

CONSTRUCTION SITE

er County Planning & Zoning Lake Ave, P O Box 787

Detroit Lakes, MN 56502-0787

New PED # 17.0031.002

| Onsite Septic System   | n Site Evaluation/D  | Design Tax Parce          | el Number /       | 6-7314; Fax (.<br><b>7-003/</b> 6 | 000 911 Ad          | ldress                      |                                 |
|--|----------------------|---------------------------|-------------------|-----------------------------------|---------------------|-----------------------------|---------------------------------|
| Legal Description:   | BASS KAI             | Kr fishi                  | fraco             | fSWI4 less<br>for Secti           | on <u>3</u> TW      | (0) HW                      | X 6<br>Range 47                 |
| Lake Name  | 55                   | Lake Classificat          | tion ( ) RD (     | ) GD (X) NE                       | Township Na         | ame <u>AAKr</u>             | FUNICO                          |
| Owner's Name   | M BERGA              | PN                        | Mailin<br>Address | 16735                             | 5 33                | 0 5%                        |                                 |
| City LAKE F.   |                      | State/:                   | Zip <i>5655</i>   | M Phone                           | Number <u>23</u>    | 8-5/78                      | <u> </u>                        |
| Number of Bedrooms 3 Well Casing Depth To Br Dalled +50 Garbage Disposal (Yes) (No)                                    |                      |                           |                   |                                   |                     |                             |                                 |
| Design Flow 7.30 GPD Depth of other wens within  |                      |                           |                   |                                   |                     |                             |                                 |
| (dwellings must be   | classified as Type 1 | .) 1                      | 00 ft of systen   | n //0///                          | <del></del>         | in House                    | (Yes)((NO))                     |
| Type of Observation  | n: Probe Pit Bor     | ing                       |                   | 150                               |                     | Town of Dunie               | -field                          |
| Original Soil (Yes)  | (No) Compacted       | Soil (Yes) (No)           | Propos            | sed Design                        | <b>N</b> C 01       | Type of Drain               |                                 |
| Depth to Restricting<br>Maximum Depth o  | Layer                | (                         | ) Replace Ser     |                                   | Char                | moer- H log E               | Q36 other                       |
| Maximum Depth o  | f System 3           | <u> </u>                  | Septic Tank       |                                   |                     | dard rock- dep              |                                 |
| Perc Rate  | _ Soil Sizing Factor | 1127                      | ) Drainfield (    | •                                 |                     | dard gravelles              | s ( ) Standard Bed              |
|  |                      |                           | ) Holding Ta      |                                   | ( ) Mou             |                             | ( ) At Grade                    |
|  |                      | (                         | ) Lift Station    |                                   | ( ) Pres            | surizeu deu                 | ( ) At Grade                    |
| SOIL BORING  |                      |                           |                   | RING LOG                          | T                   |                             | Type of alarm                   |
| DEPTH  | COLOR &              | l I                       | DEPTH             | TEXTURE                           | COLOR & MUNSELL NO. | STRUCTURE                   | Device on lift                  |
| (INCHES) TEX   | TURE MUNSELL N       | O. STRUCTURE BLOCKY PLATY | (INCHES)          | SANOY                             | 10YRA//             | BLOCKY                      | Station or<br>Holding tank      |
| 0-24 FIL   | L. MIXPA             | PRISMATIC NONE            | 0-16              | JOAM                              | BAKK                | PRISMATIC                   | Holding tank                    |
|  | Idy JOYR2/           | PLATY                     | , -               | /                                 |                     | BLOCKY<br>PLATY             |                                 |
| 24-30 KON  | yn Black             | NONE                      | 16-20             | SANd                              | MIXRE               | PRISMATIC<br>NONE<br>BLOCKY | Attach perc test Information if |
| 1  | 10/84/3              | PLATY                     |                   | 1 c A no                          | 10484/3             | PLATY<br>Pris <b>ma</b> tic | Required                        |
| 30-70 KON  | MY BRN               | NUNE-<br>BEOCKY           | 20-60             | KOAM                              | DRN                 | NONE)                       |                                 |
|  |                      | PLATY<br>PRISMATIC        |                   |                                   |                     | PLATY<br>PRISMATIC          |                                 |
|  |                      | NONE                      | <u> </u>          | <u> </u>                          |                     | NONE                        |                                 |
| I hereby certify that I have completed this work in accordance with applicable ordinances, rules and laws.             |                      |                           |                   |                                   |                     |                             |                                 |
| Name and Address of Designer ORANT ON Phone 4396928  |                      |                           |                   |                                   |                     |                             |                                 |
| MPCA Number  | <i>137</i> D         | ate of Site Evalu         | ation <i>G-</i> / | <i>9-08</i> _Sig                  | nature of Desig     | gner Man                    | Many                            |
| Name of Installer (if different from Designer)  MPCA Number  |                      |                           |                   |                                   |                     |                             |                                 |
| *FOR USE BY BECKER COUNTY ENVIRONMENTAL SERVICES DEPARTMENT ONLY*  |                      |                           |                   |                                   |                     |                             |                                 |
| *** 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.   |                      |                           |                   |                                   |                     |                             |                                 |
| *** Inspection   | s must be schedule   | d at least 24 hour        | rs prior to time  | e requested.                      |                     |                             |                                 |
| Date Received 8  | ·20.02 Ap            | plication Fee             | 7500              | Fine                              | \$                  | Total                       | 1500                            |
| [ ] Application is b   | erehy denied         |                           |                   |                                   |                     |                             |                                 |
| [ ] Application is hereby denied   |                      |                           |                   |                                   |                     |                             |                                 |
| Order of:  |                      |                           |                   |                                   |                     |                             |                                 |
| Many Journa 0.20.02 101000   |                      |                           |                   |                                   |                     |                             |                                 |
| Signature of Becker County Qualified Employee 8.20.03  Date Permit Issued Permit Number                                |                      |                           |                   |                                   |                     |                             |                                 |

\*Scale - One inch = The site plan must be drawn to dimension or to scale: \*Location of any Unsuitable Soil \*Existing & Proposed Buildings \*Easements & setbacks \*Dimensions of Lot \*Soil Borings & Per Test Locations \*Well & Water Line Locations \*Distance from Property Lines \*Tank Access Route \*Alternate Drainfield Location \*Distance from OHWM \*Distance from buildings within 100 ft of System 12 pieces of 14-10 \*as-built drawn by David Ohm-no on-site inspection

Tank Tank\* Drainfield Drainfield\*

(estimated) (actual)\* (estimated) (actual)\*

Distances to Well 50+ +00' 50+ +00' Tank size 1500
Distance to Building 20 32' 35 +20' Lift station size 1500
Distance to Property Line +10 +10 +10' Drainfield size 75

Distance to Pressure Line 100 +100 +100 +100 Pump HP

Distance to Ordinary High Water 1000 Date Installed 10-15

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## CERTIFICATE OF COMPLIANCE

| ( ) Certificate Is Hereby Denied<br>( ) Certificate is Hereby Granted Based upon the Ap | oplication, addendum from, plans, specifications      | and all other supporting data. |
|---|---|--------------------------------|
| With property maintenance, this system can be expected                                  | d to function satisfactory, however, this is not a gr | uarantee.                      |
| Signature Signature   | Soning repector Title                                 | 10-22-02<br>Date               |

Signature (Certificate of Comphance is not valid unless signed by a Registered Qualified Employee)