



030405000-2021



Becker County Planning & Zoning
915 Lake Ave
Detroit Lakes, MN 56501
(218) 846-7314
www.co.becker.mn.us

Certificate of Compliance Inspection Report - Permit #: SS2021-944

Owner & Property Information

Owner Name:	PHILIP ERB	Site Address:	NO ADDRESS YET
Mailing Address:	PHILIP ERB 36540 ST HWY 87 FRAZEE MN 56544	Township - Sec/Twp/Rng:	BURLINGTON - 29/138/040
Parcel #:	030405000	Legal Description:	Lot 001 of ACORN BEACH 1ST ADD LOT 1, 2 ACORN BCH 1ST. PT LOT 3 BLK 1 WEGNER SHRS: COMM SLY COR LOT 1 BLK 1 ACORN BCH 1ST, NE 14.78' TO POB, SE 76.26', NE 266' TO ACORN LK, NW AL LK 81.11', SW 225.72' TO POB. (03.0406)
Secondary Parcel #:		Designer:	JenCo Services, LLC, L4041 (James Piper)
		Installer:	PROPERTY OWNER - Self Install

Inspector Verified Specifications

Insp- Effluent Screen Installed:	No	Insp- Tank Nbr/Size:	1/1500/2
Insp- Alarm Required:	Yes	Insp- Drainfield Type:	No Drainfield
Insp- Lift Pump in System:	No	Insp- Drainfield Size:	
Insp- Number of Bedrooms:	2	Insp- Soil Verification:	#1:N/A #2:N/A #3:N/A

Inspector Verified Setbacks

Insp- Tank Dist to Road	100+	Insp- Drainfield Dist to Road	
Insp- Tank Dist to Nearest Prop Line	20+	Insp- Drainfield Dist to Nearest Prop Line	
Insp- Tank Dist to Nearest Structure	12	Insp- Drainfield Dist to Nearest Structure	
Insp- Tank Dist to Well	54	Insp- Drainfield Dist to Well	
Insp- Tank Dist to OHW	80+	Insp- Drainfield Dist to OHW	
Insp- Tank Dist to Pond/Wetland		Insp- Drainfield Dist to Pond/Wetland	
Insp- Tank Dist to Pressure Line		Insp- Drainfield Dist to Pressure Line	

Certificate of Compliance

(Yes) 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.
Certification Date: 6/8/2021

Zoning Office Signature:

Denise Gubrud - ISTS Inspector

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

Field Review Form

Permit # SS2021-944

Property and Owner

Owner: PHILIP ERB

Parcel Number: 030405000

Site Address: NO ADDRESS YET

Secondary Parcel:

Home Information

Does the structure contain any of the following elements?

Designer submitted

Inspector verified

Garbage disposal: No
Dishwasher: Invalid Field
Grinder pump: Invalid Field
Lift pump in bsmt: Invalid Field

Garbage disposal? Y
Dishwasher? Y
Grinder pump? Y
Lift pump in basement? Y

Number of bedrooms: 2

Review - Number of bedrooms: 2

Effluent screen

Effluent screen installed? Y Mfr:

Alarm: Yes Type: VISUAL

Review - Alarm? Y Type & Mfr: Manual float

Lift pump in system: No

Review - Lift pump in system? Y Mfr:

Component Information

* This tank cannot be used as septic/pump tank

Tank size: 1500

Review - Tank nbr: 1 size: 1500/2 Mfr: Infiltrator

Drainfield type:

Review - Drainfield type:

Drainfield size: Full size -
Reduced/warr. size -

Review - Drainfield status: none / installed / next spring
Review - Drainfield size:

Absorption area size:

Review - Absorption area size:

Chamber type/num:
Trench sqft/chamber -

Review - Chamber type: Num:
Review - Trench sqft/chamber:

Drainfield rock depth:

Review - Rock depth:

Soil Verification

Vertical separation verified

Boring #1:
Boring #2: none - holding tank
Boring #3:

