereby certify with my signature that all data on my application forms, plans and specifications are true and correct: \_\_\_\_\_

Signature of Applicant

Date

**TO BE COMPLETED BY ZONING OFFICE**

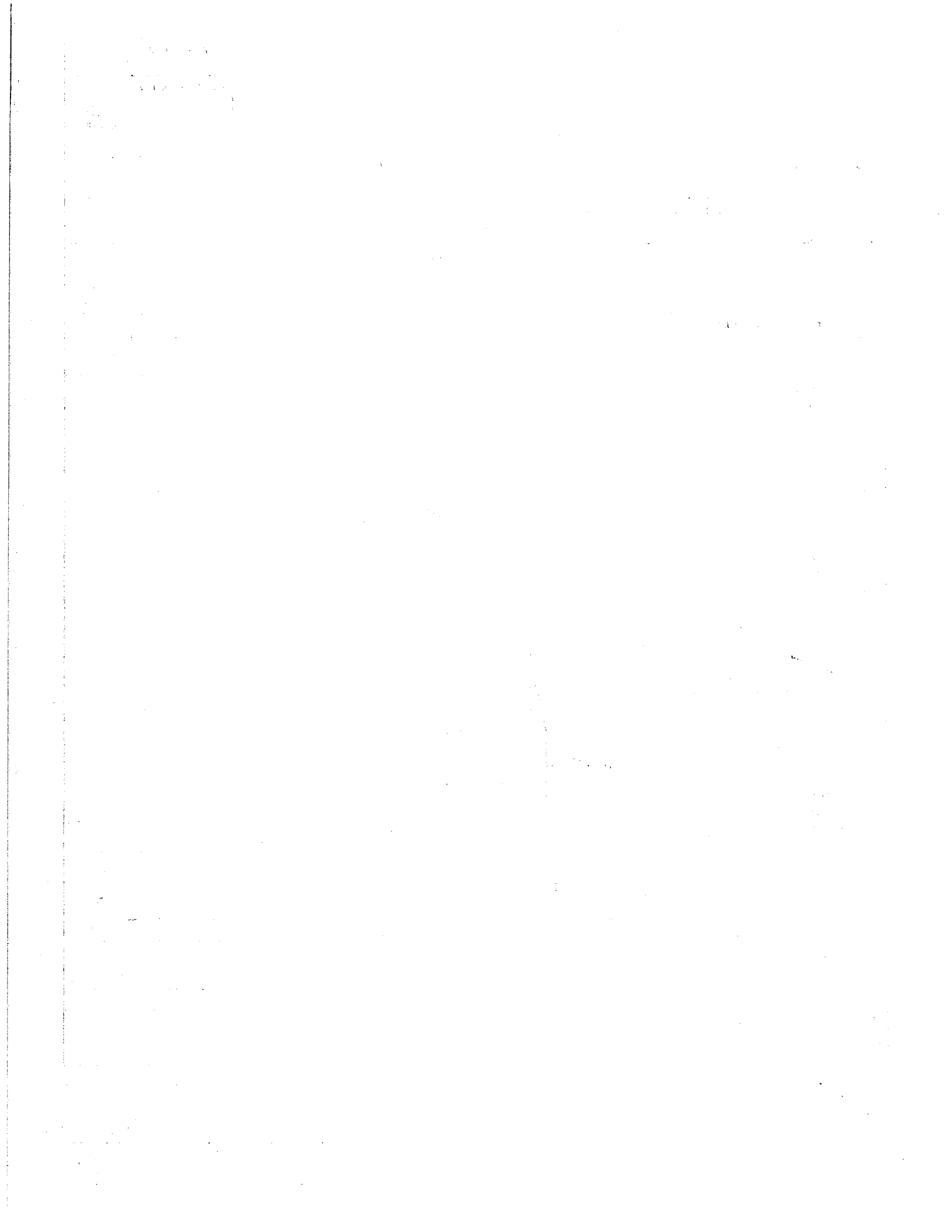
- CERTIFICATE IS HEREBY DENIED: (See Back For Reasons)
- CERTIFICATE IS HEREBY GRANTED; Based upon the application, addendum form, plans, specifications and all other supporting data. With proper maintenance this system can be expected to function satisfactorily, however this is not a guarantee.

