



Application to Inspect Existing Septic System

Grant County Environmental Services

10 2nd St NE

Elbow Lake, MN 56531

218-685-8225

Permit No. _____

1. Lake/River No. 26-	2. Lake/River Name	3. Lake/River Class	4. Section	5. Twp. Name
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6. Parcel Number(s)	7. Property (E-911) Address
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8. Legal Description

	Last name	First	Mailing Address	Daytime phone No.
9. Property Owner				
10. Inspector			10 2 nd St NE Elbow Lake, MN 56531	218-685-8225

THIS SPACE FOR OFFICE USE ONLY

⇒ This system inspected on _____, 20__ @ _____

<p>11. TYPE OF SYSTEM (CHECK ONE)</p> <table style="width: 100%;"> <tr> <td style="width: 50%;"><u>System</u></td> <td style="width: 50%;"><u>Add-On/Replacement</u></td> </tr> <tr> <td><input type="checkbox"/> Rock</td> <td><input type="checkbox"/> Tank, Septic</td> </tr> <tr> <td><input type="checkbox"/> Graveless</td> <td><input type="checkbox"/> Tank, Lift</td> </tr> <tr> <td><input type="checkbox"/> Chamber</td> <td><input type="checkbox"/> Trench, Rock</td> </tr> <tr> <td><input type="checkbox"/> Bed</td> <td><input type="checkbox"/> Trench, Graveless</td> </tr> <tr> <td><input type="checkbox"/> Mound</td> <td><input type="checkbox"/> Trench, Chamber</td> </tr> <tr> <td><input type="checkbox"/> At Grade</td> <td><input type="checkbox"/> Bed</td> </tr> <tr> <td>Collector System</td> <td><input type="checkbox"/> Mound</td> </tr> <tr> <td><input type="checkbox"/> Rock</td> <td><input type="checkbox"/> At Grade</td> </tr> <tr> <td><input type="checkbox"/> Graveless</td> <td><input type="checkbox"/> Combination</td> </tr> <tr> <td><input type="checkbox"/> Chamber</td> <td>Other</td> </tr> <tr> <td><input type="checkbox"/> Bed</td> <td><input type="checkbox"/> Tank, Holding</td> </tr> <tr> <td><input type="checkbox"/> Mound</td> <td><input type="checkbox"/> Outhouse</td> </tr> <tr> <td><input type="checkbox"/> At Grade</td> <td><input type="checkbox"/> Sewer Line</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Performance</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Miscellaneous</td> </tr> </table>	<u>System</u>	<u>Add-On/Replacement</u>	<input type="checkbox"/> Rock	<input type="checkbox"/> Tank, Septic	<input type="checkbox"/> Graveless	<input type="checkbox"/> Tank, Lift	<input type="checkbox"/> Chamber	<input type="checkbox"/> Trench, Rock	<input type="checkbox"/> Bed	<input type="checkbox"/> Trench, Graveless	<input type="checkbox"/> Mound	<input type="checkbox"/> Trench, Chamber	<input type="checkbox"/> At Grade	<input type="checkbox"/> Bed	Collector System	<input type="checkbox"/> Mound	<input type="checkbox"/> Rock	<input type="checkbox"/> At Grade	<input type="checkbox"/> Graveless	<input type="checkbox"/> Combination	<input type="checkbox"/> Chamber	Other	<input type="checkbox"/> Bed	<input type="checkbox"/> Tank, Holding	<input type="checkbox"/> Mound	<input type="checkbox"/> Outhouse	<input type="checkbox"/> At Grade	<input type="checkbox"/> Sewer Line		<input type="checkbox"/> Performance		<input type="checkbox"/> Miscellaneous	<p>12. SEWAGE TREATMENT SYSTEM DESIGN – AS SHOWN ON ORIGINAL DRAWING</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%; text-align: center;">TANK</td> <td style="width: 25%; text-align: center;">DRAINFIELD</td> </tr> <tr> <td>Capacity/Size</td> <td style="text-align: center;">Gls</td> <td style="text-align: center;">Ft²</td> </tr> <tr> <td>Setback to Nearest Well</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Setback to OHWL (Lake/Stream)</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Setback to Wetland</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Setback to Dwelling</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Setback to Non-Dwelling</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Setback to Road Right-of-Way</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Setback to Nearest Property Line</td> <td style="text-align: center;">Ft</td> <td style="text-align: center;">Ft</td> </tr> <tr> <td>Elevation Above Restrictive Layer</td> <td style="text-align: center;">-</td> <td style="text-align: center;">Inches</td> </tr> </table> <p style="text-align: center;">All distances are shortest distances between nearest points</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">15. DEPTH OF WATER WELL</td> <td style="width: 33%;">16. # BEDROOMS _____</td> <td style="width: 33%;">17. MOUND AREA</td> </tr> <tr> <td style="text-align: center;">Ft</td> <td style="text-align: center;">GARBAGE DISP _____</td> <td style="text-align: center;">Ft²</td> </tr> </table>		TANK	DRAINFIELD	Capacity/Size	Gls	Ft ²	Setback to Nearest Well	Ft	Ft	Setback to OHWL (Lake/Stream)	Ft	Ft	Setback to Wetland	Ft	Ft	Setback to Dwelling	Ft	Ft	Setback to Non-Dwelling	Ft	Ft	Setback to Road Right-of-Way	Ft	Ft	Setback to Nearest Property Line	Ft	Ft	Elevation Above Restrictive Layer	-	Inches	15. DEPTH OF WATER WELL	16. # BEDROOMS _____	17. MOUND AREA	Ft	GARBAGE DISP _____	Ft ²
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18. Site Data
 Original Designer: _____ Designer Lic. #: _____ Date: _____ Perc Rate: _____

19. Tank Integrity	Pumper: _____	License #: _____	Gallons Pumped _____
	_____ Signature of Pumper	_____ Date of Maintenance	

20. Agreement: The undersigned hereby makes application for a permit to inspect the Sewage Treatment System herein specified, agreeing to comply in strict accordance with the Sanitation Code of Grant County, Minnesota. Applicant agrees that the pumper verification submitted herewith and which is approved by a Land Management Official shall become a part of the permit. This permit is valid for twelve (12) months.

Date: _____ Signature of Property Owner _____

Date: _____ Land Management Official _____

Office use	20. PERMIT FEE \$ 100.00	21. RECEIPT NO: _____
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