



WASHINGTON COUNTY, MINNESOTA
Department of Public Health

LAKELAND SHORES CITY
SEWAGE PERMIT

PERMIT NUMBER 3191005

Owner: FERGUSON STEVE BARR
231 E CHESTNUT STREET
STILLWATER MN 55062

SEWAGE TREATMENT APPLICATION	90.00
SEWAGE TREATMENT SYSTEM PERMIT	90.00
BUILDING PERMIT FEE	962.50
BUILDING PERMIT PLAN CHECKING	191.25
BUILDING PERMIT ST. SURCHARGE	38.75
Total Fees :	1752.50
Total Paid :	.00
Total Due :	1752.50

31-91005

PERMISSION IS HEREBY GRANTED

To execute the work specified in this permit on the following described property upon express condition that said persons and their agents, employees and workmen shall conform in all respects to the provisions of the Building Code, and/or Ordinances. This permit may be revoked at any time upon the violation of any of the provisions of said code and ordinances.

Project Address : 18249 2ND ST. LAKELAND SHORES MN 55043

Flow Capacity: 270 Gal/Day
Soil Conditions: Depth to Restriction 26 Inches Percol Rate 15 Min/Inch

Soil Treatment Area Type:
In Ground In Fill Bed Drain Field

Authorized Work / Special Conditions:

- Install individual sewage treatment system as per approved design in area tested and shown on site plan.
- THIS SYSTEM MUST BE INSTALLED BY A CERTIFIED/LICENSED SEWAGE TREATMENT SYSTEM INSTALLER HOLDING A CURRENT LICENSE WITH WASHINGTON COUNTY. (A list of licensed installers is available at your request.)
- Water use meter required. Daily flow rate not to exceed 270 gallons.

** Permit Expiration Date : Sewage Treatment : 12/25/91

A CERTIFICATE OF OCCUPANCY MUST BE REQUESTED AND ISSUED PRIOR TO USE OR OCCUPANCY OF WORK PERMITTED BY A BUILDING PERMIT.

** This permit shall expire and be null and void if the work authorized by the Building Permit is not commenced within 60 days of the date of issuance or if work is abandoned or suspended for a period of 120 days. Term of the Building Permit is 12 months from date of issue. Term of sewage treatment permit is 6 months from date of issue.

Penalty for violation of any of the provisions of building code: Fine not to exceed five-hundred dollars (\$500.00) or imprisonment for not more than ninety (90) days, or both.

Permit Issue Date 6/25/91 Code Enforcement Officer

FILE

INSPECTION RECORD

BUILDING	DATE	INSP.	COMMENTS
Foundation			
Foundation Wall			
Plumbing (Groundwork)			
Gas Piping (Groundwork)			
Rough Plumbing			
Rough Gas Piping			
Rough Heating and Ventilation			
Framing			
Insulation			
Fireplace			
Wallboard or Lath and Plaster			
Final Building			
Final Plumbing			
Final Gas Piping			
Final Heating and Ventilation			

SEWAGE TREATMENT SYSTEM	DATE	INSP.	COMMENTS
Installation	8-30-91	AB	Tank Size: 1000 Treatment Area: 360
As Built			Installer: Jacobsen Exec

WELL	DATE	INSP.	COMMENTS
Installation			

Pre-Grout Nitrate Sample: _____ Owner Acceptance: _____

Well Record Received: _____ Sample Results Received: _____

NOTES:

INDIVIDUAL SEWAGE TREATMENT SYSTEM MINIMUM SPECIFICATIONS SHEET

NAME: FIRSTAR BRANCH BARN

ADDRESS AND/OR LEGAL DESCRIPTION: LAKELAND SHEDS, MINNESOTA

WASTEWATER FLOW

Estimated 270 gal/day, or
Measured _____ gal/day

Spacing of trenches 7.5 ft oc
Distribution (check one):

drop box
 pressurized laterals - complete
PRESSURE DISTRIBUTION SYSTEM section below