Setback Verification

Distance to...	Designer submitted		Inspector verified	
	Tank	Drainfield	Tank	Drainfield
Road	+100'	N/A	50+	
Nearest prop line	24'	N/A	20	
Nearest structure	12'	N/A	12	
Well	+100'	N/A	54	
OHW	87'	NA	80	
Pond/Wetland	N/A	N/A		
Pressure line	N/A	N/A		

Date System Installed: 6/8/2021

Installer: Phil Erb

Inspector: Denise Gubrud

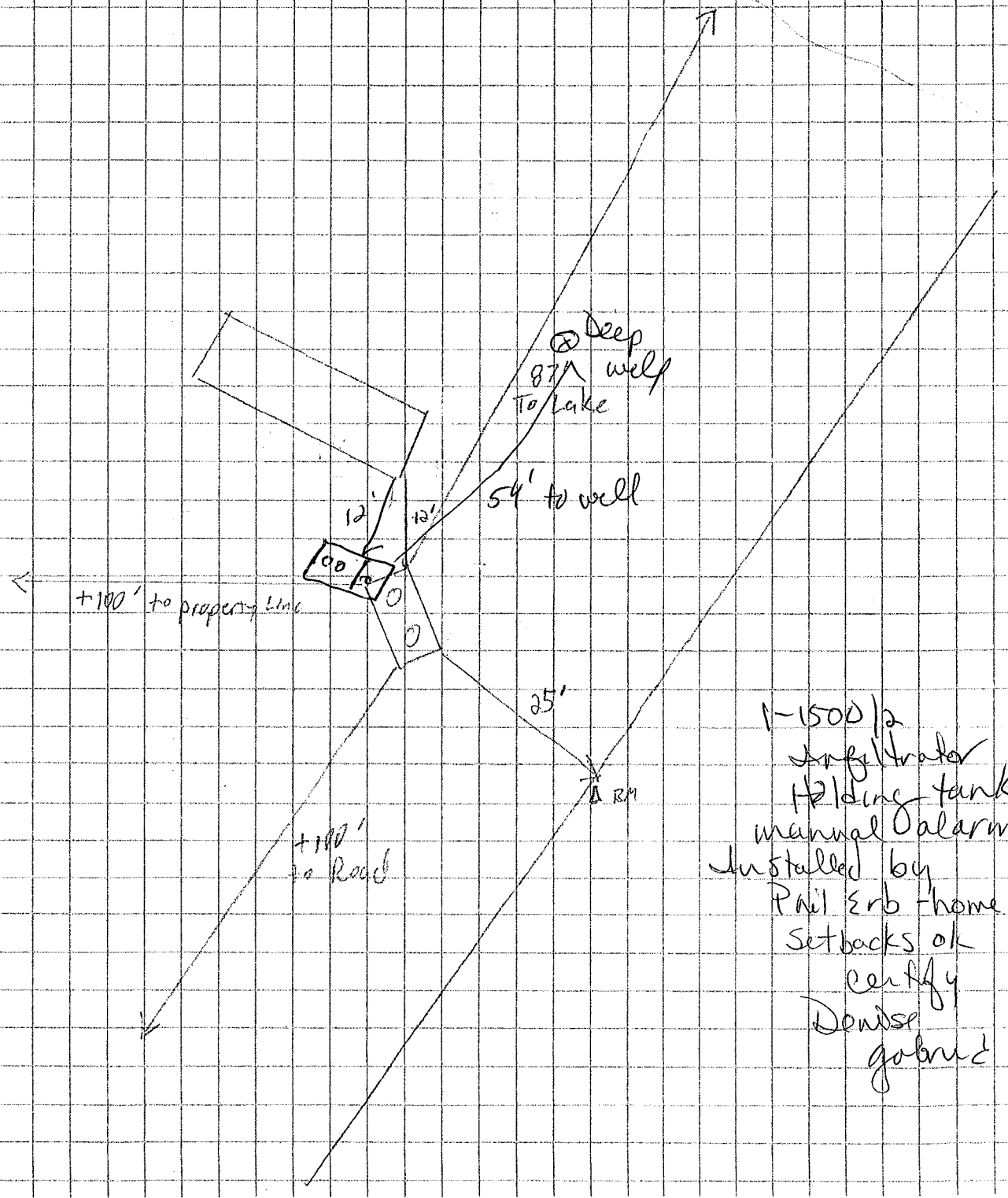
Home owner

B.M. = property stake = 110'
Top of tank = 98'