BECKER COUNTY ZONING OFFICE

Hayden Swenby  
Signature

Zoning Administrator 6-28-93  
Title Date

\*Systems installed Per the code at the time of installation shall be considered conforming until found to be non-compliant



**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 \_\_\_\_\_

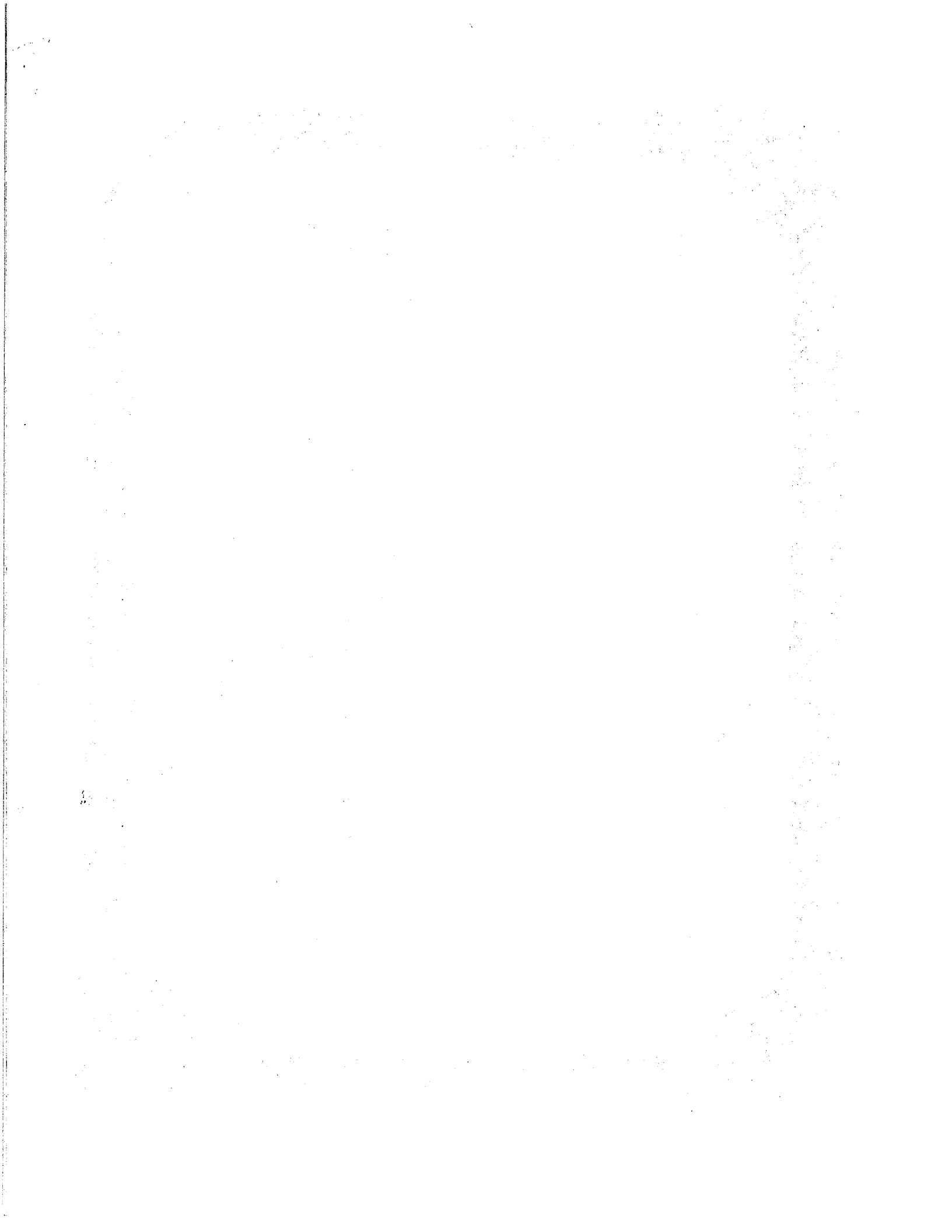
Owner: Name \_\_\_\_\_

Address \_\_\_\_\_

Zip No. \_\_\_\_\_

Permit No. SP \_\_\_\_\_

Signed by: \_\_\_\_\_  
Zoning Administrator  
Becker County, Minnesota



**INSPECTOR'S CHECK LIST**  
*Make all measurements and computations*

25  
5/27  
67

	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.