SEPTIC TANK

Volume 1000 gal

BED

Minimum depth of bed _____ inch
Maximum depth of bed _____ inch
Bottom area for bed having 12 inch
of rock below the distribution pipe
_____ sq ft

LIFT STATION

Volume _____ gal

Pump:

delivery rate _____ gal/min
total head _____ ft
discharge per pumping event _____ gal
Inside diameter of pressure line from pump
to treatment area _____ inches

Bed Width _____ ft
Bed Length _____ ft

SOIL

Depth to restricting layer 260"
Percolation rate:
_____ min/in at 12 inch depth
_____ min/in at 24 inch depth
6 min/in at 60 inch depth
Land Slope -0.5 %

MOUND

Bottom area for bed having 9 inch of rock
below the distribution pipe _____ sq ft
Bed Width _____ ft
Bed Length _____ ft
Upslope sand base depth _____ ft
Upslope dike width _____ ft
Downslope sand base depth _____ ft
Downslope dike width _____ ft

DRAINFIELD TRENCHES

Minimum depth of trench 15 inch
Maximum depth of trench 24 inch
Bottom area for trenches having 12
inch of rock below the distribution pipe
360 sq ft
Trench width .3 ft
Total trench length 60 ft
Number of trenches 2

PRESSURE DISTRIBUTION SYSTEM

Inside diameter of manifold pipe _____ in
Perforated lateral
inside diameter _____ in
length _____ ft
number _____
spacing _____ in oc
Perforation:
diameter _____ in
spacing _____ in oc

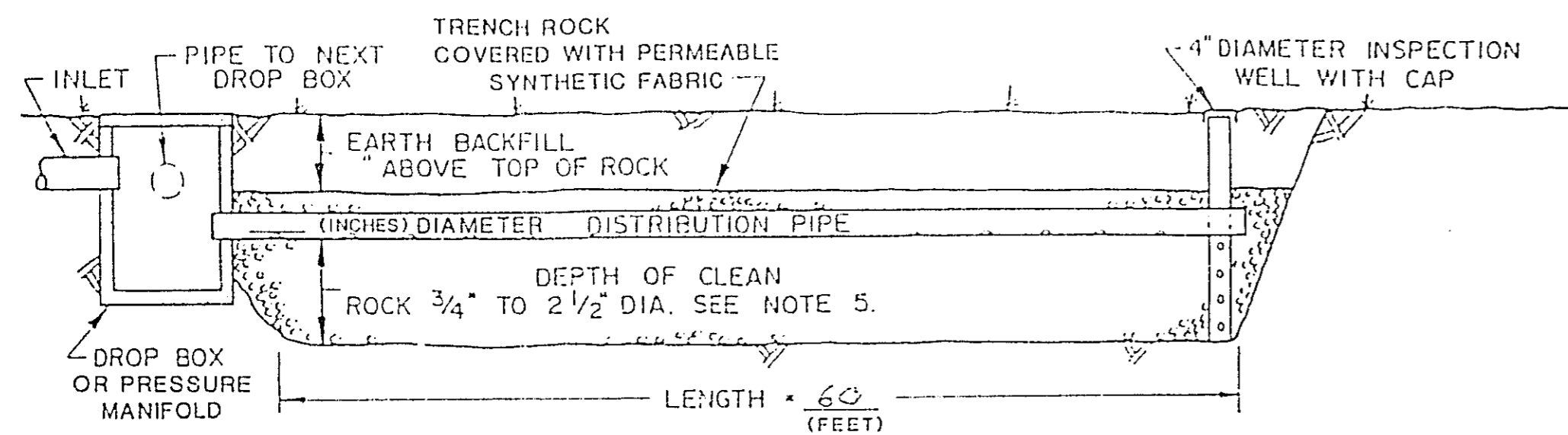
LAYOUT (Site Plan)

1. Use an appropriate scale and indicate direction by use of a north arrow.
2. Show pertinent property boundaries, rights-of-way, easements, etc.
3. Show location of house, garage, driveway and all other improvements existing or proposed.
4. Show location and layout of sewage treatment system including tanks, trenches, etc.
5. Show location of water supply well.

