240201001

240201.000
5.6.1975

Scale: Each grid

GRID PLOT PLAN SKETCHING FORM

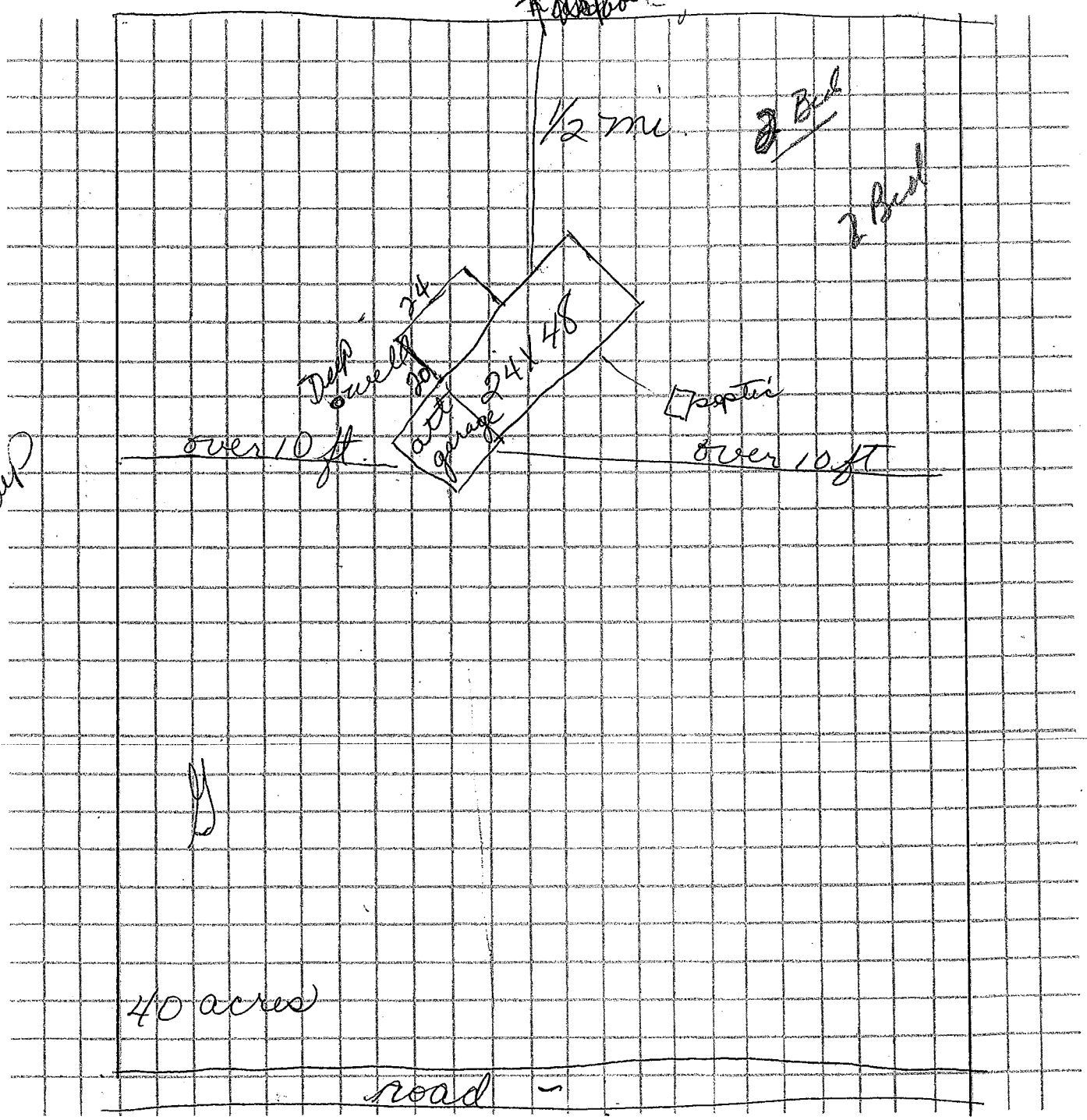
Application for Building Permit Dated_____19____

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 6-23 19 75 Mrs. Ed Nordquist
Signature



6448 Mary Sawtelle

W — File
Y — Owner
B — Building Inspector

COMPLIANCE INSPECTION

INSPECTION REPORT

FIRE NUMBER 04-0001-001 Septic 1991

LEGAL DESCRIPTION AND LOCATION	19,488
	PT W½ E½ SE¼ BEG 2 RDS E OF SW COR TH E 550' N 550'

Lake No.	Lake Name	Lake Classif.	Sec.	TWP	Range	TWP Name
	NA	NA	27	140	41	RICHWOOD

