



100142000

CKER COUNTY

9 LAKE AVENUE, P.O. BOX 787
CIT LAKES, MINNESOTA 56502-0787
(218) 846-7314

Fire No.

Application No.

6497

Tax Parcel No.

100142.000

ZONING APPLICATION
SUMMARY FORM
FORM A

A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.)

SANDBERG MARK A

2. Authorized Agent (if applicable)

3. Mailing Address (Street, RFD, Box Number, City, State, Zip Code)

HC 10 Box 266 Rochester Minn. 56578

4. Day Phone

847-8737

5. Evening Phone

847-8737

6. Section

7. Township

ERIE

X ANN 334-41501

B. PROPERTY DESCRIPTION

1. Lot(s), Block, Subdivision Name

1/10 of Blk. No. West Side of C. Rd. #29, No. of Hwy 34, 8 miles East of D.L. from McCallum across from

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

C. APPLICABLE ZONING DISTRICTS

(check all that apply)

- Residential
- Business
- Commercial
- Industrial
- Agricultural
- Shoreland(*)
- Other

*Fill in Section E. also.

D. TYPE OF ZONING REQUEST

Project Type	Necessary Supplemental Form
1. <input checked="" type="checkbox"/> Building Permit -----	Form B and H
2. <input checked="" type="checkbox"/> Sewage System Permit -----	Form C and H
3. <input type="checkbox"/> Setback Certificate	
4. <input type="checkbox"/> Land Alteration Permit -----	Form E and H
5. <input type="checkbox"/> Conditional Use Permit -----	Form F
6. <input type="checkbox"/> Variance -----	Form G
7. <input type="checkbox"/> Zoning District Change -----	Form F
8. <input type="checkbox"/> Subdivision Approval -----	Form F
9. <input type="checkbox"/> Ordinance Amendment -----	Form F
10. <input type="checkbox"/> Other (specify below)	

E. SHORELAND MANAGEMENT DATA

- 1. Lake / Stream Name N/A
- 2. Lake / Stream I.D. Number N/A
- 3. Classification: [] NE; [] RD; [] GD;
[] Other (specify below)

- IMPORTANT NOTICE -

Most projects require the submission of one or more additional forms as shown in SECTION D. and sometimes plans, specifications and a written project description before your application is considered to be complete. Form A primarily provides summary information for record keeping.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge:

Mark Sandberg
Signature

- 4-25-93
Date

F. ADMINISTRATIVE DATA SUMMARY
(For Office Use Only)

- 1. Proper addendum to application has been submitted.
- 2. Detailed plans have been submitted which were prepared by: _____ Dated: _____
- 3. Written project description has been submitted which was prepared by: _____ Dated: _____
- 4. Approved [] with, without modification on: 3-5-93
- 5. Denied on: _____
- 6. Itemization of Fees:

General Application
State Surcharge

130.0050185.00

- 7. Total Fees = 165.50
- 8. Fee paid on (date): 3-5-93
- 9. Administrative Summary for Building Permits, Sewage System Permits, and Shoreland Alteration Permits.
- a. Dates of inspection(s): _____
- b. Certificate of Occupancy
(Zoning Compliance) issued on: _____

- 10. Administrative Summary for Applications for Subdivision Approval, Variances, Conditional Use Permits, Ordinance Amendments and Zoning District Changes:
 - a. Referred to Township on: _____
 - b. Referred to Planning Commission on: _____
 - c. Referred to Board of Adjustment on: _____
 - d. Referred to County/City Engineer on: _____
 - e. Referred to County/City Attorney on: _____
 - f. Referred to Soil and Water Cons. Dist. on: _____
 - g. Referred to Watershed District on: _____
 - h. Date of Hearing Notice: _____
 - i. Date of Public Hearing: _____
- j. Is ten (10) day notice to the DNR necessary? [] yes, [] no
If yes, enter date sent to DNR here: _____

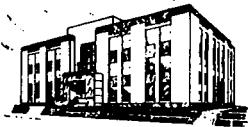
- k. Is ten (10) day final notice to the DNR necessary? [] yes, [] no
If yes, enter date sent to DNR here: _____

- l. Final Action: [] APPROVED [] with, [] without modification
[] DENIED

By: [] County Board; [] Board of Adjustment
Date of Action: _____

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NOTES



BECKER COUNTY

829 LAKE AVENUE, P.O. BOX 787
DETROIT LAKES, MINNESOTA 56502-0787
(218) 846-7314

Fire No.

