



Septic System Application

Becker County Planning & Zoning
915 Lake Ave, Detroit Lakes, MN 56501
Phone (218)-846-7314; Fax (218)-846-7266

PARCEL	280289000
APP	SEPTIC
YEAR	2015
SCANNED	
LAKE	SHELL

1. PROPERTY DATA (as it appears on the tax statement, purchase agreement or deed)

Parcel Number(s) of property where the system will be installed: 280289000

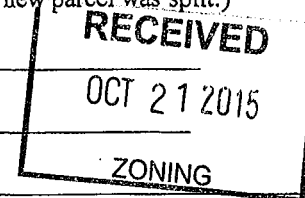
Is this a split of an existing property? Yes ☒ No

(If yes and a parcel number has not yet been assigned, indicate the main parcel number from which the new parcel was split.)

Section 14 Township 140 Range 38 Township Name SHELL LAKE

Lake Name SHELL Lake Classification RD

Legal Description: Lot 9, Block 001, MAPLE SHORES



Project Address: 45340 MAPLE SHORES LANE, OSAGE, MN.

2. PROPERTY OWNER INFORMATION (as it appears on the tax statement, purchase agreement or deed)

Owner's First Name BRADLEY J. + SUSAN M. Owner's Last Name NEUBAUER

Mailing Address 11555 WASHINGTON ST NE City, State, Zip BLAINE, MN. 55434

Phone Number _____

3. DESIGNER/INSTALLER INFORMATION

Designer Name BON GIRTZ Company Name J. DENNIS + R. GIRTZ EXC. License # 826

Address 26565 CR125 Phone Number 218-255-1660

PARK RAPIDS, MN 56470

Installer Name "SAME" Company Name _____ License # _____

Address _____ Phone Number _____

4. SYSTEM DESIGN INFORMATION

System Status

What will new system serve? Check one

- ☒ Vacant Lot-No existing system-new structure
☐ Replacement - structure removed and being rebuilt
☐ Failing -Replacement- cesspool/seepage pit or other
☐ Enlargement of system-Undersized
☐ Repairs Needed to existing
☐ Additional system on property

- ☒ Dwelling
☐ Resort/Commercial
☐ Commercial (Non-resort)
☐ Other - explain below _____

10-15-2015 Date of site evaluation

Design Flow 150 Gallons Per Day

Number of Bedrooms 3

Garbage Disposal _____ Yes ☒ No

Dishwasher ☒ Yes _____ No

Lift station in House _____ Yes ☒ No

Grinder pump in House _____ Yes ☒ No

Well Depth Proposed DEEP

Depth of other wells within

100 ft of system DEEP

Original Soil ☒ Compacted Soil _____

Type of Soil Observation

☒ Pit _____ Probe _____ Boring

Depth to Restricting Layer 88"

Maximum Depth of System 48"

Size of All Tanks to be installed

1500 gal Single Compartment Septic Tank

gal Compartmented Tank

Pit Privy

gal Separate Lift Station

gal Holding Tank

Existing Tank to be used

Existing tank w/new Additional Tank

Existing tank w/new Lift Station

Holding Tank with Privy

Total Number of tanks to be installed in this system 1 (This # will be reported to MPCA at end of year.)

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Type of Drainfield Full Size of Drainfield Reduced/Warrantied size

☐ Chamber Trench _____ sq ft
☒ Rock Trench 572 sq ft
☐ Gravelless _____ sq ft
☐ Mound _____ sq ft ***
☐ Pressure Bed _____ sq ft ***
☐ Seepage Bed _____ sq ft ***
☐ At-grade _____ sq ft ***
☐ Alternative / _____ sq ft ***
 Performance

***Attach Worksheets

Type of chamber _____
 Depth of Rock _____

Alarm? Yes _____ No ☒
 Type of Alarm N/A
 Size of Lift Pump A
 Size of Lift Line _____

