

ZONING PERMIT APPLICATION

(please do not write in shaded areas)

DATE <u>6-6-02</u>	APPROVED M	DENIED	PERMIT# <u>29231</u>
NAME <u>LARRY PIERCE</u>	TELE# <u>218-768-3036</u>	PARCEL# <u>30-0637502</u>	RECEIPT# <u>7023</u>
MAILING ADDRESS <u>CD BCT CLASSIC HOMES, Box 443, McCREGOR 55760</u>	TOWNSHIP <u>SPALDING</u>	CONFORMING SEPTIC	YES <input type="checkbox"/> PH# <input type="checkbox"/> NO <input checked="" type="checkbox"/> <u>NEW</u>
LEGAL DESCRIPTION <u>S. 208' OF W. 208' OF SW 1/4 OF SE 1/4</u>			SEC <u>22</u> TWP <u>47</u> RGE <u>B</u>

ZONING DISTRICT & FLOOD PLAIN

ZONING DISTRICT OPEN

LAKE/STREAM/RIVER NAME _____

LAKE/RIVER ID NUMBER _____

LAKE/RIVER/STREAM CLASSIF. _____

PARCEL LOCATED IN FLOOD PLAIN? X Y N

10/100 YR FLOOD ELEVATION _____

LOWEST FLOOR ELEVATION _____

ELEV. CERTIFICATE REQUIRED

BEFORE CONSTRUCTION	Y <input type="checkbox"/>	N <input type="checkbox"/>
AFTER CONSTRUCTION	Y <input type="checkbox"/>	N <input type="checkbox"/>

STRUCTURE SETBACK DISTANCE REQUIREMENTS

(Measure from eaves or overhang)

OHW TO LAKE/RIVER/STREAM X

PROPERTY LINE SETBACK 50'

SETBACK TO ROAD R-O-W 30' ASPHALT

SETBACK TO BLUFF 30'

SEPTIC SYSTEM SETBACK DISTANCES

SETBACK TO STRUCTURES 10' TANK 20' DF

OHW TO LAKE/RIVER X

PROPERTY LINE SETBACK 10'

SETBACK TO ROAD R-O-W 10'

****ATTACH COPY OF ELEVATION CERTIFICATES****

(circle) RESIDENTIAL COMMERCIAL ACCESSORY NEW BUILDING ALTERATION

DATA FOR BUILDING CONSTRUCTION: CONTRACTOR BCT CLASSIC HOMES INC # 200 80408

SIZE OF ALL BUILDINGS COVERED BY THIS APPLICATION 28x46 Residence, SEPTIC

COMMENTS: CONSTRUCT MANUFACTURED HOME PERMANENTLY ATTACHED TO A STRUCTURAL SLAB OVER A CRAWL SPACE.

DATA FOR SEWER CONSTRUCTION: INSTALLER DALE SANDBERG #BEDROOMS/GPD 2

SOIL BORINGS <u>4</u>	SEPTIC DESIGN <u>TRENCH</u>	GARBAGE DISP/HOT TUB
PERK RATES <u>3</u>	DEPTH TO RESTRICTING LAYER <u>500'</u>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
MIN. SIZE SEPTIC TANK <u>1000</u>	MIN. SIZE PUMP TANK <u>500</u>	
DRAINFIELD: MINIMUM SQ. FT. _____	WITH _____ INCHES ROCK BELOW PIPE	
MOUND: MINIMUM ROCK BED SQ. FT. _____	WITH 9 INCHES ROCK BELOW PIPE	
MIN. UPSLOPE SAND WIDTH _____	MIN. DOWNSLOPE SAND WIDTH _____	END SAND WIDTHS _____

RECOMMENDATIONS: _____

PLEASE ATTACH ANY ADDITIONAL INFORMATION TO THIS PERMIT

TOWNSHIP OR CITY USE ONLY:

RECOMMEND: APPROVAL DENIAL COMMENTS: _____

SIGNATURE: TOWNSHIP/CITY CLERK _____ DATE _____

The undersigned hereby makes application for permit to construct as herein specified, agreeing to do all such work in strict accordance with the Ordinances of the County of Aitkin, Minnesota; Minnesota Individual Sewage Disposal Code Minimum Standards set forth by Minnesota Department of Health; and Shoreland Management Standards set forth by Minnesota Department of Natural Resources. Applicant agrees that plot plan, sketches and specifications submitted herewith and which are approved by the Zoning Official, shall become a part of the permit. **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 Zoning Office (at least 24 hours in advance) that the septic system is ready for inspection.

SIGNATURE APPLICANT/AGENT Robert Ericklund, contractor FEE \$ 250.00

RECEIVED BY Missy DATE 6/5/02

\$50.00 Pre On-Site: Yes No

EXPIRES IN ONE YEAR
Aitkin County Zoning, Courthouse — AITKIN, MINNESOTA 56431 — Telephone 218/927-7342

FIELD EVALUATION SHEET

NAME Larry Pierce PERMIT # 29231
 PARCEL # 30-0-037502 TWP 47 SECTION 22

CHECK THE FOLLOWING PRIOR TO INSPECTION

 _____ NAME OF SITE EVALUATOR
 _____ NAME OF DESIGNER
 _____ NAME OF INSTALLER

Y LOT OF RECORD BEFORE 1-21-92 (SL) IR 1-10-95 (NSL), IF NO, ALT. SITE? _____
Y SITE PLAN WITH SETBACK DISTANCES AND DIMENSIONS _____
Y ARE ISTS SITES PROTECTED FROM DAMAGE? IF NOT, WHEN _____
Y DESIGN _____ PERC TESTS 4 SOIL BORINGS, 2 PER SITE _____
2 NUMBER OF BEDROOMS (INCLUDE POTENTIAL) _____
 _____ CROSS SECTION SHEET _____ X TRENCH DESIGN SHEET
 _____ MOUND DESIGN SHEET _____ OTHER OR PERFORM. _____
 _____ PRESSURE DISTRIBUTION SHEET _____ PUMP CALC. TEST _____
 _____ WATER USE CALCULATIONS _____
N GARBAGE DISPOSAL _____ N HOT TUB _____
 _____ EASEMENTS ON LOT, IS ROAD PUBLIC OR PRIVATE SEE DEED/PLAT _____
 _____ NATURAL LANDSCAPE PROTECTION PLAN _____

