



191537000



Minnesota Pollution Control Agency

520 Lafayette Road North  
St. Paul, MN 55155-4194

# Compliance Inspection Form

## Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.

Submit completed form to Local Unit of Government (LUG) and system owner within 15 days

For local tracking purposes:

### System Status

System status on date (mm/dd/yyyy): 9/26/2018

**Compliant – Certificate of Compliance**

(Valid for 3 years from report date, unless shorter time frame outlined in Local Ordinance.)

**Noncompliant – Notice of Noncompliance**

(See Upgrade Requirements on page 3.)

#### Reason(s) for noncompliance (check all applicable)

- Impact on Public Health (Compliance Component #1) – Imminent threat to public health and safety
- Other Compliance Conditions (Compliance Component #3) – Imminent threat to public health and safety
- Tank Integrity (Compliance Component #2) – Failing to protect groundwater
- Other Compliance Conditions (Compliance Component #3) – Failing to protect groundwater
- Soil Separation (Compliance Component #4) – Failing to protect groundwater
- Operating permit/monitoring plan requirements (Compliance Component #5) – Noncompliant

### Property Information

Parcel ID# or Sec/Twp/Range: 191537000

Property address: 14259 W Lake Sallie Dr Reason for inspection: sale

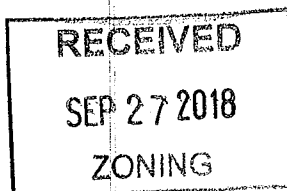
Property owner: Davis Heyer Owner's phone: 841-6123

or  
Owner's representative: \_\_\_\_\_ Representative phone: \_\_\_\_\_

Local regulatory authority: Becker County Regulatory authority phone: 846-7341

Brief system description: trenches

Comments or recommendations:



### Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

Inspector name: Randy Anderson Certification number: 3044

Business name: Anderson On-Site License number: 634

Inspector signature: [Signature] Phone number: 849-3072

### Necessary or Locally Required Attachments

- Soil boring logs
- System/As-built drawing
- Forms per local ordinance
- Other information (list): \_\_\_\_\_

**1. Impact on Public Health – Compliance component #1 of 5**

**Compliance criteria:**

System discharges sewage to the ground surface.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Any "yes" answer above indicates the system is an imminent threat to public health and safety.**

Comments/Explanation:

**Verification method(s):**

- Searched for surface outlet
- Searched for seeping in yard/backup in home
- Excessive ponding in soil system/D-boxes
- Homeowner testimony (See Comments/Explanation)
- "Black soil" above soil dispersal system
- System requires "emergency" pumping
- Performed dye test
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

**2. Tank Integrity – Compliance component #2 of 5**

**Compliance criteria:**

System consists of a seepage pit, cesspool, drywell, or leaching pit. <i>Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth. If yes, which sewage tank(s) leaks:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Any "yes" answer above indicates the system is failing to protect groundwater.**

Comments/Explanation:

**Verification method(s):**

- Probed tank(s) bottom
- Examined construction records
- Examined Tank Integrity Form (Attach)
- Observed liquid level below operating depth
- Examined empty (pumped) tanks(s)
- Probed outside tank(s) for "black soil"
- Unable to verify (See Comments/Explanation)
- Other methods not listed (See Comments/Explanation)

**3. Other Compliance Conditions – Compliance component #3 of 5**

- a. Maintenance hole covers are damaged, cracked, unsecured, or appear to be structurally unsound.  Yes\*  No  Unknown
- b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety.  Yes\*  No  Unknown  
**\*System is an imminent threat to public health and safety.**

Explain:

- c. System is non-protective of ground water for other conditions as determined by inspector.  Yes\*  No  
**\*System is failing to protect groundwater.**

Explain:

**4. Soil Separation – Compliance component #4 of 5**

Date of installation: 7/6/1990  Unknown  
(mm/dd/yyyy)

Shoreland/Wellhead protection/Food beverage lodging?  Yes  No

**Compliance criteria:**

For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:  
Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.  Yes  No

Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:  
Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.\*  Yes  No

"Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080.2350 or 7080.2400 (Advanced Inspector License required)  
Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.  Yes  No

**Any "no" answer above indicates the system is failing to protect groundwater.**

**Verification method(s):**

Soil observation does not expire. Previous soil observations by two independent parties are sufficient, unless site conditions have been altered or local requirements differ.