PROPOSED SETBACKS

	TANK	DRAINFIELD
Distance to Well	<u>+50</u>	<u>+50</u>
Distance to Building	<u>+10</u>	<u>+20</u>
Distance to Property Line	<u>+10</u>	<u>+10</u>
Distance to OHW of Lake	<u>+100</u>	<u>+100</u>
Distance to Pressure Line	<u>+10</u>	<u>+10</u>
Distance to Wetland/Protected Water	<u>+75</u>	<u>+75</u>

Perc Rate 6-15 MPI Soil Sizing Factor 1.27 *If SSF other than .83, attach Perc Test Data

Soil Borings (three are required) SB #1

Depth	Texture	Color	Structure	Depth	Texture	Color	Structure
0-10	Topsoil	10YR 3/2		0-11"	Topsoil	10YR 3/2	
10"-38"	loamy sand	10YR 5/4		11"-36"	loamy sand	10YR 5/4	
38"-78"	sandy loam	10YR 6/4		36"-75"	sandy loam	10YR 6/4	
78"-88"	sandy clay	2.5Y 6/4		75"-82"	sandy clay	2.5Y 6/4	

ALTERNATE SITE

Depth	Texture	Color	Structure	Depth	Texture	Color	Structure
0-8"	Topsoil	10YR 3/2					
8"-35"	sandy loam	10YR 5/4					
35"-72"	loamy sand	10YR 6/4					
72"-82"	sandy clay	2.5Y 6/4					

5. REQUIRED DOCUMENTS

U of MN worksheets are required for mounds, pressure beds, seepage beds, at-grades or Type IV or Type V systems. Are the required worksheets attached? _____ Yes _____ No

6. DESIGNER'S CERTIFIED STATEMENT

I, Ron Gritz certify that I have completed the preceding design work in accordance with all applicable requirements (including, but not limited to Minnesota Chapter 7080 and the Becker County Individual Sewage Treatment System Ordinance).

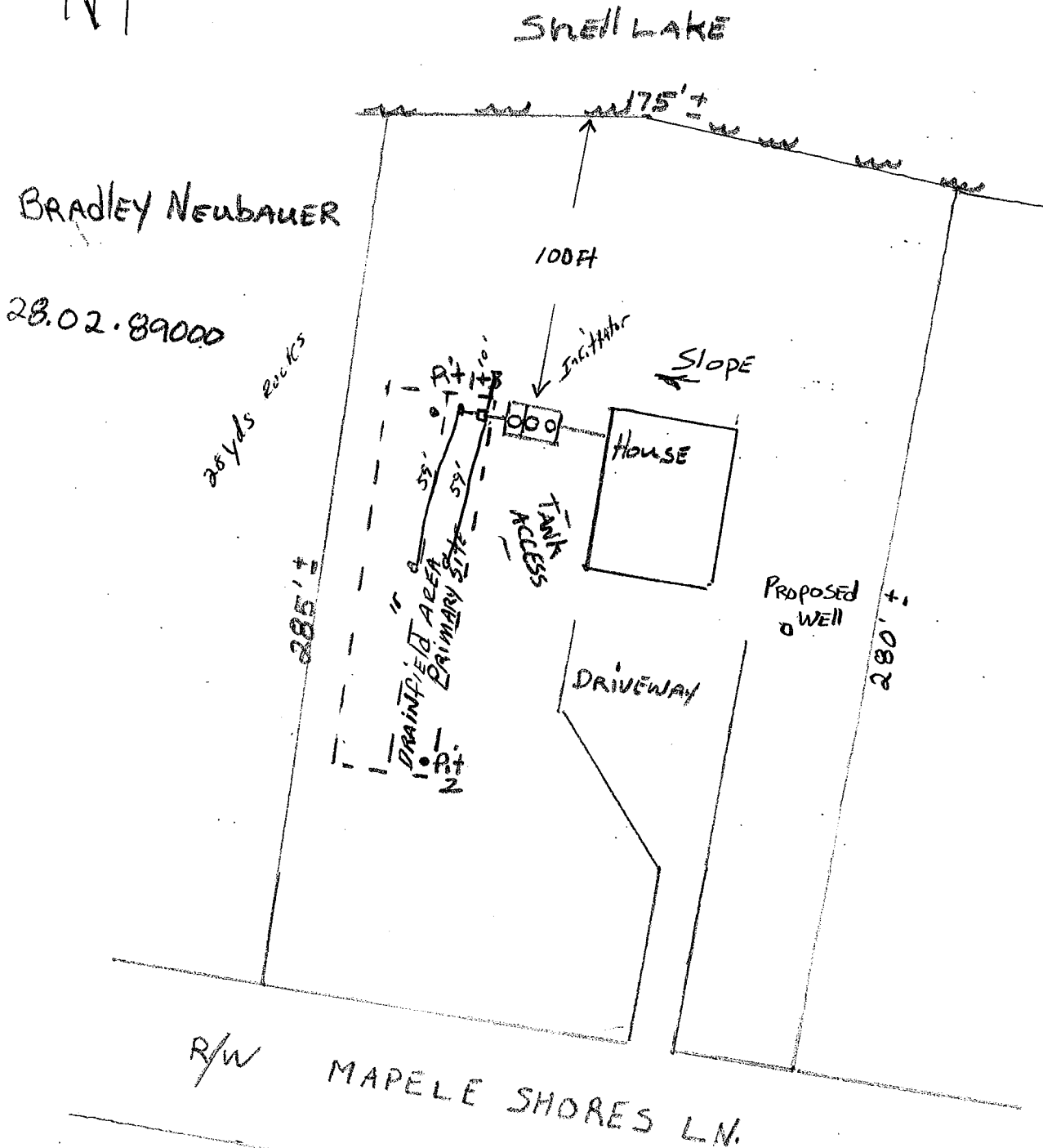
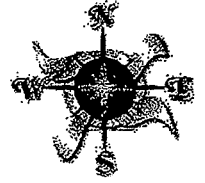
Ron Gritz
 Signature of Designer