STAKING: BUILDINGS X, DRAINFIELD X, BORINGS _____, WELL _____
 BUILDING SETBACKS: ROAD _____, SIDE _____, REAR _____, BLUFF _____,
 LAKE/RIVER _____

COMPLETE DURING SITE EVALUATION
 _____ BUILDINGS STAKED _____ DRAINFIELD STAKED _____ BORINGS STAKED
 _____ WELL STAKED

SETBACKS (MEASURE DISTANCE)

	<u>DRAINFIELD</u>	<u>HOUSE</u>
FLOOD PLAIN	YES/NO	YES/NO
WETLANDS	YES/NO	YES/NO
LAKE, RIVER, PROTECTED WATERS	N/A	N/A
ROAD RIGHT OF WAY	220'	750'
BLUFF	N/A	N/A
SIDE LOT LINE	60'	220'
REAR LOT LINE	OK	OK
HOUSE OR OTHER STRUCTURE	> 60' MIN DISTANCE	N/A
WELL	N/A	N/A
EASEMENTS		
NEIGHBORING WELL (S) TO ISTS	(1) _____ (2) _____	(3) _____ (4) _____
DRAINFIELD AREA DISTURBED		

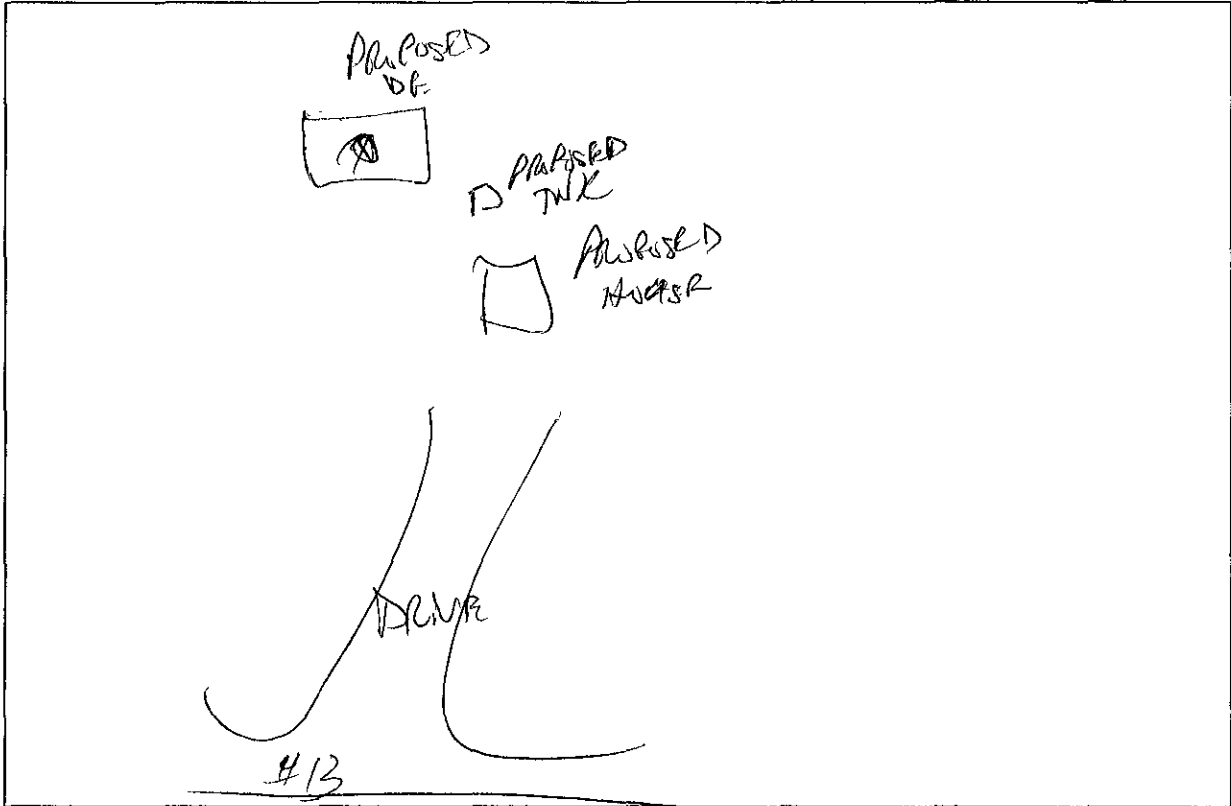
CONFORMING SEPTIC SYSTEM: _____ YES _____ NO If no, list reasons below.
 COMMENTS OR PROBLEMS (drainage, swales, wetlands, need gutters, etc.) NO BSE INSTALLERS

APPROVED: YES OR NO
 INSPECTORS NAME M. Kille DATE 6-6-02 # PICTURES _____

SOIL BORING LOGS AND SKETCH PLAN ON REVERSE SIDE

SOIL BORING LOG #1			SOIL BORING LOG #2		
DEPTH	TEXTURE	COLOR	DEPTH	TEXTURE	COLOR
0-4"	loess: L				
5"-60"	SAND				
	No MATTERS @ 60"				

IDENTIFY LOCATIONS OF: (BORINGS, NEIGHBORING STRUCTURES, WELLS, DRAINFIELDS, DRAINAGE PATTERNS, OR OTHER FEATURES THAT MAY IMPACT THE SITE).