Application No.

Tax Parcel No.

649
100142.000

SUPPLEMENTAL DATA FOR BUILDING PERMIT FORM B

A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.)

Sandberg Mark A

2. General Contractor

Self

3. Electrical Contractor

Self

4. Plumbing Contractor

Self

5. Earthwork Contractor

Self

6. Architect

7. Contractor License No.

B. PROJECT INFORMATION

1. Type of Project
a. New Construction
b. Addition
c. Relocation
d. Repair
e. Foundation Only
f. Roofing
g. Other (specify)

2. Proposed Use
a. Single Family
b. Multiple Family
c. Agricultural
d. Public
e. Commercial
f. Industrial
g. Other (specify)

3. Lot Dimensional Data

Proposed Required
a. Area in ft² = 20 ACREST
or acres:
b. Lot width at building line: = 200' T
c. Lot depth: = 200' F
d. Lake/Stream setback: =
e. Side lot line: = 200' F
f. Road Setback: TWP Road CL =
County Road CL = 245 ft
Four Lane ROW =

Well Data

a. Depth: - 150' to 200'
b. Diameter: - 4 inch
c. Depth of Casing: - 150' to 200'
 Drilled Public
 Sand Point Private Well

Structure Type

Residence Ag. Bldg.
 Garage Storage
 Office Boathouse
 Warehouse Deck
 Other (specify below)

Sewage Disposal System Data

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

C. STRUCTURE DATA

1. Structure Elevation Requirements

a. Max. Building Height = 15 ft or -

b. Fill Elev. Adjacent to Structure = 7

2' Below SIDING
of House

2. Structure Dimensions

a. Length (ft.) = 36'
b. Width (ft.) = 28'
Areas in ft.²
c. Basement = 1008
d. 1st Floor = 1008
e. 2nd Floor =
f. Total Area = 2016

SINGLE STORY HOUSE
28' x 36'
Basement
28' x 36'

3. Type of Construction

Wood /Frame
 Masonry
 Metal
 Pole Bldg.
 On-site Prefab
 Off-site Prefab

4. Heating
 Oil
 Gas
 Electric
 Wood
 Solar

5. Project Cost Factors

a. Cost of Improvements: \$ 8000.00

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

Mark Sandberg

Signature of Applicant

1-25-93
Date

BUILDING PERMIT

APPLICATION IS HEREBY DENIED
 PERMISSION IS HEREBY GRANTED TO

all in accordance with the application, addendum form, plans, specifications and all other supporting data, unless specified
hereinafter in the GENERAL and/or SPECIAL PROVISIONS.

BY ORDER OF:

Mark Sandberg DS-3A-55-93

Signature of Permitting Authority

Title

Date

NOTE: THIS PERMIT TERMINATES ON: _____ except as provided for by local ordinance and/or Minnesota Law.

SEE REVERSE FOR GENERAL AND SPECIAL PROVISIONS

Application Fee \$ 120.00

Township Fee \$.00

Total \$ 120.00

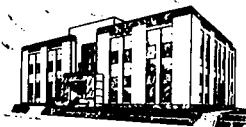
PAGE 2
FORM B - BUILDING PERMIT

GENERAL PROVISIONS

1. This permit [] is; [] is not subject to the State Building Code.
2. No changes in plans or specifications can be made to the work authorized herein unless such change is first approved in writing by the permitting authority.
3. Permittee shall grant access to the site at all reasonable times so that the permitting authority or his/her agents may conduct inspections to ascertain compliance with the terms and conditions of this permit.
4. The construction site shall be kept reasonably free of debris at all times so as to not create a public nuisance.
5. Permittee shall install permanent and temporary erosion control measures in order to prevent erosion of disturbed soils from the project site onto adjacent parcels of land, public waters, public roads, ditches, sewer facilities and the like. Permittee shall cease all related authorized construction activities until such time as any such problem is corrected as agreed to by the permitting authority.
6. No certificate of occupancy or zoning compliance may be issued until all the provisions and conditions of this permit are complied with in full.
7. A copy of this permit or an official notice or placard thereof must be posted in a conspicuous place protected from the effects of weather no more than 12 feet above grade on the premises which the work is to be done and shall be maintained there until completion of said work.
8. The granting of this permit does not exempt the permittee from having to secure other permits from other state, federal or local units of government which may have jurisdiction over portions of the authorized project.