Specifications and layout have been designed by LEROY NYHUS, P.E. Date 5-2-91
MINN. REG. 10031

Minnesota Pollution Control Agency Certification No. _____ Exp. Date _____

DRAINFIELD TRENCH

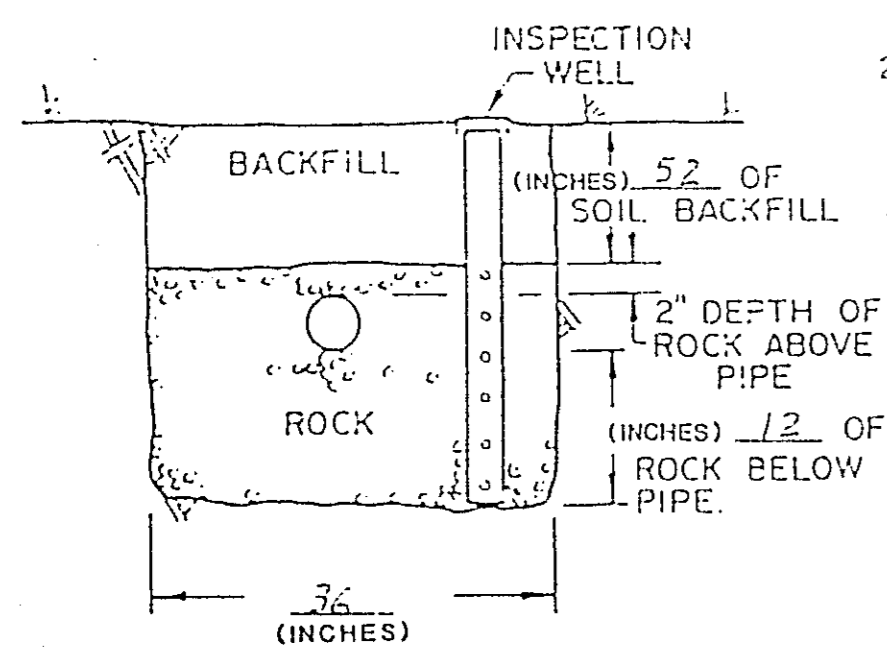


NOTES: 1. BOTTOM OF TRENCH MUST BE LEVEL. TOP OF TRENCH ROCK MUST BE LEVEL.