- Conducted soil observation(s) (Attach boring logs)
- Two previous verifications (Attach boring logs)
- Not applicable (Holding tank(s), no drainfield)
- Unable to verify (See Comments/Explanation)
- Other (See Comments/Explanation)

**Comments/Explanation:**

soils: 0-11 sandy loam 10yr2/2  
11-48 sand 10yr4/4  
48-72 sand 10yr5/4

**Indicate depths or elevations**

A. Bottom of distribution media	36
B. Periodically saturated soil/bedrock	72
C. System separation	36
D. Required compliance separation*	36

\*May be reduced up to 15 percent if allowed by Local Ordinance.

**5. Operating Permit and Nitrogen BMP\* – Compliance component #5 of 5**  Not applicable

Is the system operated under an Operating Permit?  Yes  No If "yes", A below is required  
Is the system required to employ a Nitrogen BMP?  Yes  No If "yes", B below is required

BMP = Best Management Practice(s) specified in the system design

**If the answer to both questions is "no", this section does not need to be completed.**

**Compliance criteria**

- a. Operating Permit number: \_\_\_\_\_  Yes  No  
Have the Operating Permit requirements been met?
- b. Is the required nitrogen BMP in place and properly functioning?  Yes  No

**Any "no" answer indicates Noncompliance.**

**Upgrade Requirements** (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

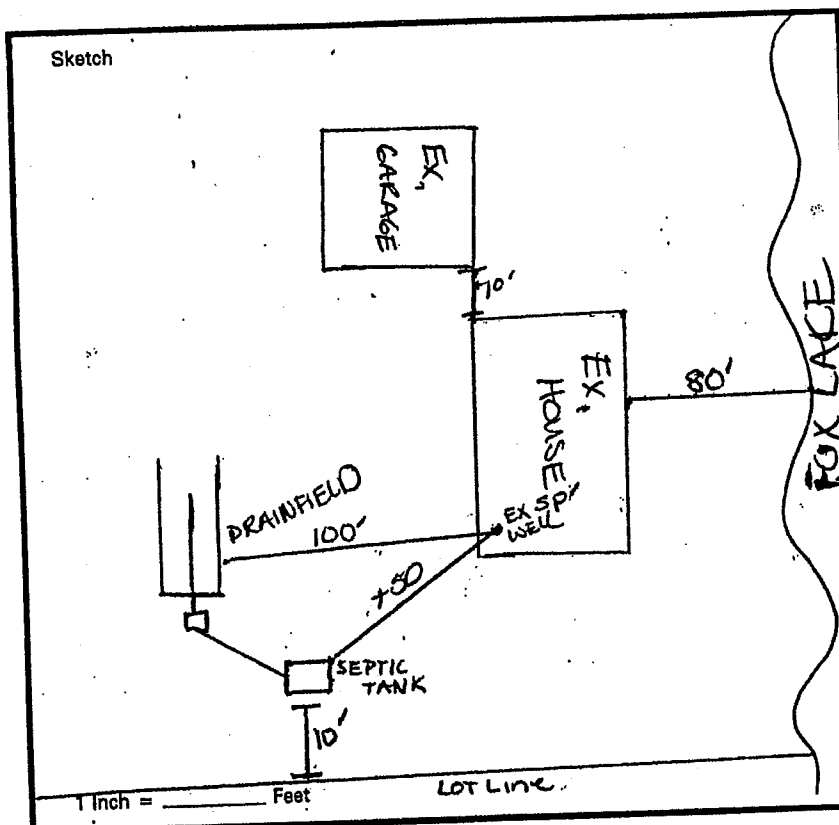
# BUILDING AND SEWAGE SYSTEM PERMIT

BECKER COUNTY ZONING AND PLANNING  
829 LAKE AVENUE, BOX 787, PHONE 847-4427, DETROIT LAKES, MN 56502

Parcel No. 19.1537.000 Lake Name Fox Lake Permit No. 12-18,89  
Fire No. \_\_\_\_\_ Township Lakeview Section 7 Description Oak Grove Plot 21+22  
Lot Size \_\_\_\_\_

