



ENVIRONMENTAL SERVICES
88 SOUTH PARK AVENUE
LE CENTER, MINNESOTA 56057
DIRECT DIAL: 507-357-8538 FAX: 507-357-8541
Zoning Permit Application - Septic

I. Landowner(s):

Name:		
Mailing Address:		
City:	State:	Zip:
Telephone Number:		

II. Parcel Information:

Parcel Number:		Township Name:	
Section:	Township:	Range:	
Property Address:			
City:	State: MN	Zip:	

III. Septic Designer Information:

Business Name:		
Mailing Address:		
City:	State:	Zip:
Telephone Number:		License Number:

IV. Septic Installer Information:

Business Name:		
Mailing Address:		
City:	State:	Zip:
Telephone Number:		License Number:

V. System Description:

Please Circle: Type: _____

Number of Bedrooms: _____ Design Flow: _____

Domestic Other Establishment: Commercial Industrial Cluster

Mound At-Grade Trenches Seepage Bed

Type of Distribution Media: _____

Public Domain or Proprietary Product: _____

VI. Fees:

DESCRIPTION	COST
Type I	\$300
Type II	\$200
Type III	\$400
Type IV	\$500
MSTS	\$1,000 plus \$100/house
Commercial Establishment	Double fee of Type I, II, III, or IV
Not ready for inspection/Soils not flagged	\$50
After-The-Fact	Doubled

VII. Procedure:

- The Environmental Services Department has 15 calendar days of receipt of a completed septic design in which to review it. The Department will contact the septic designer for further information and/or submittals pertaining to the design. Any changes must be done by the septic contractor, in writing and on Departmental approved forms, and re-submitted.
- The landowner will be notified by letter when the septic design has been approved. The septic permit must be made in person by the landowner or septic contractor. Permits and fees will not be accepted by mail.
- The Environmental Services Department's hours of operation are Monday through Thursday from 8:00 AM to 4:30 PM and Fridays from 8:00 AM to 4:00 PM.

VIII. Signature:

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge.

Designer's Signature

Date

OFFICE USE ONLY

Date Received:	Present Zoning Classification:
60 Day:	Lake:
Other Water:	Lake Classification:
FEMA Panel #:	Flood Zone
Permit Number:	Fee: \$ _____ ATF

£ Application complete
£ Monitoring & Mitigation Plan
£ Operating Permit

£ Septic Design
£ Maintenance Contract
£ Other _____

£ Management Plan
£ Site Sketch

Environmental Services Staff Signature

Certification Number

Date