Notes: No

Parcel number/Tax year: 30-0-037502
Owner(s): 98864
PIERCE, LAWRENCE
17648 360TH ST
MCGREGOR MN 55760

2003 Reference parcel: 00230000037502
Parcel type : RE Hold tax stmt:
Com district: 3 Misc1/2:
Escrow agent:
Mortgage hld:
UTA: Twp/City School **** *
030 0004 00 00 00 00

Taxpayer: 98864 FALCO: 1 F.O.
PIERCE, LAWRENCE
17648 360TH ST
MCGREGOR MN 55760

TIF district: 000 000
Lake#/name :
Property adr:

Alternate taxpayer:

Emergency# :
Twp/City Plt: SPALDING TWP
Sec/twp/rge : 22 47.0 23 Acres: 1.00
Plat:
Description: Lot/Block . :
1 AC IN SW OF SE IN DOC 168830

Press Enter to continue or enter new parcel/tax year. 30-0-037502 2003
F1=Full desc F2=Trans hist F3=Exit F6=Prcl hist F7=Backward F9=Escrow hist
F12=Cancel F17=Display notes F18=Rebate

SUPPLEMENTAL DATA FOR LAND USE PERMITS

Page 1 of 2

*** COMPLETE BOTH SIDES ***

A. PLANNING CHECKLIST (required):

- | | YES | NO | ??? |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 1. Are you aware of setback requirements and will your project meet them? <i>Note: Setback distances are taken from any projection of the building (i.e. overhangs, eaves, decks, etc.)</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you taken in consideration locations for future buildings, septic systems, decks, driveways, etc? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are there any lowlands or wetlands on or near the site project? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Is there a steep slope or bluff on or near the site?
(If yes, complete Section D) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Will the project involve the clearing of trees or shrubs within the Shore Impact Zone of a lake or river? (If yes, complete Section D)... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Will the project involve grading, filling or landscaping within the shoreland district of a lake or river? (If yes, complete Section D)..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Is your property in a floodplain? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
- If it is, the lowest floor (which includes basement or crawl space, regardless of a dirt floor) must be one foot (1') above the 100-year flood elevation. A benchmark established by a registered surveyor or licensed engineer may be required before granting a land use permit.*

B. PRE-EVALUATION INSPECTION REQUEST (required):

Defining and staking the property lines, road right-of-ways, septic sites, and wells are the responsibility of the property owner. In some cases, a registered survey may be required to verify setbacks before granting a permit.

ALL PROPOSED DEVELOPMENT REQUESTS MUST BE CLEARLY STAKED AT ALL FOUR CORNERS IF APPLICABLE, IF STAKES ARE NOT PRESENT OR VISIBLE IT MAY RESULT IN ADDITIONAL FEES OR A DELAY IN THE PERMIT PROCESS.

The undersigned hereby makes application for a pre-evaluation permit inspection, agreeing that all setback information and delineation of property lines, well location, road setbacks, and development corners have been properly marked in accordance with the standards and requirements of the Aitkin County Ordinances.

Telephone Number between the hours of 8:00 A.M. and 4:00 P.M. 219-768-3036

Landowner: LARRY PIERCE Date: 6/5/02

Address: 800 BCE CLASSIC HOMES™, BOX 443, MCGREGOR 55760

LANDOWNER SIGNATURE: X Robert Spinkland, contractor for owner

If you have any questions please contact the Planning and Zoning office at (218) 927-7342
Ordinances and Publications are available **FREE** online at: www.aitkin.mn.us

WE LOOK FORWARD TO WORKING WITH YOU

*** COMPLETE BOTH SIDES ***

C. Directions to your Property (required):

From a major intersection: STATE HIGHWAY 65 TO COUNTY 13 & EAST ON COUNTY 13 ABOUT 4 MILES, PROPERTY ON NORTH SIDE OF 13

D. NATURAL LANDSCAPE PROTECTION PLAN:

Complete this section only if you were directed to in Section A OR if you are working near a lake or stream.

- Description of proposed construction: CONSTRUCT 28x46 MANUFACTURED HOME, PERMANENTLY ATTACHED TO A STRUCTURAL SLAB OVER A CRAWLSPACE.
- Existing vegetative cover (e.g., forested, grass, shrub, lawn, etc.): GRASS & TREES
- Setback from the Ordinary High Water Level (OHW) for proposed construction? N/A
- How much excavation or fill work is being done inside the Shore Impact Zone (SIZ)? NONE
(If excavation or fill work greater than 10 cu yds is being done, supply copy of Site review from SWCD*)
(The SIZ: Mississippi River & NE Lakes = 75 feet, RD & GD lakes = 50 feet, other waters-see ordinance)
- How much excavation or fill work is being done outside the Shore Impact Zone (SIZ)? JUST FILL UNDER SLAB
(If excavation or fill work greater than 50 cu yds is being done, supply copy of Site review from SWCD*)
- What percent slope of the land currently exists on the construction site? 25%
(If the percent slope is greater than 20%, supply copy of Site review from SWCD*)
- How much clearing of trees and shrubs will be done inside the Shore Impact Zone (SIZ)? NONE
(If vegetation will be cleared in the SIZ, supply copy of Site review from SWCD*)
- How will erosion be controlled during construction? HAY BALES IF NECESSARY
- What will be done after construction to control erosion? REPLANT GRASS

I have read the above and I understand the Natural Landscape Protection Plan as prepared. I hereby agree to implement this plan as part of the Land Use Permit.

X Robert Spodland Contractor 6/5/02 Missy 6/5/02
 Landowner Signature for owner Date Zoning Official Date

*The Aitkin County Soil and Water Conservation District (SWCD)
 130 Southgate Center, Aitkin MN 56431 - Telephone (218) 927-6565 or swcd@mlccmn.net

FIELD EVALUATION SHEET

PRELIMINARY EVALUATION DATE 6/4/02, FIELD EVALUATION DATE June 4 - 2002
PROPERTY OWNER: LARRY PIERCE
ADDRESS: 18049 - 360th St. CITY, STATE, ZIP: ACGREGOR, MN 55760
LEGAL DESCRIPTION: 50. 208 FEET OF WEST 208 FEET OF SW 1/4 OF SE 1/4
PIN# 30-0-0315-02 SEC 22 T 47 R 23 TWP NAME SPALDING
FIRE# LAKE/RIVER LAKE CLASS N/A OHWL FT.

