

ZONING PERMIT APPLICATION

FULL NAME _____ TELE # _____
 MAIL ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 911 ADDRESS OF PROPERTY _____
 CITY _____ STATE _____ ZIP _____
 TOWNSHIP _____
 LEGAL DESCRIPTION _____
 SECTION _____ TOWNSHIP _____ RANGE _____

OFFICE USE ONLY			
DATE _____	APPROVE / DENY		
PERMIT# _____			
PARCEL# _____			
RECEIPT# _____			
CONFORMING SEPTIC			
YES	P#	NO	NEW

(circle) RESIDENTIAL COMMERCIAL ACCESSORY NEW BUILDING ALTERATION

BUILDING CONTRACTOR AND LICENSE NUMBER: _____
 SIZE OF ALL BUILDINGS COVERED BY THIS APPLICATION _____

COMMENTS: _____

DESIGNER: _____
 DATA FOR SEWER CONSTRUCTION: INSTALLER _____ #BEDROOMS/GPD _____

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.

X _____
 SIGNATURE APPLICANT/AGENT

DO NOT WRITE BELOW THIS LINE

ZONING DISTRICT & FLOOD PLAIN

ZONING DISTRICT _____
 LAKE/STREAM/RIVER NAME _____
 LAKE/RIVER ID NUMBER _____
 LAKE/RIVER/STREAM CLASSIF. _____
 PARCEL LOCATED IN FLOOD PLAIN? Y ___ N ___
 10/100-YR. FLOOD ELEVATION _____
 LOWEST FLOOR ELEVATION _____
 ELEV. CERTIFICATE REQUIRED Y ___ N ___
 BEFORE CONSTRUCTION Y ___ N ___
 AFTER CONSTRUCTION Y ___ N ___

STRUCTURE SETBACK DISTANCE REQUIREMENTS
 (Measure from eaves or overhang)

OHW TO LAKE/RIVER/STREAM _____
 PROPERTY LINE SETBACK (10-ft. / 20-ft.) _____
 SETBACK TO ROAD R-O-W (30-ft. Twp. / 50-ft. Co., State, Fed.) _____
 SETBACK TO BLUFF (30-ft.) _____

SEPTIC SYSTEM SETBACK DISTANCES

SETBACK TO STRUCTURES – 10-ft. Tank / 20-ft. Drainfield _____
 OHW TO LAKE/RIVER _____
 PROPERTY LINE SETBACK – 10-ft. _____
 SETBACK TO ROAD R-O-W – 10-ft. _____

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

SOIL BORINGS _____ SEPTIC DESIGN _____ GARBAGE DISP/HOT TUB
 SSF _____ DEPTH TO RESTRICTING LAYER _____ YES ___ NO ___
 MIN. SIZE SEPTIC TANK _____ MIN. SIZE PUMP TANK _____
 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: _____

EXPIRES IN ONE YEAR • Aitkin County Zoning
 Courthouse – 209 2nd St. NW. Room 118 • Aitkin, Minnesota 56431
 Telephone 218/927-7342

\$ _____ FEE RECEIVED BY _____ DATE _____

WHITE - County

YELLOW - Applicant

PINK - Township