



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

080693000
Application Number

Tax Parcel Number
08.0693.000
Fire Number of Project Location

A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.) <u>Yost, Fredrick + Linda</u>		2. Authorized Agent (if applicable)	
3. Mailing Address (Street, RFD, Box Number, City, State, Zip Code) <u>602 Brandy Lake Estates Detroit Lakes, MN. 56501</u>			
4. Day Phone	5. Evening Phone	6. Section <u>21</u>	7. Township <u>Detroit</u>

B. PROPERTY DESCRIPTION

1. Lot(s), Block, Subdivision Name
Lot 15 Brandy Lake Estates

<p>SEWAGE SYSTEM DATA</p> <p>Anticipated Use</p> <p>a. <input checked="" type="checkbox"/> Single Family</p> <p>b. <input type="checkbox"/> Multiple Family</p> <p>c. <input type="checkbox"/> Commercial</p> <p>d. <input type="checkbox"/> Other (specify)</p> <p>Type of Installation</p> <p>a. <input type="checkbox"/> Septic Tank Only</p> <p>b. <input type="checkbox"/> Drainfield Only</p> <p>c. <input checked="" type="checkbox"/> Septic Tank & Drainfield</p> <p>d. <input type="checkbox"/> Holding Tank</p> <p>e. <input type="checkbox"/> Septic Tank/Drainfield Lift Station</p> <p>Type of Drainfield</p> <p>a. <input checked="" type="checkbox"/> Standard System</p> <p>b. <input type="checkbox"/> Mound (pressure distribution)</p> <p>Well Data</p> <p>a. Depth <u>>50'</u></p> <p>b. Diameter</p> <p>Type of Well</p> <p>a. <input checked="" type="checkbox"/> Drilled</p> <p>b. <input type="checkbox"/> Sand Point</p> <p><i>Municipal Well</i></p>	<p>1 Inch Equals</p> <p>DESIGN</p>
---	--

	Tank	Drainfield		Tank	Drainfield
Distances to Well:	= <u>>100'</u>	= <u>>100'</u>	Distance to Pressure Line:	= <u>>20'</u>	= <u>>80'</u>
Distance to Building:	= <u>10'</u>	= <u>70'</u>	Tank Capacity (gal. & Area of Drainfield (ft 2))	= <u>1000</u>	= <u>375 ft²</u>
Distance to Property Line:	= <u>>10'</u>	= <u>>10'</u>	Distance to Ordinary High Water Level:	= <u>>300'</u>	= <u>>300'</u>
Drainfield separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:			=	<u>>6'</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 PLANNING AND ZONING

() CERTIFICATE IS HEREBY DENIED: (See back For Reasons)

(X) CERTIFICATE IS HEREBY GRANTED: Based upon the application, addendum from, plans, specifications and all other supporting data. With proper maintenance this system can be expected to function satisfactory, however this is not a guarantee.

BECKER COUNTY PLANNING AND ZONING

[Signature]
Signature
Inspector
Title

03 June 93
Date

Onsite Septic System Site Evaluation/Design

Tax Parcel Number 080693-000

Legal Description: <u>Lot 15</u>			
<u>Brandy Lake Estates</u>	<u>21</u>	<u>139</u>	<u>041</u>
Lake/Stream Name	Lake/Stream Class	Section	TWP
		Range	Township Name
<u>FREDRICK A + LINDA L YOST</u>		<u>102 Brandy Lake Est Detroit Lakes Mn 56501</u>	
Property Owner	Address	City, State, Zip Code	Phone Number
			<u>847-3847</u>
<u>Mike Bergh</u> <u>RT1 P0886 Audubon Mn 56511</u>			
Name and Address of Designer			
<u>#1164</u>	<u>439-6412</u>	<u>5-28-98</u>	
MPCA NUMBER	PHONE	Date of Site Evaluation	
Name and Address of Installer		MPCA Number	

I certify that the site evaluation has been completed in accordance with all provisions of ISTS Minnesota Rules Chapter 7080.

Signature of Designer Mike Bergh Date 5-28-98

*FOR USE BY BECKER COUNTY
ENVIRONMENTAL SERVICES DEPARTMENT ONLY*

Date Site Evaluation / Design received _____	Received by _____
Date Site Evaluation approved <u>5/29/98</u>	Approved by <u>Hebi Moltze</u>

- *** Any changes to the permit must first be approved by Becker County Planning & Zoning. No system shall be covered up without inspection by Becker County Planning & Zoning.
- *** Inspections must be scheduled at least 24 hours prior to time requested.