DESCRIPTION OF SOIL TREATMENT AREAS

AREA #1 AREA #2 REFERENCE BM ELEV. 0 FT
DISTURBED AREAS YES NO YES NO REFERENCE BM DESCRIPTION
COMPACTED AREAS YES NO YES NO EXISTING PAD ELEVATION
FLOODING YES NO YES NO FOR HOUSE
RUN ON POTENTIAL YES NO YES NO
SLOPE % 2%
DIRECTION OF SLOPE North
LANDSCAPE POSITION Trees & Bush
VEGETATION TYPES Trees & Bush

DEPTH TO STANDING WATER OR MOTTLED SOIL: BORING# 1 72", 1A 72", 2 14", 2A 14"

BOTTOM ELEVATION--FIRST TRENCH OR BOTTOM OF ROCK BED: #1 -4.5 FT., #2 FT.

SOIL SIZING FACTOR: SITE #1 1.27, SITE #2 1.27

CONSTRUCTION RELATED ISSUES: CONSTRUCT NEW MANUFACTURED HOME ON STRUCTURE SLAB WELL & SEPTIC

IC# 1714 SITE EVALUATOR SIGNATURE: Dale Sandberg

SITE EVALUATOR NAME: Dale Sandberg TELEPHONE# 218-485-4058

BUG REVIEW DATE June 4 2002

Comments:

SOIL BORING LOGS ON REVERSE

APPROVED
ONSITE INSPECTION
NO ONSITE INSPECTION
SIGN RAC DATE 6/5/02

PROPERTY OWNER LARRY PIERCE
 PERMIT# _____ PIN# _____ TOWNSHIP SPADING FIRE# _____
 DESIGNER NAME Ralph Spadberg DATE June 4-02
 SIGNATURE: Ralph Spadberg LICENSE# 714
 DATE: June 4-02 SITE EVALUATION # 714

WATER USE APPLIANCES (CHECK ALL THAT APPLY)

CLOTHES WASHER YES WATER SOFTNER NO DISHWASHER YES WHIRLPOOL NO HUMIDIFIER NO
 NUMBER OF BEDROOMS 2 TYPE: 1 GARBAGE DISPOSAL: YES NO AIR TEST: YES NO
 WELL: DEEP (50'+) X SHALLOW _____ SETBACKS: TANK 10' DRAINFIELD 20' SEWER LINE 50'

FLOW

1. ESTIMATED 300 GPD OR MEASURED GPD 300
 2. SEPTIC TANK VOLUME 1000 GALLONS
 3. MINIMUM PUMP TANK VOLUME NONE GALLONS
 4. ALARM TYPE NONE

SOILS

1. DEPTH TO RESTRICTING LAYER 6' FEET
 2. MAXIMUM SYSTEM DEPTH (D-3) 3 FT OR _____ ELEV
 3. PERCOLATION RATE 3 MPI
 4. SOIL SIZING FACTOR 1.27 SQ FT/GPD

TRENCH BOTTOM AREA

1. 6 IN. OF ROCK OR GRAVELLESS: $A \times G$
 $= 300 \times 1.27 = 381$ SQ.FT.
 2. 12 IN. OF ROCK: $A \times G \times 0.8 = 300 \times 1.27 \times 0.8 = 305$ SQ.FT.
 3. 18 IN. OF ROCK: $A \times G \times 0.66 =$ _____ SQ.FT.
 4. 24 IN. OF ROCK: $A \times G \times 0.6 =$ _____ SQ.FT.

BED BOTTOM AREA (6 OR 12 INCHES OF ROCK)

SEEPAGE BEDS: $1.5 \times A \times G = 1.5 \times$ _____ SQ. FT.
 PRESSURE BEDS: $A \times G =$ _____ SQ. FT.

ROCK VOLUME IN CU FT

ROCK DEPTH BELOW PIPE 5 + 0.5 FT. $\times (H+L+M) \times 27 = 305$ CU FT.

ROCK VOLUME IN CU YDS

N. $305 \div 27 = 11.3$ CU YDS

ROCK WEIGHT

P.O. $\times 1.4 = 16$ TONS

SYSTEM LENGTH

BOTTOM AREA (H-K) 381 + TRENCH WIDTH 3' = 127 SQ. FT.

LAWN AREA

ELECT TRENCH SPACING, CENTER TO CENTER = 8 FT.
 MULTIPLY TRENCH SPACING BY LINEAL FEET R. $8 \times 127 =$
635 SQ FT OF LAWN AREA

APPROVAL: _____ DATE: _____

REMARKS: _____

EST. FLOW IN GALLONS/ DAY (GPD)			
NUMBER OF BEDROOMS	TYPE I	TYPE II	TYPE III
2	300	225	180
3	450	300	218
4	600	375	256
5	750	450	294
6	900	525	332
7	1050	600	370
8	1200	675	408

