



190287000

COUNTY PLANNING & ZONING
835 Lake Avenue, P O Box 787
Detroit Lakes, MN 56502-0787
Phone (218) 846-7314, Fax (218) 846-7266

Fire Number _____

Onsite Septic System Site Evaluation/Design

Tax Parcel Number 19.0287.000

Legal Description: <u>lots 576 & NW 1/4 of SW 1/4 & lot 7</u>			
Lake/Stream Name	Lake/Stream Class	Section TWP Range	Township Name
		<u>14 138 411</u>	<u>Lake View</u>
Property Owner	Address	City, State, Zip Code	Phone Number
<u>Rodney & Randy Rosentrater</u>	<u>Rt 1 Box 379</u>	<u>Vergas MN</u>	
Name and Address of Designer			
<u>Beck hoe Service</u>			<u>7/20/98</u>
MPCA NUMBER	PHONE	Date of Site Evaluation	
<u>228</u>	<u>334 4055</u>		
Name and Address of Installer			MPCA Number
<u>Beck hoe Service</u>			<u>228</u>

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

Signature of Designer [Signature] Date 7/20/98

FOR USE BY BECKER COUNTY ENVIRONMENTAL SERVICES DEPARTMENT ONLY

Date Site Evaluation / Design received _____ Received by _____

Date Site Evaluation approved 7/20/98 Approved by [Signature]

- *** 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 75⁰⁰ State Surcharge 50 Total 75⁵⁰

Application is hereby denied

Application is hereby granted to R. Rosentrater 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:

[Signature] 7/20/98

Signature of Becker County Qualified Employee Date

This permit expires on 1/20/99

Inspected by [Signature] Date 7/20/98 Permit # 12395

SOIL INFORMATION

TEST HOLE #1

TEST HOLE #2

DEPTH IN INCHES	SOIL TEXTURE	MUNSELL COLOR	STRUCTURE	DEPTH IN INCHES	SOIL TEXTURE	MUNSELL COLOR	STRUCTURE
			BLOCKY PLATY PRISMATIC NONE				BLOCKY PLATY PRISMATIC NONE
			BLOCKY PLATY PRISMATIC NONE		Sand		BLOCKY PLATY PRISMATIC NONE
	Sand		BLOCKY PLATY PRISMATIC NONE			BLOCKY PLATY PRISMATIC NONE	
			BLOCKY PLATY PRISMATIC NONE			BLOCKY PLATY PRISMATIC NONE	
			BLOCKY PLATY PRISMATIC NONE			BLOCKY PLATY PRISMATIC NONE	
Depth to standing water				Depth to standing water			
Depth to mottling				Depth to mottling			

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

Sod area 39 Slope Sandy Soil

WATER USES: DESIGN FLOW 450 GPD

GRINDER PUMP/LIFT STATION IN HOUSE

() YES () NO

Washing Machine NO. of Bedrooms 3
 Dishwasher NO. of Bathrooms 2
 Water Softener SQ FT of Structure 1200
 Garbage Disposal

WELL INFORMATION:
 Property's Well - Depth 80 Drilled Sandpoint ()
 Neighboring Well - Depth _____ Drilled () Sandpoint ()
 (within 100 feet of system)

Work Category Proposed

Type of System Proposed

Type of Drainfield Proposed

- () NEW SYSTEM
- () REPAIR
- REPLACEMENT

- SEPTIC TANK/DRAINFIELD
- () DRAINFIELD ONLY
- () HOLDING TANK
- () LIFT STATION
- () ALTERNATE (specify)

- () STANDARD (gravelless/chamber)
- () STANDARD (rock trench)
- () STANDARD (bed)
- () MOUND (pressure distb)
- () PRESSURIZED BED

Perc Rate .83

Soil Sizing Factor .83

Depth to Restricting Layer _____

Maximum Depth of System

Size of Tank 1000

Size of Lift Station _____

3'

Size of Drainfield 375 Sq Ft

Length of System _____

Size of Gravelless Pipe

Size of Mound Rock Bed

Depth of Clean Sand

10"

Depth of Rock _____

Size of Lift Pump _____

Length of Lift Line _____

Number of Trenches 2

Size of Lift Line _____

Additional Information:

- PERCOLATION TEST SHEET -

Test hole location _____ Hole # _____ 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	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC A	1/16 = .06
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC B	1/8 = .13
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC C	3/16 = .19
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC D	1/4 = .25
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC E	5/16 = .31
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC F	3/8 = .38
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC G	7/16 = .44
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC H	1/2 = .5
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC E	9/16 = .56
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC F	5/8 = .63
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC G	11/16 = .69
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC G	3/4 = .75
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC H	13/16 = .81
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC H	7/8 = .88
---	REFILL	---	---	---	TIME $\frac{\text{DROP}}{\text{PERC}}$ PERC H	15/16 = .94

Ten Percent Calculation *

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

* 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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E, F, G	Largest # of EFG _____ Smallest # of EFG $\times 0.10 =$ _____
B, C, D	Largest # of BCD _____ Smallest # of BCD $\times 0.10 =$ _____
D, E, F	Largest # of DEF _____ Smallest # of DEF $\times 0.10 =$ _____
F, G, H	Largest # of FGH _____ Smallest # of FGH $\times 0.10 =$ _____

* 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.