Issued to: Name Dave Hoyer Tel. No. \_\_\_\_\_  
Address RR 1 Box 461 DL  
Work Authorized Sewage disposal system

Type of Improvement: ( ) New Home ( ) Alteration ( ) Garage ( ) Mobile Home Yr. \_\_\_\_\_  
( ) Cottage  Septic System ( ) Other Building ( ) Multiple Dwelling \_\_\_\_\_ Units.  
Size \_\_\_\_\_ Stories \_\_\_\_\_ Basement \_\_\_\_\_ No. of Bedrooms 2 Bathrooms 1  
Contractor: Name & Address Stanger Tel. No. \_\_\_\_\_  
Estimated Cost \$1000 Permit Fee \$30.00 State Fee 50 Receipt No. 3541



HORIZONTAL DISTANCE IN FEET FROM NEW CONSTRUCTION TO:  
High Water Mark of Lake 80'  
Side Lot Lines 10' and 50' rear yard  
Center Line of Public Road 180' C.L.  
Right of way State or Co. \_\_\_\_\_  
APPROVED: Board of Adjustment Date: \_\_\_\_\_  
Planning Commission Date: \_\_\_\_\_  
County Commissioners Date: \_\_\_\_\_  
Zoning Administrator Date: \_\_\_\_\_

SEWAGE DISPOSAL SYSTEM DATA

Installed in 19	Septic Tank	Drain Fi
<u>90</u>	<u>1000 Gls.</u>	<u>375 Sq.</u>
Capacity	<u>50 Ft.</u>	<u>50</u>
Distance from nearest well	<u>75 Ft.</u>	<u>75</u>
Distance from lake or stream	<u>10 Ft.</u>	<u>20</u>
Distance from occupied building	<u>10 Ft.</u>	<u>10</u>
Distance from property line	Ft.	<u>+4</u>
Distance from bottom to Water Table	Lift Pump ( ) Yes <input checked="" type="checkbox"/> No Well Depth <u>26'</u> type <u>S</u>	

AGREEMENT: I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS CORRECT AND AGREE TO DO THE PROPOSED WORK IN ACCORDANCE WITH THE DESCRIPTION ABOVE AND ACCORDING TO THE PROVISIONS OF THE ORDINANCE OF BECKER COUNTY. I AGREE TO POST THIS PERMIT ON THE PREMISES ON WHICH THE WORK IS TO BE DONE, AND MAINTAINED THERE UNTIL COMPLETION OF THE WORK. I AGREE THAT ANY VIOLATION OF THIS PERMIT OR THE BECKER COUNTY ZONING IS A MISDEMEANOR AND UPON CONVICTION THEREOF, SHALL BE PUNISHED BY A FINE NOT TO EXCEED \$700.00 FOR EACH VIOLATION. NOTIFY THE BECKER COUNTY ZONING ADMINISTRATOR (847-4427) 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.

Received By [Signature] Signature of Owner Date 7-6-90  
Approved By [Signature] Becker County Zoning Administrator  
BECKER COUNTY  
DETROIT LAKES, MN 56501

CERTIFICATE OF COMPLIANCE  
SEWAGE SYSTEM

This certificate has been issued this 18 day of July 90 1990 90

to certify compliance with regulations of Zoning Ordinance, Becker County, Minnesota.