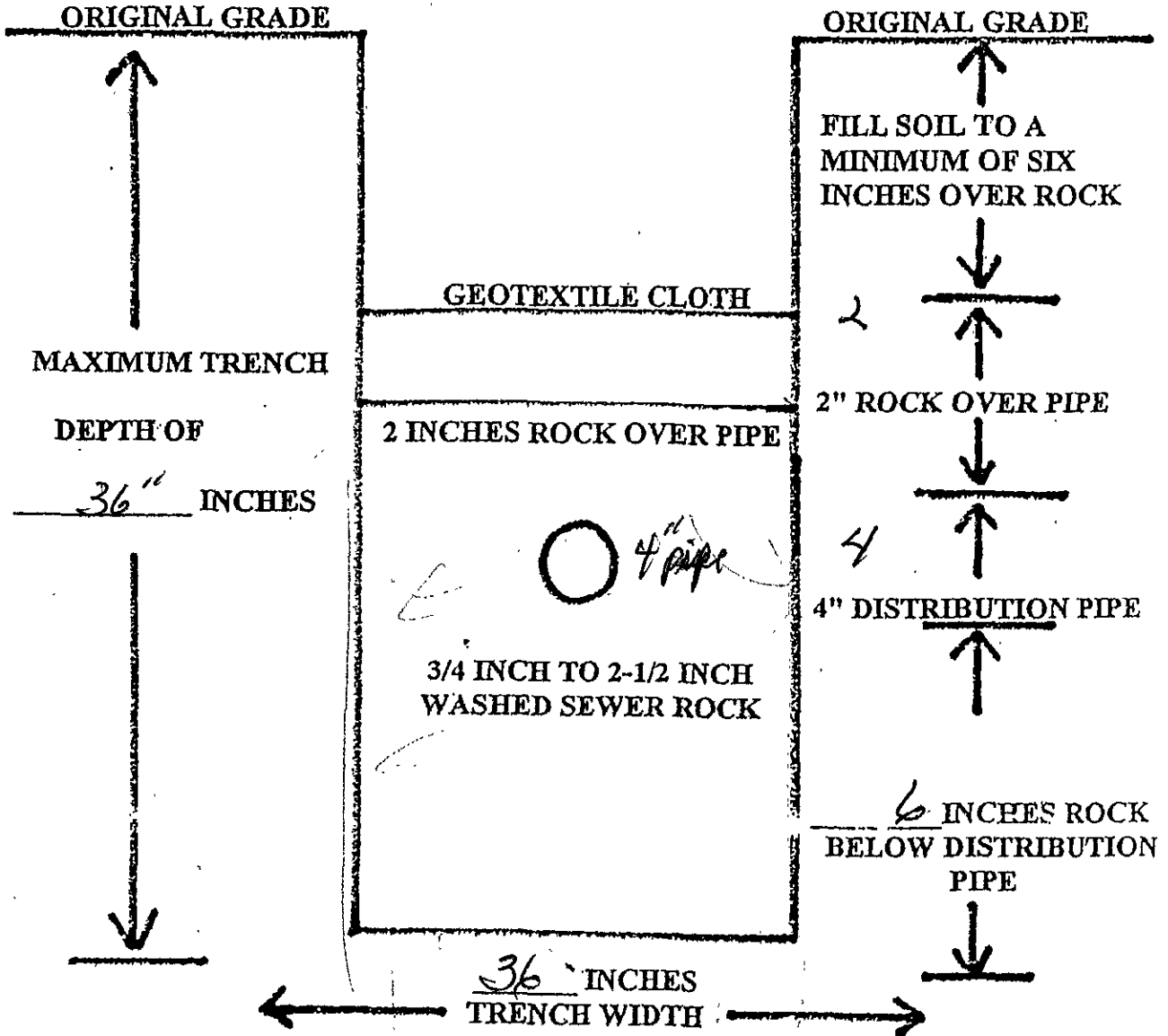
SEPTIC TANK CAPACITY		
NUMBER OF BEDROOMS	MINIMUM TANK CAPACITY GALLONS	MINIMUM CAPACITY GARBAGE DISPOSAL
2 OR LESS	1000	1500
3 OR 4	1000	1500
5 OR 6	1500	2250
7 OR 8	2000	3000
OVER 9	SEE FIG C-6	(x 1.5)

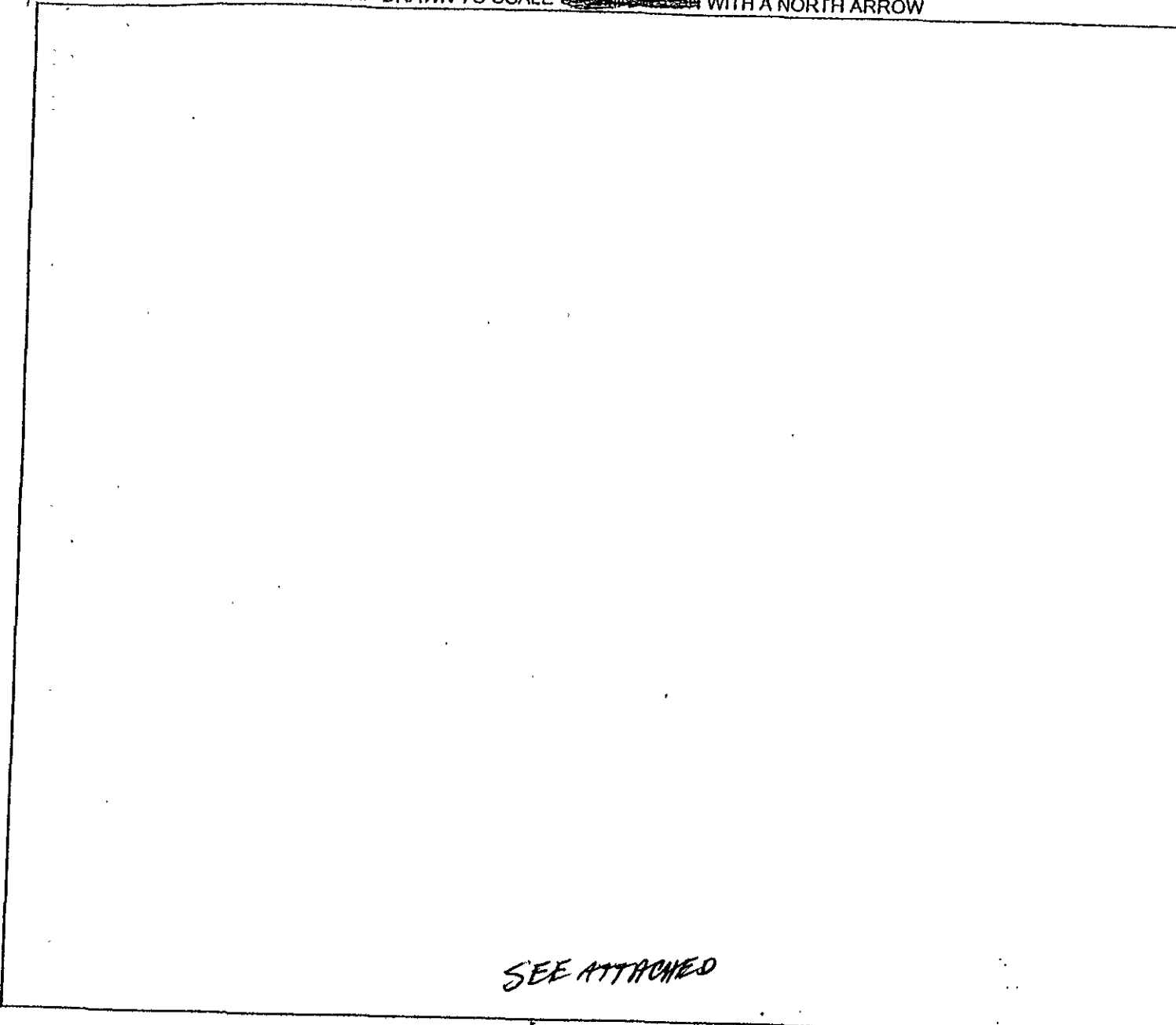
SIZING FACTORS			
PERC RATE PI	SOIL TEXTURE	SQFT GALLONS /DAY	GALLONS /DAY /SFT
< THAN 0.1	COARSE SAND	—	—
0.1 TO 5	SAND	0.83	1.20
0.1 TO 5	FINE SAND	1.67	0.60
6 TO 15	SANDY LOAM	1.27	0.79
16 TO 30	LOAM	1.67	0.60
31 TO 45	SILT LOAM	2.00	0.50
46 TO 60	CLAY LOAM	2.20	0.45
> THAN 60	CLAY	—	(0.24)