Septic System Design/Site Evaluation

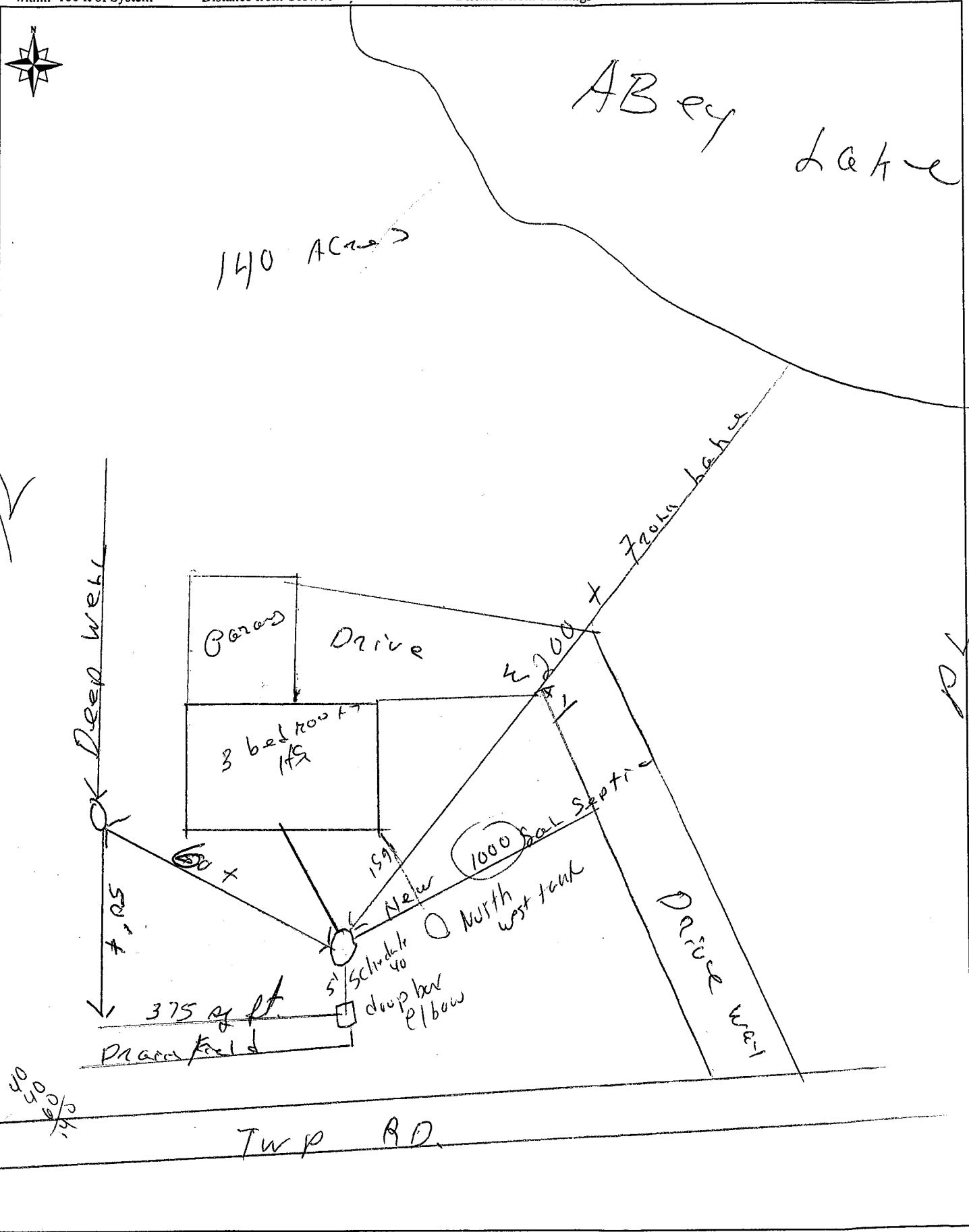
The site plan must be drawn to dimension or to scale:

*Dimensions of Lot
*Well & Water Line Locations
within 100 ft of System

*Existing & Proposed Buildings
*Distance from Property Lines
*Distance from OHWM

*Easements & setbacks
*Tank Access Route
*Distance from buildings

*Location of any Unsuitable Soil
*Soil Borings & Per Test Locations
*Scale - One inch = _____ ft





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

Application Number 12395
Tax Parcel Number 190287.000
Fire Number of Project Location

A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.) Rosentrator, Rodney & Randy		2. Authorized Agent (if applicable)	
3. Mailing Address (Street, RFD, Box Number, City, State, Zip Code) Rt 1 Box 379 Vergas MN 56587			
4. Day Phone	5. Evening Phone	6. Section 14	7. Township Lake View

B. PROPERTY DESCRIPTION

1. Lot(s), Block, Subdivision Name
lots 5+6 & NW 1/4 of SW 1/4 & lot 7

SEWAGE SYSTEM DATA

Anticipated Use

a. Single Family

b. Multiple Family

c. Commercial

d. Other (specify)

Type of Installation

a. Septic Tank Only

b. Drainfield Only

c. Septic Tank & Drainfield

d. Holding Tank

e. Septic Tank/Drainfield Lift Station

Type of Drainfield

a. Standard System

b. Mound (pressure distribution)

Well Data

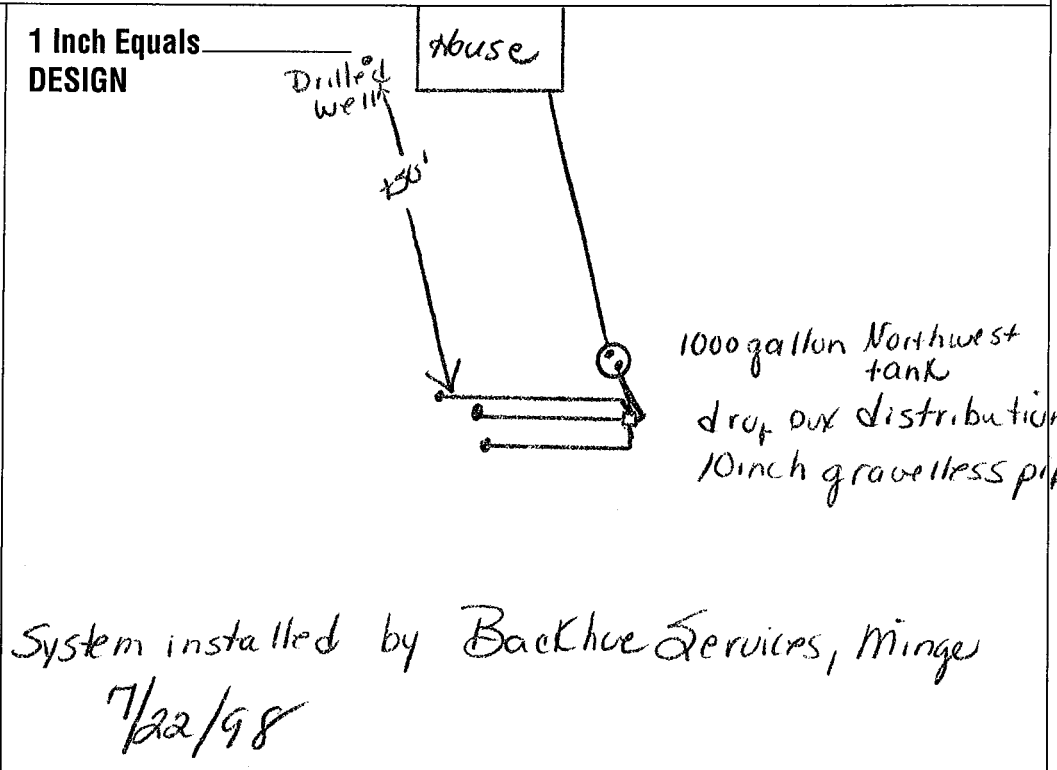
a. Depth 150'

b. Diameter _____

Type of Well

a. Drilled

b. Sand Point



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

	Tank	Drainfield		Tank	Drainfield
Distances to Well:	= <u>160ft</u>	= <u>150ft</u>	Distance to Pressure Line:	= <u>150ft</u>	= <u>150ft</u>
Distance to Building:	= <u>160ft</u>	= <u>165ft</u>	Tank Capacity (gal. & Area of Drainfield (ft ²))	= <u>1000</u>	= <u>390</u>
Distance to Property Line:	= <u>120ft</u>	= <u>120ft</u>	Distance to Ordinary High Water Level:	= <u>1200ft</u>	= <u>1200ft</u>
Drainfield separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:			=	= <u>13ft</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)

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

Hebi Moltzen
Signature

Field Inspector 7/28/98
Title Date