Application Fee <u>45⁰⁰</u>	State Surcharge <u>.50</u>	Total <u>45⁵⁰</u>
<input type="checkbox"/> Application is hereby denied		
<input checked="" type="checkbox"/> Application is hereby granted to <u>Fred Yost</u> to install an individual septic system according to the specifications of the site evaluation and design submitted to the Becker County Environmental Services Office. By Order of:		
<u>Hebi Moltze</u>		<u>5/29/98</u>
Signature of Becker County Qualified Employee		Date
This permit expires on <u>11/29/98</u>		

Inspected by _____ Date _____ Permit # 12108

SOIL INFORMATION

TEST HOLE #1

TEST HOLE #2

DEPTH IN INCHES	SOIL TEXTURE	MUNSELL COLOR	STRUCTURE	DEPTH IN INCHES	SOIL TEXTURE	MUNSELL COLOR	STRUCTURE
8"	LOAM	Black	BLOCKY PLATY PRISMATIC NONE	8"	LOAM	Black	BLOCKY PLATY PRISMATIC NONE
7"	LOAMY SAND	D. Brown	BLOCKY PLATY PRISMATIC NONE	8"	LOAMY SAND	D. Brown	BLOCKY PLATY PRISMATIC NONE
57'	GRAVELLY SAND	L. Brown	BLOCKY PLATY PRISMATIC NONE	56"	GRAVELLY SAND	L. Brown	BLOCKY PLATY PRISMATIC NONE
			BLOCKY PLATY PRISMATIC NONE				BLOCKY PLATY PRISMATIC NONE
Depth to standing water	6'+			Depth to standing water	6'+		
Depth to mottling	6'+			Depth to mottling	6'+		

Describe the surface features (slope, runoff, weather conditions, vegetation type, evidence of compaction, etc.)

2% Slope OPEN LAWN AREA

WATER USES:

DESIGN FLOW 450 GPD

GRINDER PUMP/LIFT STATION IN HOUSE

() YES () NO

(X) Washing Machine

NO. of Bedrooms 3

() Dishwasher

NO. of Bathrooms 2

() Water Softner

SQ FT of Structure 980

() Garbage Disposal

WELL INFORMATION: CENTRAL WELL

Property's Well - Depth _____ Drilled (X) Sandpoint ()

Neighboring Well - Depth _____ Drilled () Sandpoint ()

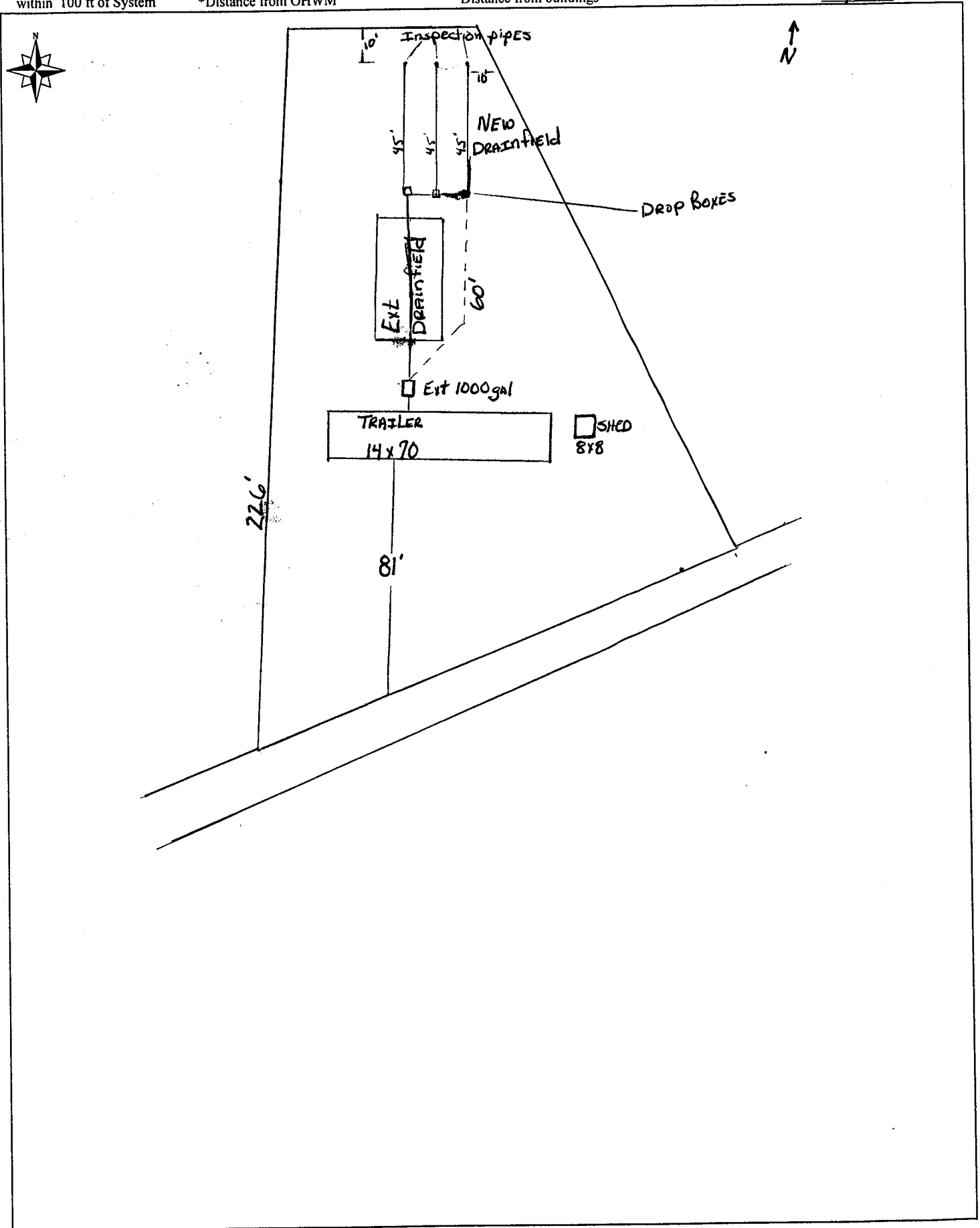
(within 100 feet of system)