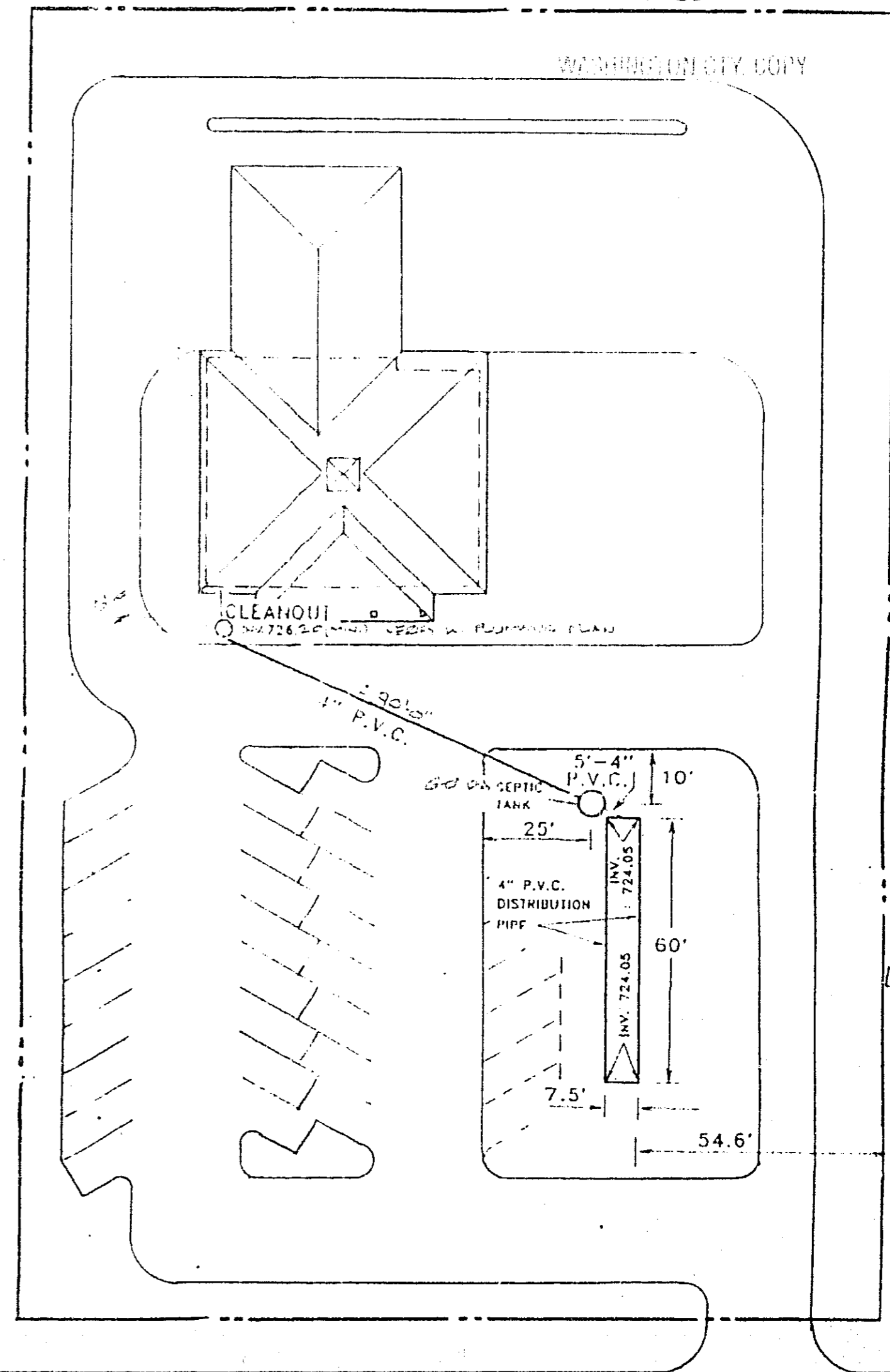
2. SLOPE ON DISTRIBUTION PIPE IS LEVEL

3. DISTRIBUTION PIPE CAN BE PERFORATED PLASTIC INSTALLED WITH ONE ROW OF HOLES ALONG THE PIPE BOTTOM. PIPE MUST HAVE A BEARING STRENGTH OF AT LEAST 1000 LB/FT.

4. EXCAVATE TRENCHES ONLY WHEN THE SOIL MOISTURE CONTENT DOES NOT EXCEED THE PLASTIC LIMIT AND IN A MANNER THAT LEAVES THE TRENCH BOTTOM AND SIDEWALLS IN A NATURAL, UNSMEARED, UNCOMPACTED CONDITION.