SPECIAL PROVISIONS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____



BECKER COUNTY

829 LAKE AVENUE, P.O. BOX 787
DETROIT LAKES, MINNESOTA 56502-0787
(218) 846-7314

SUPPLEMENTAL DATA FOR SEWAGE SYSTEM PERMIT FORM C

Fire No.

Application No.

6447

Tax Parcel No.

10,0142.000

*You will bring in
a Perc Test to design
site*

A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.)

Sandberg, Mark

2. Sewer Installer

Self

3. Soil Tester/Earthwork Contractor

4. MPCA Certification-No.

Self

B. SEWAGE SYSTEM DATA

1. Work Category	2. Type of System	3. Soils	2. Supporting Data/Attachments
a. <input checked="" type="checkbox"/> New System b. <input type="checkbox"/> Repair	a. <input type="checkbox"/> Septic Tank Only b. <input type="checkbox"/> Drainfield Only c. <input checked="" type="checkbox"/> Septic Tank & Drainfield d. <input type="checkbox"/> Alternative System (specify)	a. Soil Type: _____ b. Percolation Rate (minutes per inch): _____ c. Depth to Water Table: _____	<input type="checkbox"/> Sketch Plan** <input type="checkbox"/> Percolation Data Sheets <input type="checkbox"/> Soil Borings <input type="checkbox"/> Tank/Drainfield Design Calculations
3. Anticipated Use	4. Type of Drainfield		
a. <input checked="" type="checkbox"/> Single Family b. <input type="checkbox"/> Multiple Family c. <input type="checkbox"/> Commercial d. <input type="checkbox"/> Agricultural e. <input type="checkbox"/> Other (specify)	a. <input type="checkbox"/> Standard System b. <input type="checkbox"/> Mound (pressure distribution) c. <input type="checkbox"/> Mound (gravity distribution)		

5. System Design Data

Tank	Drainfield
50'	50'
10'	80'
- - - - -	
a. Distance to Well: - - - - -	
b. Distance to Building: - - - - -	
c. Distance to Property Line: - - - - -	
d. Distance to Suction Line: - - - - -	
e. Distance to Pressure Line: - - - - -	
f. Tank Capacity (gal.) and Area of Drainfield (ft. 2): - - - - -	
g. Distance to Lake or Stream (from Ordinary High Water Level): - - - - -	
h. Drainfield Separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling: - - - - -	

b. Well Data:

a. Depth: =	1200'	d. <input checked="" type="checkbox"/> Drilled	g. <input type="checkbox"/> Public
b. Diameter: =	4"	e. <input type="checkbox"/> Sand Point	h. <input checked="" type="checkbox"/> Private Well
c. Depth of Casing: =		f. <input type="checkbox"/> Augered	

Water Uses:

Water Softener

Dishwasher

Washing Machine

Garbage Disposal

3 No. Bedrooms

1 No. Bathrooms

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

Signature of Applicant

Date

SEWAGE SYSTEM PERMIT

APPLICATION IS HEREBY DENIED

PERMISSION IS HEREBY GRANTED TO _____

All in accordance with the application, addendum form, plans, specifications and all other supporting data, unless specified hereinafter in the GENERAL and/or SPECIAL PROVISIONS.

BY ORDER OF: _____

Signature of Permitting Authority

Title

Date

NOTE: THIS PERMIT TERMINATES ON: _____ except as provided for by local ordinance and/or Minnesota Law.