Work Category Proposed	Type of System Proposed	Type of Drainfield Proposed
(X) NEW SYSTEM	() SEPTIC TANK/DRAINFIELD	(X) STANDARD (gravelless/chamber)
() REPAIR	(X) DRAINFIELD ONLY	() STANDARD (rock trench)
() REPLACEMENT	() HOLDING TANK	() STANDARD (bed)
	() LIFT STATION	() MOUND (pressure distb)
	() ALTERNATE (specify) _____	() PRESSURIZED BED
Perc Rate <u>1 to 5</u>	Soil Sizing Factor <u>83</u>	Depth to Restricting Layer <u>6'</u>
Maximum Depth of System <u>4'</u>	Size of Tank <u>1000</u>	Size of Lift Station _____
	Size of Drainfield <u>375</u> Sq Ft	Length of System <u>45'</u>
Size of Gravelless Pipe <u>10"</u>	Size of Mound Rock Bed _____	Depth of Clean Sand _____
Depth of Rock <u>3 ft 45'</u>	Size of Lift Pump _____	Length of Lift Line _____
Number of Trenches <u>3 at 45'</u>	Size of Lift Line _____	
Additional Information: <u>Old drainfield to be disconnected.</u>		

Septic System Design/Site Evaluation

The site plan must be drawn to dimension or to scale:

- *Dimensions of Lot
- *Existing & Proposed Buildings
- *Easements & setbacks
- *Location of any Unsuitable Soil
- *Well & Water Line Locations
- *Distance from Property Lines
- *Tank Access Route
- *Soil Borings & Per Test Locations
- within 100 ft of System
- *Distance from OHWM
- *Distance from buildings
- *Scale - One inch = 40 ft



- PERCOLATION TEST SHEET -

Test hole location _____ Date test hole was prepared: _____
 Depth of hole bottom: _____ inches Diameter of hole: _____ inches
 Soil Data from test hole: _____ depth, inches _____ soil texture: _____ soil color: _____

Method of scratching sidewall: _____ Depth of pea size gravel in bottom of hole: _____ inches
 Date and hour of initial water filling: _____ Depth of initial water filling: _____ above hole bottom
 Method used to maintain 12" of water depth in hole for 4 hours: _____
 Percolation test conducted by: _____ Percolation test started at _____ (am / pm).
 Maximum water depth above hole bottom during test: _____ inches

TIME	INTERVAL (MINUTES)	WATER DEPTH	WATER DROP (fraction)	WATER DROP (decimal)	PERC RATE CALCULATION	CONVERSIONS
START	START	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	1:16 = .06
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	13 = .13
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	3:16 = .13
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	14 = .25
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	5:16 = .31
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	33 = .33
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	7:16 = .44
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	12 = .5
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	9:16 = .56
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	53 = .53
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	11:16 = .69
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	34 = .75
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	13:16 = .81
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	78 = .88
REFILL	REFILL	---	---	---	$\frac{\text{TIME}}{\text{DROP}} = \text{PERC}$ (Decimal)	15:16 = .94

Ten Percent Calculation *

A, B, C	B, C, D
Largest # of ABC - Smallest # of ABC = _____	Largest # of BCD - Smallest # of BCD = _____
Smallest # of ABC x 0.10 = _____	Smallest # of BCD x 0.10 = _____
C, D, E	D, E, F
Largest # of CDE - Smallest # of CDE = _____	Largest # of DEF - Smallest # of DEF = _____
Smallest # of CDE x 0.10 = _____	Smallest # of DEF x 0.10 = _____
E, F, G	F, G, H
Largest # of EFG - Smallest # of EFG = _____	Largest # of FGH - Smallest # of FGH = _____
Smallest # of EFG x 0.10 = _____	Smallest # of FGH x 0.10 = _____

* If the top number in each set of boxes is larger than the bottom number then take another reading. If the top number is equal or smaller than bottom number, average the three numbers for the perc rate.