IDENTIFICATION: Please Print All Information

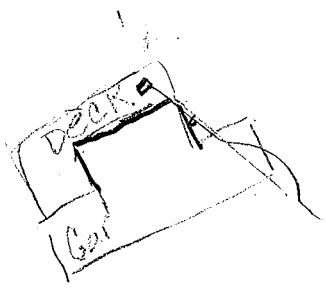
	Last Name First Initial	Mailing Address - No. Street, City, and State	Zip No.	Tel. No.
Owner	VIVIAN NORDGULEN	ROUTE 3 BOX 182A		
		DETROIT LAKES, MN %6501		
Contractor	Name CALL MARY SOUKUP 6448	WHEN DONE.		

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

SEWAGE DISPOSAL SYSTEM STATISTICS

CATEGORY	SEPTIC TANK Actual		SEPTIC TANK Minimum		SEEPAGE BED Actual		SEEPAGE BED Minimum		DRAIN FIELD Actual		DRAIN FIELD Minimum	
Capacity	1000	Gls.	?	Gls.	Front 180	SF	Drn added	SF	5F	SF	1985	SF
Distance from Nearest Well	+50	F		F	300 58	F		F		F		F
Distance from Lake or Stream	N/A	F		F	N/A	F		F		F		F
Distance from Occupied Building	EXISTING +10	F	10	F	20	F	20	F		F	20	F
Distance from Property Line	10	F	10	F	10	F	10	F		F	10	F
Distance from Bottom to Water Table	--	F	--	F	+4	F	4	F		F	4	F

Inspector's Comments:



3.7 deep
04" Summer

40 Ac

TWP # 32

6.9 ACS 550'/550'

INTERPRETATION OF ABBREVIATIONS

3 Bed home - 12 yrs

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

Margaret M. Forte
Inspector's Signature & Title

Inspection Dated April 9, 19 91

Site 1990

Scale: Each grid equals _____ feet/inches.

GRID PLOT PLAN SKETCHING FORM

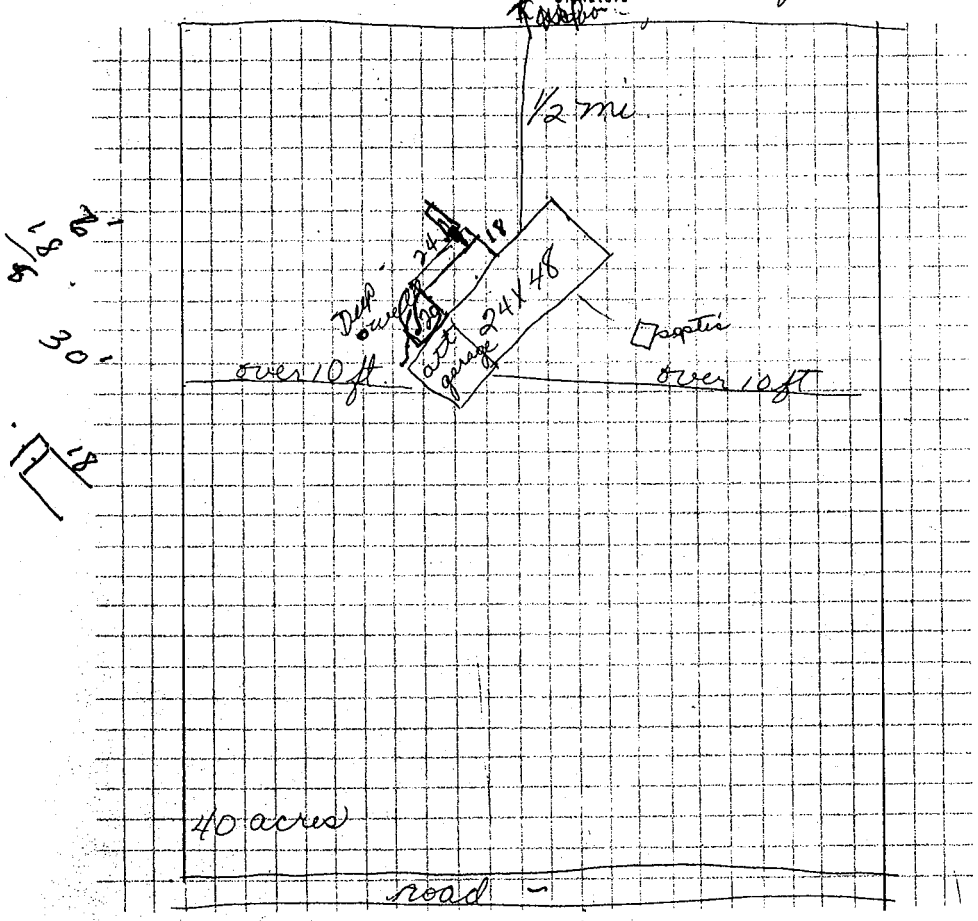
Application for Building Permit Dated _____ 19____