James
11" = 20' Piper

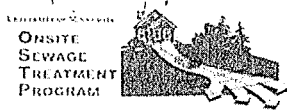
944

Acorn Levee



1-1500/ga
infiltrator
holding tank
manual alarm.
Installed by
Phil Erb - home owner
Setbacks ok
certify
Denise
gabriel

18/4



Preliminary Evaluation Worksheet



v 04.01.2020

1. Contact Information

Property Owner/Client: PHILIP ERB & TRACY ERB Date Completed: 5/26/2021

Site Address: NO ADDRESS YET Project ID: _____

Email: erbfarm@loretel.net Phone: 701-318-9477

Mailing Address: 36540 ST HWY 87, FRAZEE, MN 56544

Legal Description: ACORN BEACH 1ST ADD LOT 001

Parcel ID: 030405000 SEC: 29 TWP: 138 RNG: 040

2. Flow and General System Information

A. Client-Provided Information

Project Type: New Construction Replacement Expansion Repair

Project Use: Residential Other Establishment: _____

Residential use: # Bedrooms: 2 Dwelling Sq.ft.: _____ Unfinished Sq. Ft.: _____

Adults: 2 # Children: _____ # Teenagers: _____

In-home business (Y/N): No If yes, describe: _____

Water-using devices: Garbage Disposal/Grinder Dishwasher Hot Tub*
 Sewage pump in basement Water Softener* Sump Pump*
 Large Bathtub >40 gallons Iron Filter* Self-Cleaning Humidifier*
 Clothes Washing Machine High Eff. Furnace* Other: _____

* Clear water source - should not go into system

Additional current or future uses: NONE

Anticipated non-domestic waste: NONE

The above is complete & accurate: _____

Client signature & date

B. Designer-determined flow Information *Attach additional information as necessary.*

Design Flow: 300 GPD Anticipated Waste Type: Residential

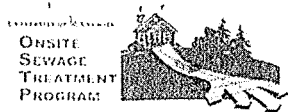
BOD: <170 mg/L TSS <60 mg/L Oil & Grease <25 mg/L

3. Preliminary Site Information

A. Water Supply Wells

#	Description	Mn. ID#	Well Depth (ft.)	Casing Depth (ft.)	Confining Layer	STA Setback	Source
1	NO WELL						OWNER
2							
3							
4							

Additional Well Information: _____



Preliminary Evaluation Worksheet



Site within 200' of noncommunity transient well (Y/N) Yes, source:

Site within a drinking water supply management area (Y/N) Yes, source:

Site in Well Head Protection inner wellhead management zone (Y/N) Yes, source:

Buried water supply pipes within 50 ft of proposed system (Y/N)

B. Site located in a shoreland district/area? Yes, name:

Elevation of ordinary high water level: ft Source:

Classification: Tank Setback: ft. STA Setbk: ft.

C. Site located in a floodplain? Yes, Type(s):

Floodplain designation/elevation (10 Year): ft Source:

Floodplain designation/elevation (100 Year): ft Source:

D. Property Line Id / Source: Owner Survey County GIS Plat Map Other:

E. ID distance of relevant setbacks on map: Water Easements Well(s)
 Building(s) Property Lines OHWL Other:

4. Preliminary Soil Profile Information From Web Soil Survey (attach map & description)

Map Units: Slope Range: %

List landforms:

Landform position(s):

Parent materials:

Depth to Bedrock/Restrictive Feature: in Depth to Watertable: in

Map Unit Ratings

Septic Tank Absorption Field- At-grade:

Septic Tank Absorption Field- Mound:

Septic Tank Absorption Field- Trench:

5. Local Government Unit Information

Name of LGU:

LGU Contact:

LGU-specific setbacks:

LGU-specific design requirements:

LGU-specific installation requirements:

Notes:



Field Evaluation Worksheet



v 04.01.2020

1. Project Information

Property Owner/Client: Project ID:

Site Address: Date Completed:

2. Utility and Structure Information

Utility Locations Identified Gopher State One Call # Any Private Utilities:

Locate and Verify (see Site Evaluation map) Existing Buildings Improvements Easements Setbacks

3. Site Information

Vegetation type(s): Landscape position:

Percent slope: % Slope shape: Slope direction:

Describe the flooding or run-on potential of site:

Describe the need for Type III or Type IV system:

Note:

Proposed soil treatment area protected? (Y/N): If yes, describe:

4. General Soils Information

Filled, Compacted, Disturbed areas (Y/N):

If yes, describe:

Soil observations were conducted in the proposed system location (Y/N):

A soil observation in the most limiting area of the proposed system (Y/N):

Number of soil observations: Soil observation logs attached (Y/N):

Percolation tests performed & attached (Y/N):

5. Phase I. Reporting Information

	Depth		Elevation	
Limiting Condition*:	<input type="text"/>	in	<input type="text"/>	ft
Periodically saturated soil:	<input type="text"/>	in	<input type="text"/>	ft
Standing water:	<input type="text"/>	in	<input type="text"/>	ft
Bedrock:	<input type="text"/>	in	<input type="text"/>	ft
Benchmark Elevation:	<input type="text" value="100.0"/>		<input type="text"/>	ft

*Most Restrictive Depth Identified from List Below

Soil Texture:

Percolation Rate: min/inch

Soil Hyd Loading Rate: gpd/ft²

Benchmark Elevation Location:

Elevations and Benchmark on map? (Y/N):

Benchmark Elevation Location:

Differences between soil survey and field evaluation:

Site evaluation issues / comments:

Anticipated construction issues:

1. PROJECT INFORMATION v 04.01.2020

Property Owner/Client:	PHILIP ERB & TRACY ERB	Project ID:	
Site Address:	NO ADDRESS YET	Date:	05/26/21
Email Address:	erbfarm@loretel.net	Phone:	701-318-9477

2. DESIGN FLOW & WASTE STRENGTH *Attach data / estimate basis for Other Establishments*

Design Flow:	300	GPD	Anticipated Waste Type:	Residential
BOD:	<170	mg/L	TSS:	<60 mg/L
			Oil & Grease:	<25 mg/L
Treatment Level:	C	<i>Select Treatment Level C for residential septic tank effluent</i>		

3. HOLDING TANK SIZING

Minimum Capacity: Residential = 400 gal/bedroom, Other Establishment = Design Flow x 5.0, Minimum size 1000 gallons

Code Minimum Holding Tank Capacity:	1000	Gallons	in	1	Tanks or Compartments
Recommended Holding Tank Capacity:	1500	Gallons	in	1	Tanks or Compartments
Type of High Level Alarm:	VISUAL (Set @ 75% tank capacity)				
Comments:					

4. SEPTIC TANK SIZING

A. Residential dwellings:

Number of Bedrooms (Residential):	2				
Code Minimum Septic Tank Capacity:		Gallons	in		Tanks or Compartments
Recommended Septic Tank Capacity:		Gallons	in		Tanks or Compartments
Effluent Screen & Alarm (Y/N):		Model/Type:			

B. Other Establishments:

Waste received by:		GPD x		Days Hyd. Retention Time	
Code Minimum Septic Tank Capacity:		Gallons	in		Tanks or Compartments
Recommended Septic Tank Capacity:		Gallons	in		Tanks or Compartments
Effluent Screen & Alarm (Y/N):		Model/Type:			