- SEE REVERSE FOR GENERAL AND SPECIAL PROVISIONS -

Application Fee \$ 45.00

State Surcharge .50

Total \$ 45.50

PAGE 2
FORM C -SEWAGE SYSTEM PERMIT

GENERAL PROVISIONS

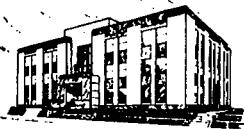
1. Permittee shall not cover the system authorized herein until such system has been inspected and determined to be compliant by the permitting authority. This provision can be waived only at the discretion of the permitting authority.
2. Where clay soils are predominant, no drainfield excavation can proceed if more than one (1) inch of total rainfall has been received at the nearest official rain gauge within one (1) week prior to construction. This provision can only be waived at the discretion of the permitting authority.
3. No changes in plans or specifications can be made to the work authorized herein unless such change is first approved in writing by the permitting authority.
4. Permittee shall grant access to the site at all reasonable times so that the permitting authority or his/her agents may conduct inspections to ascertain compliance with the terms and conditions of this permit.
5. The construction site shall be kept reasonably free of debris at all times so as to not create a public nuisance.
6. Permittee shall install permanent and temporary erosion control measures in order to prevent erosion of disturbed soils from the project site onto adjacent parcels of land, public waters, public roads, ditches, sewer facilities and the like. Permittee shall cease all related authorized construction activities until such time as any such problem is corrected as agreed to by the permitting authority.
7. No certificate of occupancy or zoning compliance may be issued until all the provisions and conditions of this permit are complied with in full.
8. A copy of this permit or an official notice or placard thereof must be posted in a conspicuous place protected from the effects of weather no more than 12 feet above grade on the premises which the work is to be done and shall be maintained there until completion of said work.
9. The granting of this permit does not exempt the permittee from having to secure other permits from other state, federal or local units of government which may have jurisdiction over portions of the authorized project.
10. This permit does not allow the destruction or removal of any trees or vegetation which exists more than ten (10) feet beyond the foundation of the authorized structure or more than five (5) feet beyond the edge of a driveway or parking lot unless authorized in a Special Provision below.

Date

Signature of Applicant

SPECIAL PROVISIONS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____



BECKER COUNTY

829 LAKE AVENUE, P.O. BOX 787
DETROIT LAKES, MINNESOTA 56502-0787
(218) 846-7314

SKETCH PLAN FORM H

Please be as complete as possible. Include all of the items listed below where applicable.

GENERAL CHECKLIST

- scale
- north arrow
- lot dimensions
- structure location
- side lot setback
- road setback
- septic tank location
- drainfield location
- location of all wells within 100' of drainfield
- fill & grading limits
- vegetation alteration limits

WATER RESOURCE CHECKLIST

- location of ordinary ^{now} high water level (OHWL)
- location of present water line
- setback from OHWL
- location of highest known water level
- existing local drainage
- location of wetland areas

Fire No.

Application No.

6497

Tax Parcel No.

