

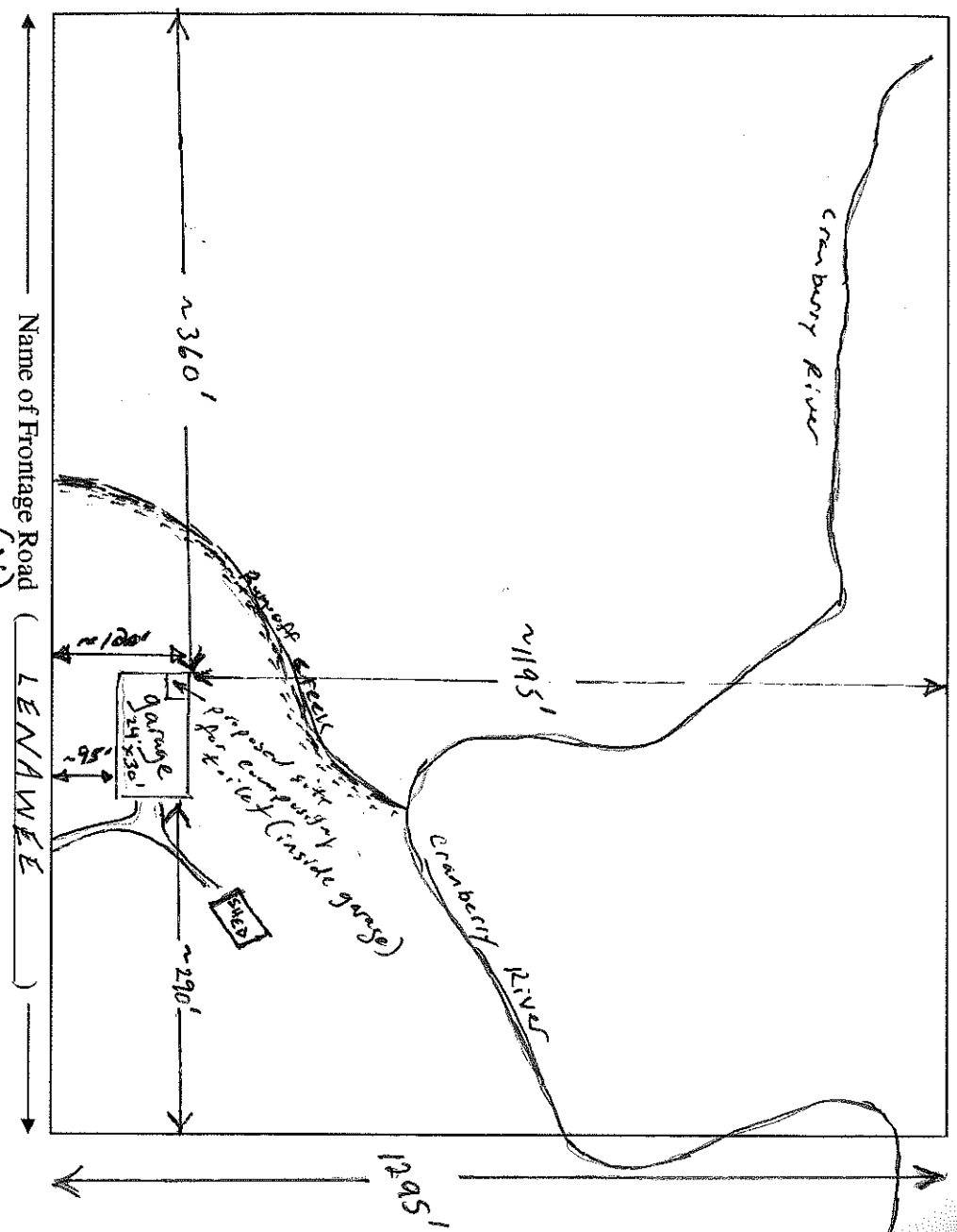


RECEIVED
BAYFIELD COUNTY SANITARY PERMIT APPLICATION

I. APPLICATION INFORMATION Bayfield Co. Zoning Dept. Soil Test		County Permit No: 13-0172	
(Please Print All Information)			
Property Owner's Name Scott DAVIS		County: Bayfield	
Address of Property 84005 Lenawee Rd. Herbster		Property Location: NE 1/4 NW 1/4 S 28 T 58 N R 7 E (or W)	
Property Owner's Mailing Address 12990 C.R. 18		Township Oliver	
City, State Hibbing, MN	Zip Code 55746	Phone Number 218-969-3551	Lot #
II. TYPE OF BUILDING: (Check One)			Block #:
<input type="checkbox"/> State Owned			Subdivision Name or CSM #:
<input type="checkbox"/> Public (Explain the use/purpose _____)			Parcel ID
<input checked="" type="checkbox"/> 1 or 2 Family Dwelling - No. of Bedrooms 0			Tax Number(s): 64-64-2-50-07-26-2 of 600-2000
III. TYPE OF PERMIT: (Check only one box on line A. Check box on line B, if applicable)			
A) <input checked="" type="checkbox"/> New		<input type="checkbox"/> Replacement	<input type="checkbox"/> County Private Interceptor
1. <input type="checkbox"/> Reconnection		2. <input type="checkbox"/> Repair	3. <input type="checkbox"/> Revision
** Transfer of Owner (List Previous Owner below)			
B) <input type="checkbox"/> A Sanitary Permit was previously issued. Previous Permit Number: _____ Date Issued: _____			
IV. TYPE OF NON-PLUMBING SYSTEM: (Check One) * Replacements need previous permit number and date filled out above			
<input type="checkbox"/> Pit Privy			
<input type="checkbox"/> Vault Privy (Vault size: _____ gallons or _____ cubic yards)			
<input type="checkbox"/> Portable Privy (Temporary Use Only)			
<input checked="" type="checkbox"/> Composting Toilets			
<input checked="" type="checkbox"/> Incinerating Toilet <i>Incinerating element in it.</i>			
V. ABSORPTION SYSTEM INFORMATION:			
1. Gallons Per Day <input type="checkbox"/>	2. Absorp. Area Required (Sq.Ft.) <input type="checkbox"/>	3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq.Ft.)