The premises covered by this certificate are legally described as: Oak Grove Lots 21 and 22

Lake No. 358 Sec. 6 Twp. 138 Range 41 Twp. Name Lakeview

Capacity	Septic Tank	Seepage Bed
Distance From Nearest Well	1250 Gls	675 Sf
Distance From Lake Or Stream	70 F	100 F
Distance From Occupied Building	140 F	160 F
Distance From Property Line	60 F	90 F
Distance From Bottom Water Table	12 F	20 F

Owner: Name Dave Heyer

Address R.R. 1, Box 461, Detroit Lakes, Mn.

Zip No. 56501

Permit No. SP 18,1897 Signed by: Floyd Auenby mf.

All horizontal distances meet the

Becker County Zoning Ordinance. With

proper maintenance this system can be

expected to function satisfactorily,

however this is not a guarantee.

Zoning Administrator

Becker County, Minnesota

# BUILDING AND SEWAGE SYSTEM PERMIT

BECKER COUNTY ZONING AND PLANNING

829 LAKE AVENUE, BOX 787, PHONE 847-4427, DETROIT LAKES, MN 56502

Parcel No. 19.1537.000 Lake Name Fox Lake Permit No. 12-18,897-  
 Fire No. \_\_\_\_\_ Township Lakeview Section 7 Description Oak Grove Plot 21+22  
 Lot Size \_\_\_\_\_

Issued to: Name Dave Heyer Tel. No. \_\_\_\_\_  
 Address RR 1 Box 461 DL  
 Work Authorized Sewage disposal system

Type of Improvement: ( ) New Home ( ) Alteration ( ) Garage ( ) Mobile Home Yr. \_\_\_\_\_  
 ( ) Cottage  Septic System ( ) Other Building ( ) Multiple Dwelling \_\_\_\_\_ Units.  
 Size \_\_\_\_\_ Stories \_\_\_\_\_ Basement \_\_\_\_\_ No. of Bedrooms 2 Bathrooms 1  
 Contractor: Name & Address Stenger Tel. No. \_\_\_\_\_  
 Estimated Cost \$1000 Permit Fee \$30.00 State Fee 50 Receipt No. 3541

Sketch

1 Inch = \_\_\_\_\_ Feet

**HORIZONTAL DISTANCE IN FEET FROM NEW CONSTRUCTION TO:**

High Water Mark of Lake 80'  
 Side Lot Lines 10' and 50' rear yard  
 Center Line of Public Road 180' C.L.  
 Right of way State or Co. \_\_\_\_\_

APPROVED: Board of Adjustment Date: \_\_\_\_\_  
 Planning Commission Date: \_\_\_\_\_  
 County Commissioners Date: \_\_\_\_\_  
 Zoning Administrator Date: \_\_\_\_\_

**SEWAGE DISPOSAL SYSTEM DATA**

Installed in 19	Septic Tank	Drain Field
<u>90</u>	Capacity <u>1000</u> Gls.	<u>375</u> Sq. Ft.
	Distance from nearest well <u>50</u> Ft.	<u>50</u> Ft.
	Distance from lake or stream <u>75</u> Ft.	<u>75</u> Ft.
	Distance from occupied building <u>10</u> Ft.	<u>20</u> Ft.
	Distance from property line <u>10</u> Ft.	<u>10</u> Ft.
	Distance from bottom to Water Table _____ Ft.	<u>+4</u> Ft.
	Lift Pump ( ) Yes <input checked="" type="checkbox"/> No	Well Depth <u>26'</u> type <u>SP</u>

AGREEMENT: I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS CORRECT AND AGREE TO DO THE PROPOSED WORK IN ACCORDANCE WITH THE DESCRIPTION ABOVE AND ACCORDING TO THE PROVISIONS OF THE ORDINANCE OF BECKER COUNTY. I AGREE TO POST THIS PERMIT ON THE PREMISES ON WHICH THE WORK IS TO BE DONE, AND MAINTAINED THERE UNTIL COMPLETION OF THE WORK. I AGREE THAT ANY VIOLATION OF THIS PERMIT OR THE BECKER COUNTY ZONING IS A MISDEMEANOR AND UPON CONVICTION THEREOF SHALL BE PUNISHED BY A FINE NOT TO EXCEED \$700.00 FOR EACH VIOLATION. NOTIFY THE BECKER COUNTY ZONING ADMINISTRATOR (847-4427) 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.