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 6-23 19 75 Mrs. Ed Nordquelen
Signature



W — File
Y — Owner
B — Building Inspector

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

BECKER COUNTY ZONING ADMINISTRATION

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

Permit No._____

Date_____

APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

LEGAL DESCRIPTION AND LOCATION							
	Lake No.	Lake Name	Lake Classif.	Sec.	TWP	Range	TWP Name

IDENTIFICATION: Please Print All Information

	Last Name First Initial	Mailing Address— No. Street, City and State	Zip No.	Tel. No.
Owner				
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 $ 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) .....

Bedrooms ..... Baths .....

HEATING:

( ) Electric ( ) Gas ( ) Oil

( ) Coal ( ) 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_____

_____
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 $_____ State Surcharge $_____

Comments:_____

24.0.201.000
Site 1975

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.		S F		S F	S F		S F
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: Check footings today 7-16-75 J

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

_____
Inspector's Signature

_____
Title

Inspection
Dated _____ 19

_____
Agency

Septic 1991

CERTIFICATE OF COMPLIANCE
SEWAGE DISPOSAL SYSTEM

This certificate has been issued this 12 *day of* April *19*91

to certify compliance on described premises and has been inspected by myself or my assigns on April 9, 1991 *and that the applicable codes, ordinances, and supporting data on file were correct.*

Parcel # 24.0201.001

Property description PT W½ E½ SE¼ BEG 2 RDS E OF SW COR TH E 550' N 550'

RICHWOOD TOWNSHIP

SECTION 27

Lake Name: NA

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

This certificate was issued to: *Name:* VIVIAN NORDGULEN

Address: ROUTE 3 BOX 182A

City, State, & Zip: DETROIT LAKES, MN 56501

PERMIT NO. 19,488 *Signed by* Floyd Lindy m

Zoning Administrator Becker County

Sep 1975

GRID PLOT PLAN SKETCHING FORM

Scale: Each grid equals _____ feet/inches.

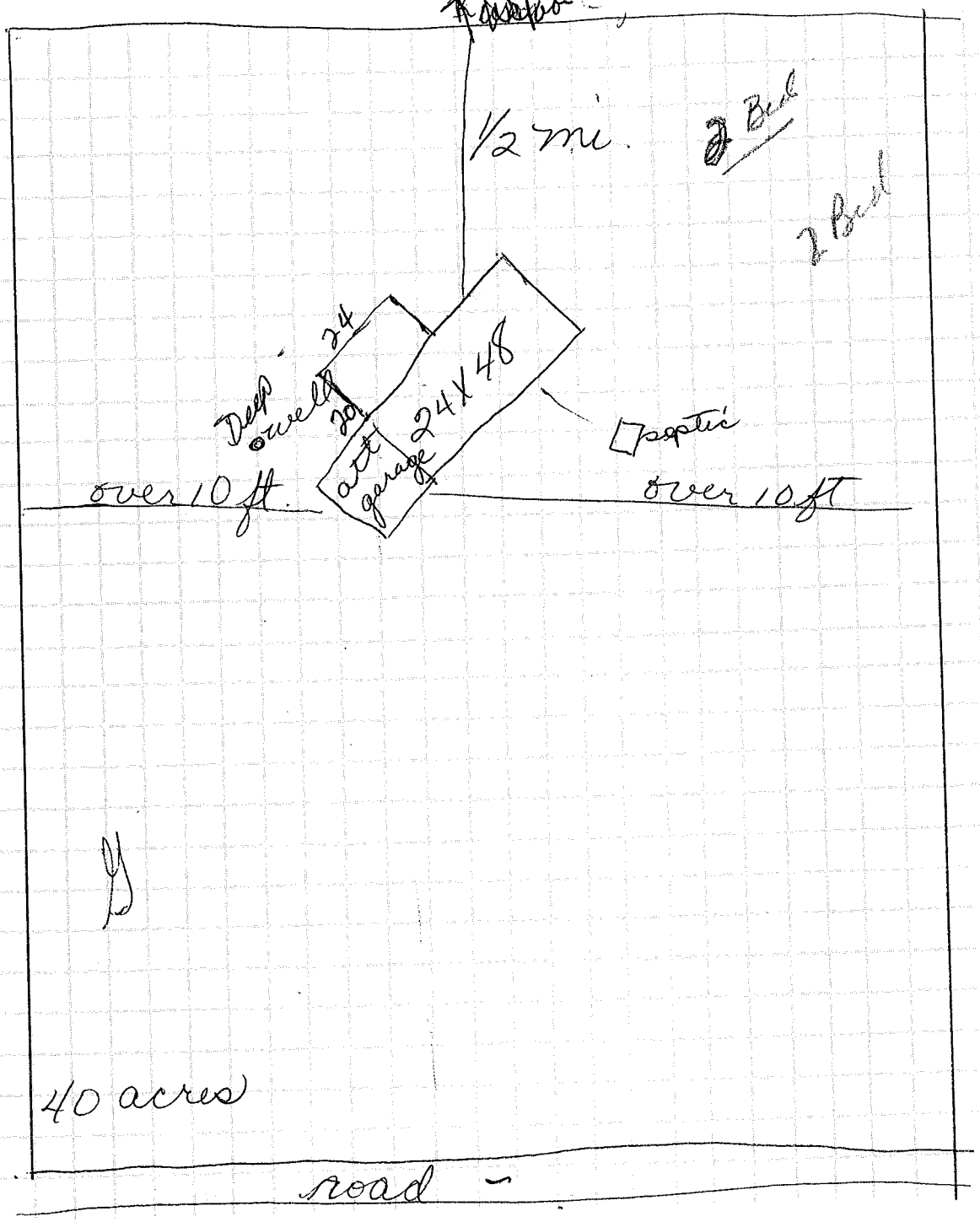
Application for Building Permit Dated _____ 19____