10.0142.000

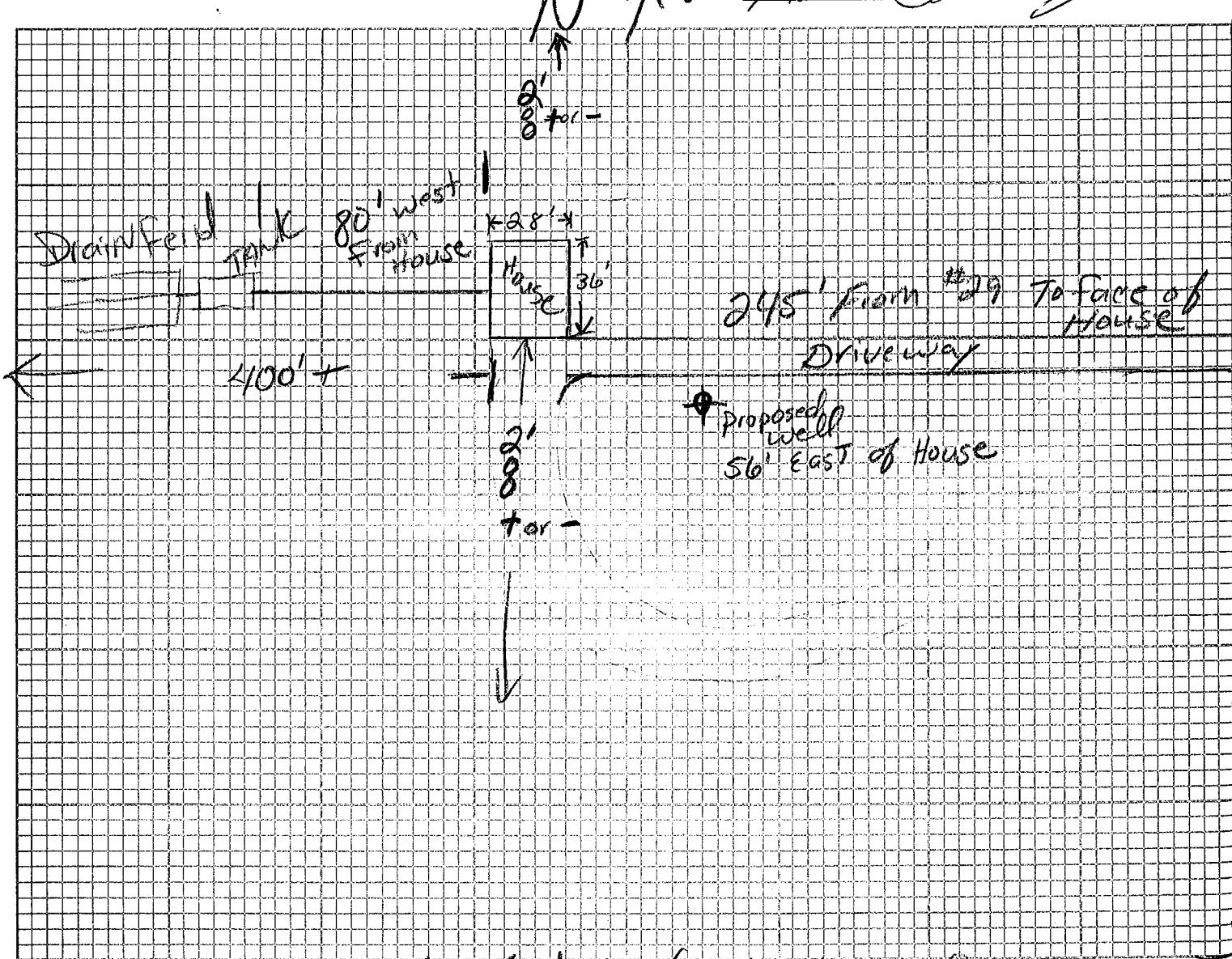
Scale of Diagram: 1 inch = 56 feet

Drawing By: Mark Sandberg

Date of Drawing: 4-25-93

Remarks: _____

Signature Mark Sandberg



8 miles East of S.C. / Hwy 37

LEGAL DESCRIPTION AND LOCATION	<u>LEONA BEACH LOT 9-7300 NW 1/4</u>					
	<u>286</u>	<u>COTTON</u>	<u>R.D</u>	<u>11</u>	<u>40</u>	<u>139</u>
Lake No.	Lake Name	Lake Classif.	Sec.	TWP.	Range	

IDENTIFICATION: Please Print All Information

Owner	Last Name <u>HANSON</u>	First Initial <u>J</u>	Mailing Address- No. Street, City and State <u>514 COTTONWOOD ST.</u> <u>GRAND FORKS, N.D.</u>	Zip No.	Tel. No.
Contractor	Name <u>SE 1 f</u>				

TYPE OF IMPROVEMENT: <input checked="" type="checkbox"/> New Building <input type="checkbox"/> Alteration Other <u>Addition</u>	RESIDENTIAL PROPOSED USE: <input checked="" type="checkbox"/> One Family Dwelling <input type="checkbox"/> Multiple Dwelling _____ Units	NON-RESIDENTIAL PROPOSED USE: Specify: <u>Addition to House</u> Size: <u>8' x 18'</u>
--	--	---

ESTIMATED COST OF IMPROVEMENT \$ <u>1,000</u>	Construction Starting Date:
---	-----------------------------

PRINCIPAL TYPE OF FRAME: <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Other — Specify <u>Asphalt</u>	TYPE OF SEWAGE DISPOSAL: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Individual Septic Tank, etc.	DIMENSIONS: Basement: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Stories above basement: Sq. feet (outside dimension) Bedrooms <u>2</u> Baths <u>1</u>	
	WATER SUPPLY: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Individual Well	MECHANICAL EQUIPMENT : Elevator: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Air Conditioning: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Central <input type="checkbox"/> Unit	HEATING: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Coal <input type="checkbox"/> None Other: <u>BEP 12x40</u>

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE <u>BEP 12x40</u>	DRAIN FIELD
Capacity <u>1000</u>	<u>1000</u> Gls.	Sq. Ft. <u>3</u>	Sq. Ft.
Distance from nearest well <u>20' 6" 29</u>	<u>50</u> Ft.	Ft.	Ft.
Distance from lake or stream <u>100</u>	<u>100</u> Ft.	Ft.	Ft.
Distance from occupied building <u>10</u>	<u>10</u> Ft.	Ft.	Ft.
Distance from property line <u>10</u>	<u>10</u> Ft.	Ft.	Ft.
Distance from bottom to Water Table <u>10</u>	Ft.	Ft.	Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS:

Lot Area is 75 x 200 square feet. Water frontage is 75 feet.
 Building set back from high water mark is 75 feet. (Building Line) 6 feet
 Land height above high water mark at building line is 6 feet
 Building set back from State highway is feet — from road or street is feet.
 Side yard is 20' and 3.6 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 6-14-74

J Howard Hanson
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 6-14-74

Howard Hanson
Becker County Zoning Administrator

Permit Fee \$ 10 State Surcharge \$.50

Comments: Paid 6-14-74 - Rec'd by [Signature]

30 x 60 ft. ~~40 x 60 ft.~~ 100 ft. 200 ft. 300 ft. 400 ft.