TRENCH CROSS-SECTION

FINISHED GRADE

8" INCHES OF BACKFILL OVER ROCK





SEE ATTACHED

CHECK OFF LIST--HAVE ALL OF THE FOLLOWING BEEN DRAWN ON THE MAP??.

SHOW EXISTING OR PROPOSED

- WATER WELLS WITHIN 100 FT OF TREATMENT AREAS
- PRESSURE WATER LINES WITHIN 10 FT OF TREATMENT AREAS
- STRUCTURES
- ALL SOIL TREATMENT AREAS
- HORIZONTAL AND VERTICAL REFERENCE
- POINT OF SOIL BORINGS
- LOT EASEMENTS
- DISTURBED/ COMPACTED AREAS
- SITE PROTECTION--LATHE AND RIBBON EVERY 15 FT
- ACCESS ROUTE FOR TANK MAINTENANCE

- LOT IMPROVEMENTS
- ALL ISTS COMPONENTS
- DIRECTION OF SLOPE
- ALL LOT DIMENSIONS

REQUIRED SETBACKS

- STRUCTURES
- OHWL
- PROPERTY LINES

COMMENTS:

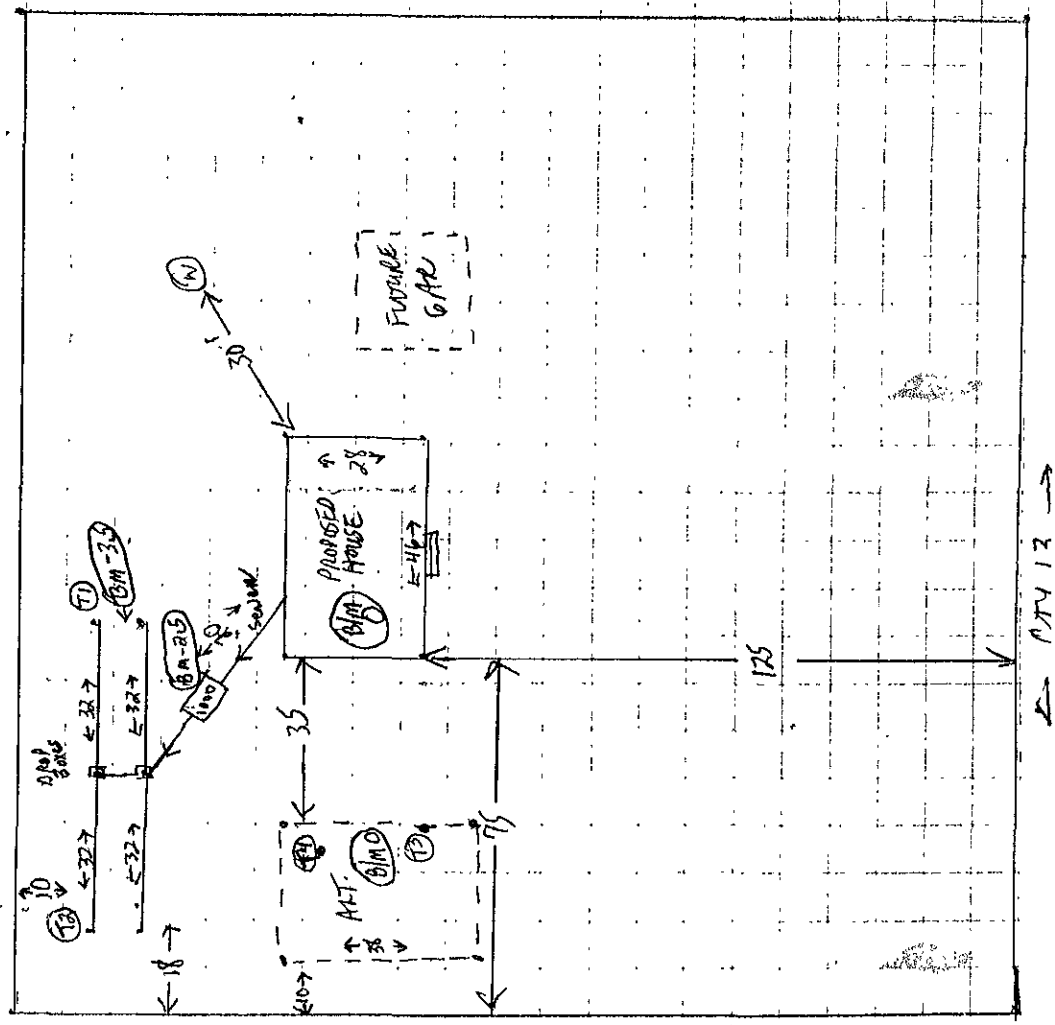
DESIGNER SIGNATURE Dale Sandberg
 LICENSE# 714