Received By [Signature] Date 7-6-90  
 Approved By [Signature] Becker County Zoning Administrator  
 BECKER COUNTY  
 DETROIT LAKES, MN 56501

CERTIFICATE OF COMPLIANCE  
SEWAGE SYSTEM

This certificate has been issued this 18 day of July 90 1900 90.

to certify compliance with regulations of Zoning Ordinance, Becker County, Minnesota.

The premises covered by this certificate are legally described as: Oak Grove Lots 21 and 22

Lake No. <u>358</u>	Sec. <u>6</u>	Twp. <u>138</u>	Range <u>41</u>	Twp. Name <u>Lakeview</u>
Capacity			Septic Tank	Seepage Bed
Distance From Nearest Well			1250 Gls	675 Sf
Distance From Lake Or Stream			70 F	100 F
Distance From Occupied Building			140 F	160 F
Distance From Property Line			60 F	90 F
Distance From Bottom Water Table			12 F	20 F
				12 F

Owner: Name Dave Heyer

Address R.R. 1, Box 461, Detroit Lakes, Mn.

Zip No. 56501

Permit No. SP 18,1897-

All horizontal distances meet the  
Becker County Zoning Ordinance. With  
proper maintenance this system can be  
expected to function satisfactorily,  
however this is not a guarantee.

Signed by: Floyd Avenby, Inf.

Zoning Administrator  
Becker County, Minnesota





SEWER INSPECTION  
INSPECTION REPORT FIRE NUMBER

*Permit # 18,897*

LEGAL #1511  
DESCRIPTION OAK GROVE LOTS 21 & 22  
AND  
LOCATION 358 FOX LAKE RD 7 138 41 LAKE VIEW  
Lake No. Lake Name Lake Classif. Sec. TWP Range TWP Name

**IDENTIFICATION: Please Print All Information**

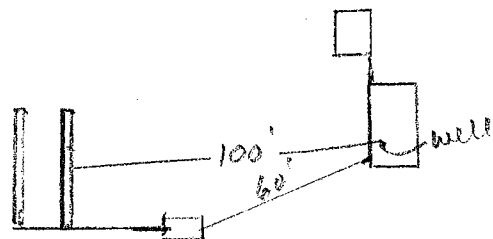
Owner	Last Name	First	Initial	Mailing Address - No. Street, City, and State	Zip No.	Tel. No.
	HEYER, DAVE			RR 1 BOX 461 DETROIT LAKES, MN 56501		
Contractor	Name					

	ACTUAL IS ↓	MINIMUM Shall Be ↓	Sq. Ft.
Building Set Back From High Water Mark			
Building Set Back From Highway			
Side Yard	_____ & _____ Ft.	_____ & _____ Ft.	
Rear Yard			
Elevation above High Water Mark at Building Setback Line			

**SEWAGE DISPOSAL SYSTEM STATISTICS**

CATEGORY	SEPTIC TANK		SEEPAGE BED		DRAIN FIELD	
	Actual	Minimum	Actual	Minimum	Actual	Minimum
Capacity	1250 Gl.	1000 Gl.			3x75 SF	
Distance from Nearest Well	70 F	100 F			100 F	
Distance from Lake or Stream	140 F	100 F			160 F	
Distance from Occupied Building	60 F	10 F			90 F	20 F
Distance from Property Line	12 F	10 F			20 F	10 F
Distance from Bottom to Water Table	-- F	-- F			12 F	4 F

Inspector's Comments: N.