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 6-23 19 75 Mrs. Ed Nordquist
Signature



May Survey
6448

W — File
Y — Owner
B — Building Inspector

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

BECKER COUNTY ZONING ADMINISTRATION

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

Permit No. 1-2732-17
Date 6-23-75

APPLICATION FOR BUILDING OR SEWAGE PERMIT AND CERTIFICATE OF OCCUPANCY

24.0201.001
Site 1975

LEGAL DESCRIPTION AND LOCATION

E½ of SE ½ ex. 1 acre.
40 acres of this property

Lake No. ____ Lake Name ____ Lake Classif. ____ Sec. 27 TWP. 140 Range 41 TWP Name Richwood

#526

IDENTIFICATION: Please Print All Information

	Last Name First Initial	Mailing Address– No. Street, City and State	Zip No.	Tel. No.
Owner	Nordgulen, Edgar	Rt. 3, D. L.		
Contractor	Name			

TYPE OF IMPROVEMENT:
(X) New Building ( ) Alteration
Other ____

RESIDENTIAL PROPOSED USE:
(X) One Family Dwelling
( ) Multiple Dwelling ____ Units

NON–RESIDENTIAL PROPOSED USE:
Specify: ____
Size: ____

ESTIMATED COST OF IMPROVEMENT $ 24,000 Construction Starting Date:

PRINCIPAL TYPE OF FRAME:
( ) Masonry
(X) Wood Frame
( ) Structural Steel
( ) Other – Specify

Type of Roof:

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

WATER SUPPLY:
( ) Public
(X) Individual Well

MECHANICAL EQUIPMENT:
Elevator: ( ) Yes (X) No
Air Conditioning: ( ) Yes (X) No
( ) Central ( ) Unit

DIMENSIONS:
Basement: (X) Yes ( ) No
Stories above basement: 1
Sq. feet (outside dimension) 24X48
Bedrooms 3 Baths 1

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

SEWAGE DISPOSAL SYSTEM DATA:	SEPTIC TANK	SEEPAGE PIT	DRAIN FIELD
Capacity 12-2732-19	1000 Gls.	Sq. Ft.	180 Sq. Ft.
Distance from nearest well	50 Ft.	Ft.	70 Ft.
Distance from lake or stream	— Ft.	Ft.	— Ft.
Distance from occupied building	10 Ft.	Ft.	30 Ft.
Distance from property line	10 Ft.	Ft.	10 Ft.
Distance from bottom to Water Table	Ft.	Ft.	100 Ft.

All distances are shortest distance between nearest points

CHARACTERISTICS:

Lot Area is 40 acr. 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 twp. 780
Building set back from State highway is ____ feet – from road or street is ____ feet.
Side yard is over 10 and over 10 feet. Rear yard is ½ mile
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 6-23-75

Mrs. Ed Nordgulen
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 6-23-75

Floyd Lunby
Becker County Zoning Administrator

Permit Fee $ 12.00 State Surcharge $ 12.00

Comments: ____