100 ft. 200 ft. 300 ft. 400 ft. 500 ft. 600 ft. 700 ft. 800 ft.

900 ft. 1000 ft. 1100 ft. 1200 ft. 1300 ft. 1400 ft. 1500 ft. 1600 ft.

1700 ft. 1800 ft. 1900 ft. 2000 ft. 2100 ft. 2200 ft. 2300 ft. 2400 ft.

2500 ft. 2600 ft. 2700 ft. 2800 ft. 2900 ft. 3000 ft. 3100 ft. 3200 ft.

3300 ft. 3400 ft. 3500 ft. 3600 ft. 3700 ft. 3800 ft. 3900 ft. 4000 ft.

4100 ft. 4200 ft. 4300 ft. 4400 ft. 4500 ft. 4600 ft. 4700 ft. 4800 ft.

4900 ft. 5000 ft. 5100 ft. 5200 ft. 5300 ft. 5400 ft. 5500 ft. 5600 ft.

5700 ft. 5800 ft. 5900 ft. 6000 ft. 6100 ft. 6200 ft. 6300 ft. 6400 ft.

6500 ft. 6600 ft. 6700 ft. 6800 ft. 6900 ft. 7000 ft. 7100 ft. 7200 ft.

7300 ft. 7400 ft. 7500 ft. 7600 ft. 7700 ft. 7800 ft. 7900 ft. 8000 ft.

8100 ft. 8200 ft. 8300 ft. 8400 ft. 8500 ft. 8600 ft. 8700 ft. 8800 ft.

8900 ft. 9000 ft. 9100 ft. 9200 ft. 9300 ft. 9400 ft. 9500 ft. 9600 ft.

9700 ft. 9800 ft. 9900 ft. 10000 ft. 10100 ft. 10200 ft. 10300 ft. 10400 ft.

10500 ft. 10600 ft. 10700 ft. 10800 ft. 10900 ft. 11000 ft. 11100 ft. 11200 ft.

LEGAL DESCRIPTION AND LOCATION	<u>LEONA BEACH Lot 9-73W NW 1/4</u>					
	<u>286</u>	<u>COTTON</u>	<u>RD</u>	<u>11</u>	<u>139</u>	<u>40</u>
	Lake No.	Lake Name	Lake Classif.	Sec.	TWP.	Range

IDENTIFICATION: Please Print All Information

Owner	Last Name <u>HANSON</u>	First Initial <u>J</u>	Initial <u>H</u>	Mailing Address— No. Street, City and State <u>514 COTTONWOOD ST. GRAND FORKS, N.D.</u>	Zip No. <u>58201</u>	Tel. No.	
Contractor	Name <u>SEFF</u>						

TYPE OF IMPROVEMENT: <input checked="" type="checkbox"/> New Building <input type="checkbox"/> Alteration Other _____	RESIDENTIAL PROPOSED USE: <input type="checkbox"/> One Family Dwelling <input type="checkbox"/> Multiple Dwelling _____ Units	NON-RESIDENTIAL PROPOSED USE: Specify: <u>GARAGE</u> Size: <u>16' x 26'</u>	
ESTIMATED COST OF IMPROVEMENT \$ <u>1,000</u>	Construction Starting Date:		
PRINCIPAL TYPE OF FRAME: <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Other — Specify <u>Asphalt</u>	TYPE OF SEWAGE DISPOSAL: <input type="checkbox"/> Public <input type="checkbox"/> Individual Septic Tank, etc.	DIMENSIONS: Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No Stories above basement: Sq. feet (outside dimension) Bedrooms Baths	
	WATER SUPPLY: <input type="checkbox"/> Public <input type="checkbox"/> Individual Well	MECHANICAL EQUIPMENT : Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Air Conditioning: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Central <input type="checkbox"/> Unit	HEATING: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Coal <input type="checkbox"/> None Other:

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity	Gls.	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.

All distances are shortest distance between nearest points

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 yard is 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 6-14-74

JHoward Hanson
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 — State Surcharge \$.50

Comments: PAID 6-14-74 - Read by Mail.