*x 675 sq. ft. Installed by Stinger*

INTERPRETATION OF ABBREVIATIONS

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

*Installed New system including line from house.*

*[Signature]*  
Inspector's Signature & Title

Inspection Dated 7-12-1990

**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	Actual	Should be
Capacity	750 Gls.	750 Gls.	750 gal	750 gal			SF	SF
Distance from Nearest Well	50 F	50 F	75 F	75 F			F	50 F
Distance from Lake or Stream	120 F	50 F	120 F	75 F			F	F
Distance from Occupied Building	30 F	10 F	40 F	20 F			F	20 F
Distance from Property Line	20 F	10 F	20 F	10 F			F	10 F
Distance from Bottom to Water Table	-- F	-- F	124' F	4 F			F	4 F

Inspector's Comments: \_\_\_\_\_

**INTERPRETATION OF ABBREVIATIONS**  
 Gls — Gallons  
 SF — Square Feet  
 F — Linear Feet

*Mark Kuehne*  
 Inspector's Signature

*Billy Inspector*  
 Title

Inspection Dated 6-26 19 74 Becky County  
 Agency

BECKER COUNTY ZONING ADMINISTRATION

Permit No. 1-15-73

COUNTY COURT HOUSE — Phone 218-847-7721 — Detroit Lakes, Minn. 56501

Date 8-17-73

APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

LEGAL DESCRIPTION AND LOCATION: Lot 21 + 22 Oak Grove  
 358 Fox RD 7 LAKE VIEW  
 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.
	KINDSON,	SEOR,	R.	916 N 10th St Fargo, N. DAK 58102		
Contractor	Name					

TYPE OF IMPROVEMENT:  New Building  Alteration  Other \_\_\_\_\_

RESIDENTIAL PROPOSED USE:  One Family Dwelling  Multiple Dwelling \_\_\_\_\_ Units

NON-RESIDENTIAL PROPOSED USE: Specify: \_\_\_\_\_ Size: \_\_\_\_\_

ESTIMATED COST OF IMPROVEMENT \$ 5000 Construction Starting Date: \_\_\_\_\_

PRINCIPAL TYPE OF FRAME:  Wood Frame  Masonry  Structural Steel  Other — Specify \_\_\_\_\_

TYPE OF SEWAGE DISPOSAL:  Individual Septic Tank, etc.  Public

WATER SUPPLY:  Individual Well  Public

MECHANICAL EQUIPMENT: Elevator:  Yes  No Air Conditioning:  Yes  No  Central  Unit

DIMENSIONS: Basement:  Yes  No Stories above basement: 1 1/2 Sq. feet (outside dimension) 26 x 30 Bedrooms 2 Baths 1

HEATING:  Electric  Gas  Oil  Coal  None Other: \_\_\_\_\_

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity 1250 gal	1288 gal	750 gal	200 Sq. Ft.
Distance from nearest well 25 ft	50 ft	25 ft	50 ft
Distance from lake or stream 87 ft	120 ft	120 ft	25 ft
Distance from occupied building 0 ft	40 ft	40 ft	20 ft
Distance from property line 0 ft	20 ft	20 ft	10 ft
Distance from bottom to Water Table 0 ft	25 ft	25 ft	15 ft

All distances are shortest distance between nearest points

CHARACTERISTICS: Lot Area is 100 x 275 square feet. Water frontage is 100 feet.

Building set back from high water mark is 80 feet. (Building Line)

Land height above high water mark at building line is 35 feet

Building set back from State highway is \_\_\_\_\_ feet — from road or street is 180 feet.

Side yard is 10 feet and 50 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 8-17-73 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 8-17-73 \_\_\_\_\_  
 Permit Fee \$ 10.00 State Surcharge \$ \_\_\_\_\_  
 \_\_\_\_\_  
 Becker County Zoning Administrator

Comments: No drain in basement  
 see line with cabin to north.

**CERTIFICATE OF COMPLIANCE**  
**SEWAGE SYSTEM**

This certificate has been issued this 26th day of June 19 74.

to certify compliance with regulations of Zoning Ordinance, Becker County, Minnesota.