INDICATE ELEVATIONS

BENCHMARK House SLAB 0
 ELEVATION OF SEWER LINE @ HOUSE -1'
 ELEVATION @ TANK INLET -2.5'
 ELEVATION @ BOTTOM OF ROCK LAYER 4.5'
 ELEVATION @ BOTTOM OF BORING OR RESTRICTIVE LAYER +10'
 ELEVATION OF PUMP NONE
 ELEVATION OF DISTRIBUTION DEVICE +3.5'

DATE 6/4/02

LARRY RIERCE S. 208' OF N. 208' OF S.W. 1/4 OF SE 1/4 (1 AC)
 SITE PLAN - 1/4" = 10'
 SECT 22, T47, R23

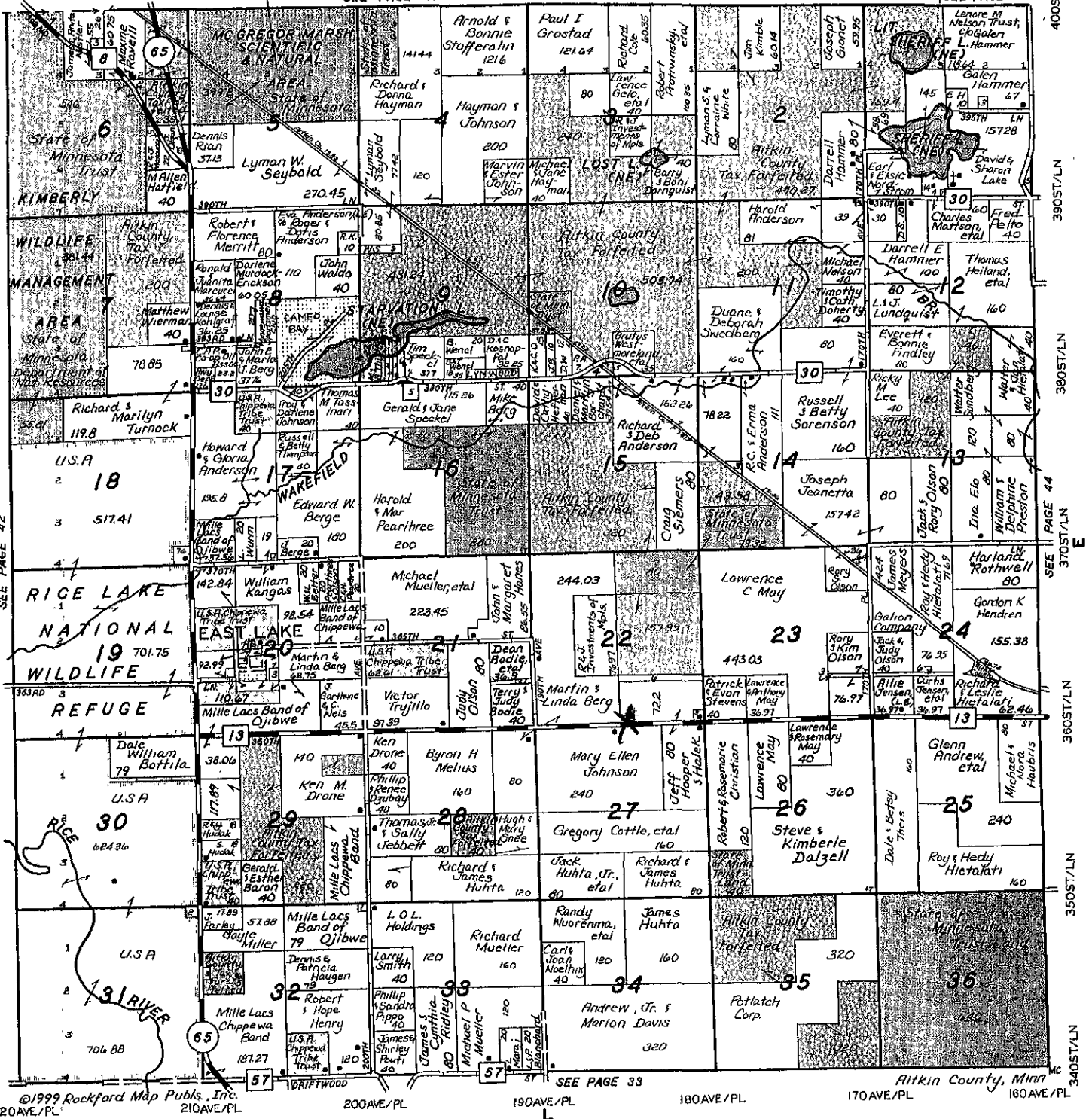


- (T1) 0-6" TOPSOIL 5YR 3/2
 6"-72" SANDWICH 5YR 5/4
 NO MOTTLING
- (T2) 0-6" TOPSOIL 5YR 3/2
 6"-72" SANDWICH 5YR 5/4
 NO MOTTLING
- (T3) 0-6" TOPSOIL 5YR 3/2
 6"-14" CLAY 5YR 5/4
 14" MOTTLING
- (T4) 0-6" TOPSOIL 5YR 3/2
 6"-14" CLAY 5YR 5/4
 14" MOTTLING

→ CITY 13 →

SEE PAGE 49

SEE PAGE 51



©1999 Rockford Map Pubs., Inc. SEE PAGE 33 Aitkin County, Minn. 220AVE/PL 210AVE/PL 200AVE/PL 190AVE/PL 180AVE/PL 170AVE/PL 160AVE/PL 340ST/LN 350ST/LN 360ST/LN 370ST/LN 380ST/LN 390ST/LN 400ST/LN

Morris - Morris

Certified Public Accountants
 PROFESSIONAL SERVICE AT REASONABLE RATES

(218) 927-4270

214 - 1st Avenue Northwest • Aitkin, Minnesota 56431
 DON MORRIS, CPA DALE MORRIS, CPA

CAPTRICO

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P.O. Box 400, Highway 210, McGregor, Minnesota 55760

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 Call Toll Free: (800) 810-7269
 Fax: (218) 768-2109

AITKIN COUNTY
CERTIFICATE OF COMPLIANCE/NOTICE OF NONCOMPLIANCE

This certificate of compliance/notice of noncompliance has been issued this _____ day of 7/18/02 to certify compliance/noncompliance with Aitkin County's Individual Sewage Treatment System and Wastewater Ordinance No.