40  
13/0  
12/0  
40/20  
5

**SEWAGE DISPOSAL SYSTEM STATISTICS**

13' x 40'

CATEGORY	SEPTIC TANK				SEEPAGE PIT				DRAIN FIELD			
	Actual		Should be		Actual		Should be		Actual		Should be	
Capacity	1000	Gls.		Gls.	520	SF		SF		SF		SF
Distance from Nearest Well	50	F		F	52	F	75	F		F	50	F
Distance from Lake or Stream	135	F		F	151	F		F		F		F
Distance from Occupied Building	30	F	10	F	46	F	20	F		F	20	F
Distance from Property Line	12	F	10	F	33	F	10	F		F	10	F
Distance from Bottom to Water Table	--	F	--	F		F	4	F		F	4	F

Inspector's Comments: Left station to mound type seepage bed,  
gbs rock

**INTERPRETATION OF ABBREVIATIONS**

- Gls — Gallons
- SF — Square Feet
- F — Linear Feet

Mark Kuehn  
 Inspector's Signature

Inspection Dated 8-22 1983

Title

Agency

White - Office  
 Yellow - Owner  
 Pink - Assessor  
 Goldenrod - Inspector

**BECKER COUNTY ZONING ADMINISTRATION**  
**COUNTY COURT HOUSE — Phone 218-847-3938—Detroit Lakes, Minn. 56501**

Permit No. 12-109302-30  
 Date 8-22-83

**APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY**

08382

LEGAL  
 AND  
 LOCATION

B Robin Creek Sub  
387 Big Lake Rd  
 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.
	<u>KORSMO</u>	<u>ALVIN</u>				
Contractor	Name					
	<u>Shoenis Plumbing</u>					

**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 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 \_\_\_\_\_ Baths \_\_\_\_\_

**HEATING:**

Electric  Gas  Oil  
 Coal  None  
 Other:     

Type of Roof: \_\_\_\_\_

**SEWAGE DISPOSAL SYSTEM DATA:**

**SEPTIC TANK**

**SEEPAGE PIT**

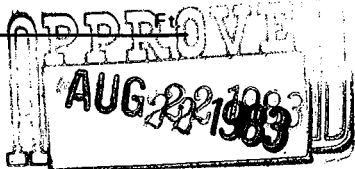
**DRAIN FIELD**

	Capacity	Distance from nearest well	Distance from lake or stream	Distance from occupied building	Distance from property line	Distance from bottom to Water: Table
	<u>1000</u> Gls.	<u>150</u> Ft.	<u>150</u> Ft.	<u>110</u> Ft.	<u>110</u> Ft.	<u>4</u> Ft.

*All distances are shortest distance between nearest points*

**CHARACTERISTICS:**

Lot Area is 60 x 180 square feet. Water frontage is 60 feet.  
 Building set back from high water mark is 15 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 7.80 feet.  
 Side yard is 10 and 110 feet. Rear yard is \_\_\_\_\_ feet.  
 Building will be located 110 feet from septic tank (Sewage System Permit must be obtained before installation).  
 Building will be located 110 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 8-22-83

Signature of Owner

When signed and approved by the Zoning Administration this becomes your permit. Permission is hereby granted to the above named applicant to perform the work described in the above statement and/or as shown on the sketch. 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.

**MUST BE POSTED AT THE BUILDING SITE**

Dated \_\_\_\_\_

Becker County Zoning Administrator

Permit Fee \$ 10.00 State Surcharge \$ 50

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