The premises covered by this certificate are legally described as:

Lake No. 358 Sec. 7 Twp. 138 Range 41 Twp. Name Lakeview

750 gallon Septic Tank, 750 gallon Storage Pit.

Owner: Name George R. Sandson

Address 916 North 10th Street, Fargo, North Dakota.

Zip No. 58102

Permit No. SP 12-1511-38

Signed by: [Signature]  
Zoning Administrator  
Becker County, Minnesota



# BECKER COUNTY

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

**Location:** Lake No. \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ Range \_\_\_\_\_ Twp. Name \_\_\_\_\_

Issued \_\_\_\_\_ 19\_\_\_\_, To \_\_\_\_\_  
Work Authorized \_\_\_\_\_

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. No part of system shall be covered until it has been inspected and approved. Notify Zoning Administrator, (847-7721) office when job is ready for inspection.

Becker County Zoning Administrator

BECKER COUNTY, MINNESOTA  
Board of County Commissioners



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

LEGAL DESCRIPTION AND LOCATION: Lot 21 + 22 OAK GROVE  
358 Fox RD 7 LAKE VIEW  
 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.
	KNUDSON	GEORGE		916 N 10th St FARGO, N. DAK	58102	
Contractor	Name					

TYPE OF IMPROVEMENT:  New Building ( ) Alteration Other \_\_\_\_\_

RESIDENTIAL PROPOSED USE:  One Family Dwelling ( ) Multiple Dwelling \_\_\_\_\_ Units

NON-RESIDENTIAL PROPOSED USE: Specify: \_\_\_\_\_ Size: \_\_\_\_\_

ESTIMATED COST OF IMPROVEMENT \$ 5000 Construction Starting Date: \_\_\_\_\_

PRINCIPAL TYPE OF FRAME: ( ) Masonry  Wood Frame ( ) Structural Steel ( ) Other - Specify \_\_\_\_\_

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

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) 26 x 38 Bedrooms 2 Baths 1

HEATING:  Electric ( ) Gas ( ) Oil ( ) Coal ( ) None Other: \_\_\_\_\_

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity	<u>1200</u> Gls.	Sq. Ft.	<u>100</u> Sq. Ft.
Distance from nearest well	<u>50</u> Ft.	Ft.	<u>50</u> Ft.
Distance from lake or stream	<u>75</u> Ft.	Ft.	<u>75</u> Ft.
Distance from occupied building	<u>10</u> Ft.	Ft.	<u>20</u> Ft.
Distance from property line	<u>45</u> Ft.	Ft.	<u>10</u> Ft.
Distance from bottom to Water Table	<u>25</u> Ft.	Ft.	<u>25</u> Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS: Lot Area is 100 x 275 square feet. Water frontage is 100 feet.

Building set back from high water mark is 80 feet. (Building Line)

Land height above high water mark at building line is 85 feet

Building set back from State highway is \_\_\_\_\_ feet - from road or street is 180 feet.

Side yard is 10 and 50 feet. Rear yard is \_\_\_\_\_ feet.

Building will be located 30 feet from septic tank (Sewage System Permit must be obtained before installation).

Building will be located 40 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 8-17-73 Signature of Owner James R. Knudson

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 8-17-73 Becker County Zoning Administrator Steph...

Permit Fee \$ 10.00 State Surcharge \$ 250

Comments: No floor drain in basement. In line with cabin to north.





Scale: Each grid equals \_\_\_\_\_ feet/inches.