1. The premises covered by this certificate are legally described as: _____

S. 208' of W 208' of SW 1/4 of SE 1/4

Section 22 Township 47 Range 23 Lake MA

PERMIT NO. 29231 Owner Name Jerry Pierce

Address Box 443 Mc Gregor, Mn. 55766 c/o BEI Classic Homes

Installer Name Dale Sandberg

Type of System Inspected Rock Trenches

The certificate of compliance/notice of noncompliance was based on, No 1 of the following:

1) Inspection of the installation or construction as in accordance with the above referenced permit and application design.

2) Review of as-built plans submitted in accordance with Subdivision 4.21 C. Of Aitkin County's Individual Sewage Treatment System and Wastewater Ordinance No. 1.

If the above permitted individual sewage treatment system is in noncompliance with Aitkin County's Individual Sewage Treatment System and Wastewater Ordinance No. 1, then the following shall serve as a Notice of Violation:

1) Statement of the findings of fact through inspections or investigations: _____

2) List of specific violations of Ordinance: _____

3) Requirements for correction or removal of violations: _____

4) Time schedule for compliance: _____

Failure to correct or remove the above violations will result in this matter being turned over to the Aitkin County Attorney's Office for further legal action which may result in revocation of licenses or registrations, fine's and/or imprisonment.

INSPECTOR SIGNATURE 

2 9231



29231



INDIVIDUAL SEWAGE TREATMENT SYSTEM INSPECTION FORM AITKIN COUNTY, MINNESOTA

Township Spalding Date of Inspection 7/17/02 Permit Number 29231
 Owner Larry Pierce Parcel Number 30-0*037502
 Project Address S 208' of W 208' of SW 1/4 of SW 1/4 Installer Dale Sandberg
 City _____ Zip Code _____ New Repair

DIST. or DROP BOX & TYPE 4 Tuff

SETBACKS:

Buildings to tank(s) 15'
 Buildings to drainfield 60'
 Well(s) 50' or 100' 100'
 Lake/Creek/Wetland NA

SEPTIC TANKS:

Liquid capacity 1250
 Manufacturer & type pre-cast Jac.
 Type of baffle plastic
 Inspection pipes 1-4"
 Manholes access 1
 No. & height of risers 12"

TRENCHES, BEDS, OR GRAVELLESS LEACHFIELD:

Trench depth 24"
 Trench length 4 x 30'
 Trench bottom width 3'
 Trench bottom level yes
 Trench spacing 6'
 Drainfield rock below pipe 6"
 Size of gravelless pipe _____
 Depth of backfill 12"
 Absorption area: square feet 381
 lineal feet 128

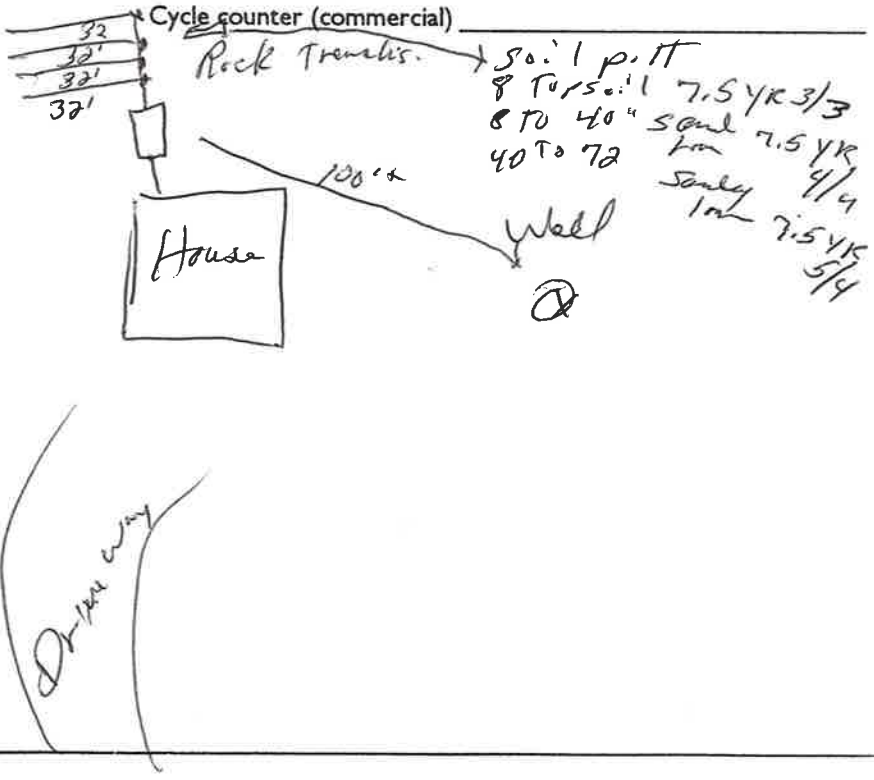
MOUNDS:

Percent slope _____
 Upslope dike width _____
 Downslope dike width _____
 Sideslope dike width _____
 Drainfield rock below pipe _____
 Depth of sand below rock _____
 Perforation size & spacing _____
 Pipe size & spacing _____
 Dimensions of rock bed _____
 Dimensions of sand base _____
 Final cover _____

PUMPS:

Tank capacity _____
 Tank manufacturer & type _____
 No. & height of risers _____
 Pump manufacturer & model# _____
 Horsepower & GPM _____
 Feet of head _____
 Cycles per day _____
 Gallons per cycle _____
 Size of discharge line _____
 Type of electrical hookup _____
 Type & location of alarm _____

DRAWING OF SYSTEM



Inspector's Comments _____

Corrective Action Required _____

Inspector's Signature [Signature] Installer's Signature _____
 White-County Yellow-Applicant Pink-Installer