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Largest # of CDE - Smallest # of CDE = _____	Largest # of DEF - Smallest # of DEF = _____
Smallest # of CDE x 0.10 = _____	Smallest # of DEF x 0.10 = _____
E, F, G	F, G, H
Largest # of EFG - Smallest # of EFG = _____	Largest # of FGH - Smallest # of FGH = _____
Smallest # of EFG x 0.10 = _____	Smallest # of FGH x 0.10 = _____

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

BECKER COUNTY ZONING ADMINISTRATION

Permit No. 17-10110-00

COUNTY COURT HOUSE - Phone 218-847-3938 - Detroit Lakes, Minn. 56501

Date 5/22/85

APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

9737

LEGAL	Lot 15 Block 1 Brandy Lake Estate					
DESCRIPTION						
AND						
LOCATION	13941 Detroit					
	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.
	Schermhorst	Roger		RR 3 Detroit Lakes, Minn. 56501		
Contractor	Name					

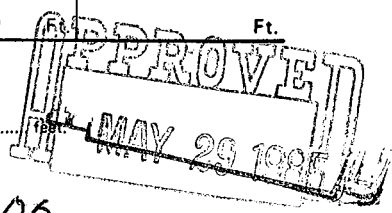
TYPE OF IMPROVEMENT:	RESIDENTIAL PROPOSED USE:	NON-RESIDENTIAL PROPOSED USE:
() New Building () Alteration Other Sewer Repair	() One Family Dwelling () Multiple Dwelling Units	Specify: Size:

ESTIMATED COST OF IMPROVEMENT \$		Construction Starting Date:
PRINCIPAL TYPE OF FRAME:	TYPE OF SEWAGE DISPOSAL:	DIMENSIONS:
() Masonry () Wood Frame () Structural Steel () Other - Specify	() Public () Individual Septic Tank, etc. WATER SUPPLY: () Public () Individual Well MECHANICAL EQUIPMENT: Elevator: () Yes () No Air Conditioning: () Yes () No () Central () Unit	Basement: () Yes () No Stories above basement: Sq. feet (outside dimension) Bedrooms 2 Baths HEATING: () Electric () Gas () Oil () Coal () None Other:
Type of Roof:		

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity	Gls. 300	Sq. Ft.	Sq. Ft.
Distance from nearest well	Ft. +75	Ft.	Ft.
Distance from lake or stream	Ft.	Ft.	Ft.
Distance from occupied building	Ft. +10	Ft.	Ft.
Distance from property line	Ft. +10	Ft.	Ft.
Distance from bottom to Water Table	Ft. +4	Ft.	Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS:	5/8 acre	Water frontage is
Lot Area is	square 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 100 feet.	
Side yard is +50 and +50	feet. Rear yard is +50	
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 5/22/85 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.

Dated 5/23/85
Permit Fee \$ 10.00 State Surcharge \$ 50
Becker County Zoning Administrator

Comments:

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		Gls.		Gls.		SF		SF		SF		SF
Distance from Nearest Well		F		F		F	75	F		F	50	F
Distance from Lake or Stream		F		F		F		F		F		F
Distance from Occupied Building		F	10	F		F	20	F		F	20	F
Distance from Property Line		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: _____

**INTERPRETATION
OF ABBREVIATIONS**

Gls — Gallons
 SF — Square Feet
 F — Linear Feet

Inspector's Signature _____

Title _____

Inspection

Dated

19

Agency _____

BECKER COUNTY

Permit Number 14-13,770-30 Date 5/29/85

Building _____ Sewage System Sewer Repair

Township Detroit Sec 21 Description Lot 15
Block 1 - Brandy Lake Estates

Work Authorized Addition to sewer system
with 300 sq. ft. Deepage bed

Issued to: Name Roger Schermerhorn
Address: RR 3 Town Detroit Lakes
State Mn. Zip 56501

Sketch

NO WELL
ON THIS LOT

DF
1985

sl.

150'

EX. Mobil.
Home

50'

100'

200'

Tw p Rd.



1 Inch = _____ Feet

M.K.

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. Notify Becker County Zoning Administrator (847-3938) 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.

Floyd Sweeney

Becker County Zoning Administrator

BECKER COUNTY
DETROIT LAKES. MN 56501