5. Perc. Rate (Min. Inch)	6. System Elev.(Feet)	7. Final Grade Elev. (Feet)	
VI. TANK INFORMATION:			
Septic Tank or Holding Tank	Capacity	Total Gallons	# of Tanks
	New Tanks	Existing Tanks	Manufacturer's Name
Lift Pump Tank / Siphon Chamber			
VII. RESPONSIBILITY STATEMENT:			
I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.			
Plumber's / Owner's Name: (Print) Scott DAVIS		Plumber's / Owner's Signature: (No Stamps) <i>Scott Davis</i>	
Plumber's Address: (Street, City State, Zip Code) 12990 C.R. 18 Hibbing, MN 55746		Home Phone: 218-969-3851	Business Phone: 218-362-6255
VIII. COUNTY / DEPARTMENT USE ONLY			
<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Sanitary Permit/Transfer Fee: \$150	Date Issued: 7-8-13
<input type="checkbox"/> Owner Given Initial	<input type="checkbox"/> Adverse Determination	4-18-13	Issuing Agent's Signature / Date: <i>[Signature]</i> 7-8-13
IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:			
Rec'd for Issuance			
JUL 08 2013			
Secretarial Staff			



(E)



**IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-7 COMPLETELY**

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
3. Show the location of the well, septic tank and drain field. N/A
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:

- | | | |
|---|--|-----|
| ✓ a. Building to all lot lines | ✓ a. i. Privy to building | N/A |
| ✓ b. Building to centerline of road | ✓ a. j. Privy to lake, river, stream or pond | |
| ✓ c. Building to lake, river, stream or pond | ✓ a. k. Drain field to closest lot line | |
| approx. 400' -> c. | ✓ a. l. Drain field to building | |
| ✓ d. Septic/holding tank to closest lot line | ✓ a. m. Drain field to well | |
| ✓ e. Septic/holding tank to building | ✓ a. n. Drain field to lake, river, stream or pond | |
| ✓ f. Septic/holding tank to well | ✓ a. o. Well to building | |
| ✓ g. Septic/holding tank to lake, river, stream or pond | | |
| ✓ h. Privy to closest lot line | | |