INDEMNIFICATION AGREEMENT FORM

that I/We are aware that by installing our legally described as:	do hereby acknowledger own septic system on our own property
31206 374th place	Aitkin, MN 56431
40-63-004-04	
Permit Number 43590	-
I/We are taking the risk of damaging out conforming septic system may not be abl an unbuildable lot. I/we may have to instreatment.	e to be installed and I/We may end up with
I/We further agree to hold Aitkin County and charges that may be incurred by Aitkin to and comply with the provisions of the A System and Wastewater Ordinance No.1.	n County due to my/our failure to conform litkin County Individual Sewage Treatment
(Property Owner)	JAMIE ANN OESTREICH NOTARY PUBLIC - MINNESOTA My Comm. Exp. Jan. 31, 2020
(Property Owner)	
Subscribed and sworn to me this Day of Notary	
Approved(Department Representative)	, Dated

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