5. PUMP TANK SIZING

Pump Tank 1 Capacity (Minimum):		Gal	Pump Tank 2 Capacity (Minimum):		Gal
Pump Tank 1 Capacity (Recommended):		Gal	Pump Tank 2 Capacity (Recommended):		Gal
Pump 1		GPM	Total Head		ft
Supply Pipe Dia.		in	Dose Vol:		gal
			Pump 2		GPM
			Total Head		ft
			Supply Pipe Dia.		in
			Dose Vol:		Gal

6. SYSTEM AND DISTRIBUTION TYPE		Project ID: <input style="width: 150px;" type="text"/>
Soil Treatment Type: <input style="width: 100px;" type="text"/>	Distribution Type: <input style="width: 150px;" type="text"/>	
Elevation Benchmark: <input style="width: 50px;" type="text"/> 100 ft	Benchmark Location: <input style="width: 150px;" type="text"/> PROPERTY STAKE	
MPCA System Type: <input style="width: 100px;" type="text"/> Type II	Distribution Media: <input style="width: 150px;" type="text"/>	
Type III/IV Details: <input style="width: 300px;" type="text"/>	<input style="width: 150px;" type="text"/>	

7. SITE EVALUATION SUMMARY:

Describe Limiting Condition:

Layers with >35% Rock Fragments? (yes/no) If yes, describe below: % rock and layer thickness, amount of soil credit and any additional information for addressing the rock fragments in this design.

Note:

	Depth	Depth	Elevation of Limiting Condition
Limiting Condition:	<input style="width: 50px;" type="text"/> inches	<input style="width: 30px;" type="text"/> ft	<input style="width: 80px;" type="text"/> ft
Minimum Req'd Separation:	<input style="width: 50px;" type="text"/> inches	<input style="width: 30px;" type="text"/> ft	<i>Critical for system compliance</i>
Code Max System Depth:	<input style="width: 50px;" type="text"/> inches	<input style="width: 30px;" type="text"/> ft	<input style="width: 80px;" type="text"/> ft

This is the maximum depth to the bottom of the distribution media for required separation. Negative Depth (ft) means it must be a mound.

Soil Texture:

Soil Hyd. Loading Rate: GPD/ft² Percolation Rate: MPI

Contour Loading Rate: Note:

Measured Land Slope: 14.0 % Note:

Comments:

8. SOIL TREATMENT AREA DESIGN SUMMARY

Trench:

Dispersal Area <input style="width: 50px;" type="text"/> ft ²	Sidewall Depth <input style="width: 50px;" type="text"/> in	Trench Width <input style="width: 50px;" type="text"/> ft
Total Lineal Feet <input style="width: 50px;" type="text"/> ft	No. of Trenches <input style="width: 50px;" type="text"/>	Code Max. Trench Depth <input style="width: 50px;" type="text"/> in
Contour Loading Rate <input style="width: 50px;" type="text"/> ft	Length <input style="width: 50px;" type="text"/> ft	Designed Trench Depth <input style="width: 50px;" type="text"/> in

Bed:

Dispersal Area <input style="width: 50px;" type="text"/> ft ²	Sidewall Depth <input style="width: 50px;" type="text"/> in	Maximum Bed Depth <input style="width: 50px;" type="text"/> in
Bed Width <input style="width: 50px;" type="text"/> ft	Bed Length <input style="width: 50px;" type="text"/> ft	Designed Bed Depth <input style="width: 50px;" type="text"/> in

Mound:

Dispersal Area <input style="width: 50px;" type="text"/> ft ²	Bed Length <input style="width: 50px;" type="text"/> ft	Bed Width <input style="width: 50px;" type="text"/> ft
Absorption Width <input style="width: 50px;" type="text"/> ft	Clean Sand Lift <input style="width: 50px;" type="text"/> ft	Berm Width (0-1%) <input style="width: 50px;" type="text"/> ft
Upslope Berm Width <input style="width: 50px;" type="text"/> ft	Downslope Berm <input style="width: 50px;" type="text"/> ft	Endslope Berm Width <input style="width: 50px;" type="text"/> ft
Total System Length <input style="width: 50px;" type="text"/> ft	System Width <input style="width: 50px;" type="text"/> ft	Contour Loading Rate <input style="width: 50px;" type="text"/> gal/ft