10-15-2015
 Date

SKETCH OF PROPERTY

Please sketch all structures and septic systems on the property;
Include setbacks and wells within 100 feet of the property.

PARCEL	280289000
APP	SEPTIC INSPECTION
YEAR	2015



191391-603883

COC 10-28-15

PARCEL	
APP	SEPTIC
YEAR	

***** FOR OFFICE USE ONLY *****

Application Approved by: Mike Maltz Date: 10-21-15
Amount Paid 150 Receipt Number 191391-003 883 Permit Number

NOTES: mailed to Ron Girtz 10-28-15

INSPECTION REPORT

Home Information

Does the structure contain any of the following elements?

Garbage disposer Yes No Dishwasher Yes No
Grinder pump Yes No Lift pump in basement Yes No
Effluent screen installed? Yes No Effluent screen manufacturer

Alarm required? Yes No Alarm Type Alarm manufacturer

Lift pump in system? Yes No Pump manufacturer

Number of bedrooms 3

Component Information

Tank size 1500

Tank manufacturer Infiltrator

Drainfield size 572 reduced

Drainfield medium

Medium manufacturer 128 lineal ft 18" Rock

Drainfield medium size/depth

Soil Verification

Vertical separation verified for Boring #1 on Depth +36"

Vertical separation verified for Boring #2 on Depth

Vertical separation verified for Boring #3 on Depth

Setback Verification

	TANK	DRAINFIELD
Distance to Well	<u>+50</u>	<u>+50</u>
Distance to Building	<u>+10</u>	<u>+20</u>
Distance to Property Line	<u>+10</u>	<u>+10</u>
Distance to OHW of Lake	<u>+100</u>	<u>+100</u>
Distance to Pressure Line	<u>+10</u>	<u>+10</u>
Distance to Wetland/Protected Water	<u>+75</u>	<u>+75</u>

Date System Installed 10/27/15 Installer Girtz Etc Inspector Land Stoll

CERTIFICATE OF COMPLIANCE

() Certificate Is Hereby Denied

(X) Certificate is Hereby Granted Based upon the Application, addendum from, plans, specifications and all other supporting data.
With property maintenance, this system can be expected to function satisfactory, however, this is not a guarantee.

Signature Land Stoll Title ITS inspector Date 10/27/15

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