**GRID PLOT PLAN SKETCHING FORM**

Application for Building Permit Dated \_\_\_\_\_ 19 \_\_\_\_\_

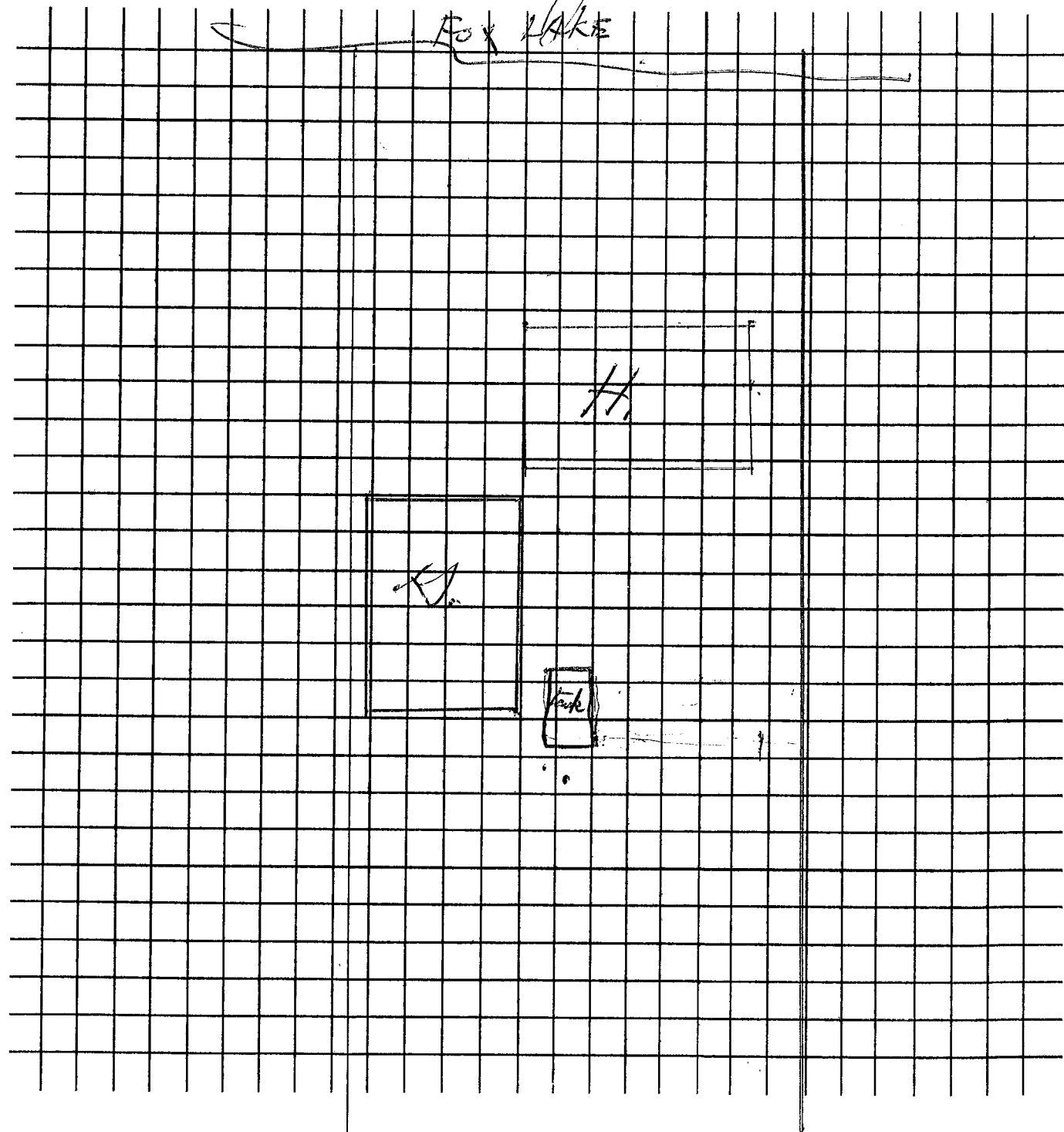
Application for Sewage System Permit Dated \_\_\_\_\_ 19 \_\_\_\_\_

Building Permit Number \_\_\_\_\_ Sewage System Permit Number \_\_\_\_\_

Applicant agrees that this plot plan is a part of application (s) indicated above.

Dated \_\_\_\_\_ 19 \_\_\_\_\_

*James R. Funder*  
Signature



- W — File
- Y — Owner
- B — Building Inspector

Road