Project ID:

At-Grade:

Bed Width ft Bed Length ft Finished Height ft

Contour Loading Rate gal/ft Upslope Berm ft Downslope Berm ft

Endslope Berm ft System Length ft System Width ft

Level & Equal Pressure Distribution

No. of Laterals Perforation Spacing ft Perforation Diameter in

Lateral Diameter in Min Dose Volume gal Max Dose Volume gal

Non-Level and Unequal Pressure Distribution

	Elevation (ft)	Pipe Size (in)	Pipe Volume (gal/ft)	Pipe Length (ft)	Perf Size (in)	Spacing (ft)	Spacing (in)	
Lateral 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Minimum Dose Volume <input type="text"/> gal
Lateral 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Lateral 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Lateral 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Maximum Dose Volume <input type="text"/> gal
Lateral 5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Lateral 6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

9. Additional Info for At-Risk, HSW or Type IV Design

A. Starting BOD Concentration = Design Flow X Starting BOD (mg/L) X 8.35 ÷ 1,000,000
 gpd X mg/L X 8.35 ÷ 1,000,000 = lbs. BOD/day

B. Target BOD Concentration = Design Flow X Target BOD (mg/L) X 8.35 ÷ 1,000,000
 gpd X mg/L X 8.35 ÷ 1,000,000 = lbs. BOD/day

Lbs. BOD To Be Removed:

PreTreatment Technology: *Must Meet or Exceed Target

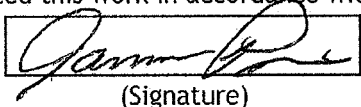
Disinfection Technology: *Required for Levels A & B

C. Organic Loading to Soil Treatment Area:
 mg/L X gpd x 8.35 ÷ 1,000,000 ÷ ft² = lbs./day/ft²

10. Comments/Special Design Considerations:

HOLDING TANK ONLY

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

JAMES PIPER (Designer)	 (Signature)	L4041 (License #)	5/26/2021 (Date)
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1. Tank Specifications Project ID: _____ v 04.01.2020

A. Tank Manufacturer: Tank Model:

B. Outside Tank Dimensions and Specifications: Tank Use:

Length: in Width: in Height: in Diameter: in

Length: ft Width: ft Height: ft Radius of Tank: in

2. Outside Volume of Tank

Rectangular Tank	Circular Tank
A. Area of Tank = Length (ft) X Width (ft) <input type="text" value="14.7"/> ft X <input type="text" value="5.2"/> ft = <input type="text" value="75.8"/> ft ²	A. Area of Tank = πr^2 (3.14 X (Radius of Tank) ²) 3.14 X <input type="text" value=""/> ft ² = <input type="text" value=""/> ft ²
B. Volume of Tank = Area of Tank (2.A) X Height (ft) <input type="text" value="75.8"/> ft ² X <input type="text" value="4.6"/> ft = <input type="text" value="347.3"/> ft ³	B. Volume of Tank = Area of Tank X Height (ft) <input type="text" value=""/> ft ² X <input type="text" value=""/> ft = <input type="text" value=""/> ft ³

3. Force of Tank Weight (F_{TW})

Weight of Tank (provided by manufacturer) lbs/ft³

4. Force of Soil Weight Over Tank (F_{SW})

A. Depth of Cover Over Tank: <input type="text" value="24"/> in <input type="text" value="2.0"/> ft	Soil Type	Weight of Soil (lbs/ft³)
B. Weight of Soil Per Cubic Foot: <input type="text" value="120"/> lbs/ft ³	Sandy	120
C. Volume of Soil Over Tank = Depth of Cover (ft) X Area of Tank (ft ²) <input type="text" value="2.0"/> ft X <input type="text" value="75.8"/> ft ² = <input type="text" value="151.6"/> ft ³	Loamy	100
D. Weight of Soil Over Tank = Volume of Soil Over Tank X Weight of Soil Per Cubic Foot <input type="text" value="151.6"/> ft ³ X <input type="text" value="120"/> lbs/ft ³ = <input type="text" value="18,186.7"/> lbs	Clay	90

Note: Assumes saturation does not get over the lid of the tank

5. Buoyant Force (F_B)

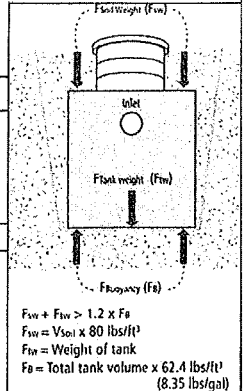
Buoyant Force (F_B) = Outside Volume of Tank X Weight of Water Per Cubic Foot (62.4 lbs/ft³) X 1.2 (Safety Fctr)

X 62.4 lbs/ft³ X 1.2 = lbs

6. Evaluation of Net Forces

A. Downward Force = Force of Tank Weight (F_{TW}) + Force of Soil Weight of Soil (F_{SW})
 lbs + lbs = lbs

B. Net Difference = Downward Force - Buoyant Force Including Safety Factor
 lbs - lbs = lbs



If the Net Difference is negative, countermeasures will need to be taken to prevent the tank from floating out of the ground.

7,319 lbs OF COUNTERWEIGHT NEEDED TO PREVENT FLOTATION

6-8-2012

3:00 Phil Erb



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Septic Permit

Permit #: SS2021-944

Owner & Property Information

Owner Name:	PHILIP ERB	Parcel #:	030405000
Mailing Address:	PHILIP ERB 36540 ST HWY 87 FRAZEE MN 56544	Secondary Parcel #:	30650 Acorn Lake RD
Phone #:	701-318-9477	Site Address:	NO ADDRESS YET
Lake/River(1000/300):	Yes	Township - Sec/Twp/Rng:	BURLINGTON - 29/138/040
Lake/River Name:	Acorn (Burlington) [RD]	Designer:	JenCo Services, LLC, L4041 (James Piper)
Pond/Wetland(50):	No	Installer:	PROPERTY OWNER - Self Install

Specifications

Tank to be Installed:	Holding Tank	Type of Drainfield:	
Total # Tanks Installed:	1	Full Size of Drainfield:	
System Status:	No Existing System	Reduced/Warrantied Size:	
System Serves:	Seasonal Dwelling	Absorbtion Area Size:	
Number of Bedrooms:	2	Rock Depth:	
Design Flow/GPD:	300	Chamber Type and Number:	
Garbage Disposal?	No	Chamber Trench SqFt/Chamber:	
Size of Lift Pump:		Is System Pressurized?	
Size of Lift Line:		Alarm?	Yes
Soil Sizing Factor:		Type of Alarm:	VISUAL

Setbacks

Road Type:	Public / Township	Right of Way Marked:	No
Tank Dist to Road:	+100'	Drainfield Dist to Road:	N/A
Tank Dist to Closest Prop Line:	24'	Drainfield Dist to Closest Prop Line:	24'
Tank Dist to Nearest Structure:	12'	Drainfield Dist to Nearest Structure:	N/A
Tank Dist to Well:	+100'	Drainfield Dist to Well:	N/A
Tank Dist to OHW:	87'	Drainfield Dist to OHW:	NA
Tank Dist to Pond/Wetland:	N/A	Drainfield Dist to Pond/Wetland:	N/A
Tank Dist to Pressure Line:	N/A	Drainfield Dist to Pressure Line:	N/A

Other Information

Date Approved:	5/27/2021
Permit Fee:	225.00
Receipt Number:	250176683
Date Paid:	5/28/2021
Notes:	Install a 1500 gallon holding tank with a manual float

Zoning Office Signature:

Denise Gubrud

PERMIT MUST BE POSTED AT JOB SITE. PERMIT EXPIRES ONE YEAR FROM DATE PAID.

** Please schedule for inspection prior to installation! **