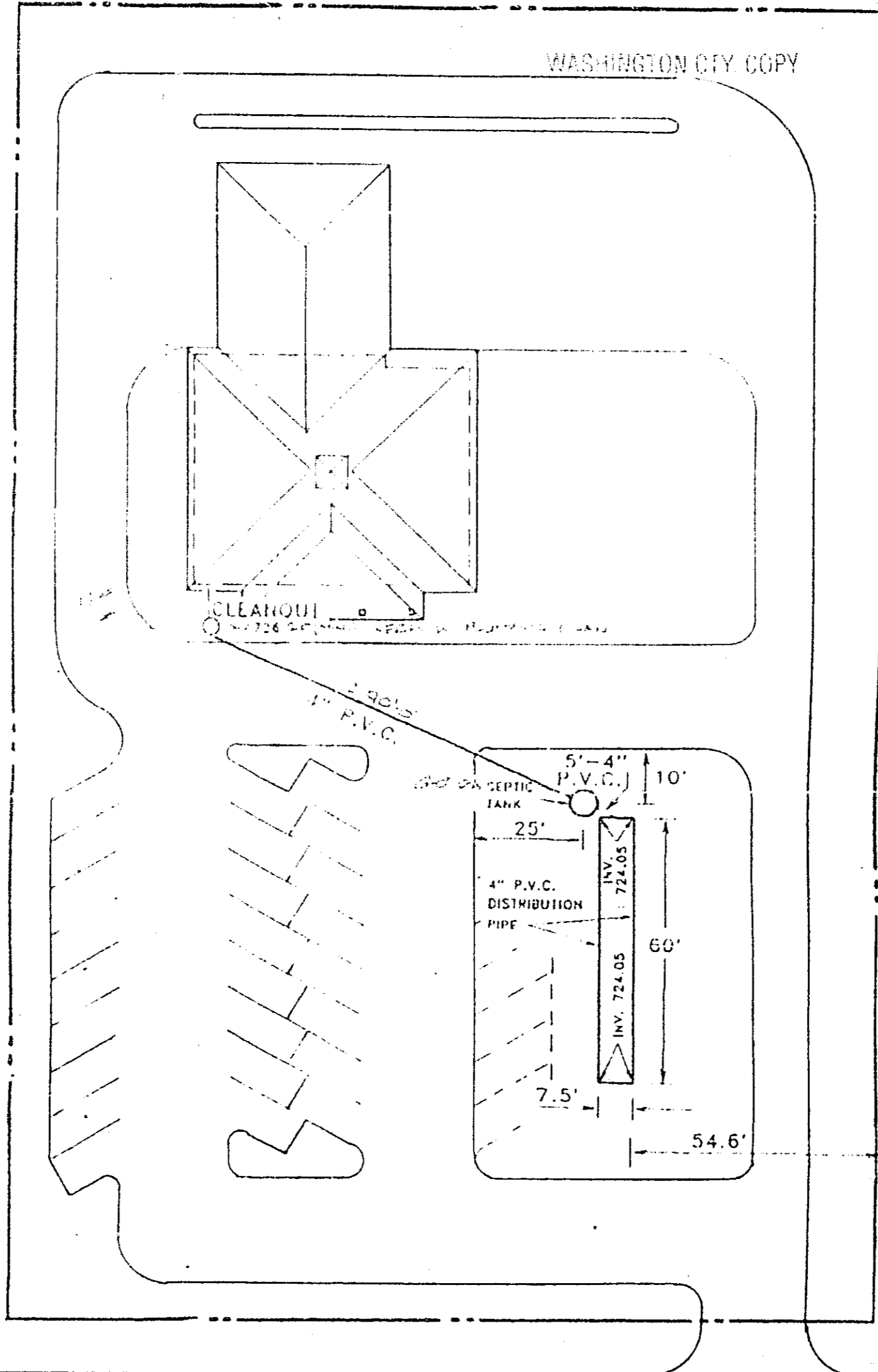
PERMIT # 31 9105
 CONDITIONALLY APPROVED
 Planned 6-27-91



16544
 83'

PERMIT # 51 91005
CONDITIONALLY APPROVED
Planned 6-27-91

WASHINGTON C.F.Y. COPY



16544
83' +
arrow

SEPTIC SYSTEM PLAN

SCALE: 1"=30'

NORTH



APPLICATION FOR PERMIT TO INSTALL SEWAGE TREATMENT SYSTEM

WASHINGTON COUNTY PUBLIC HEALTH
ENVIRONMENT AND LAND USE DIVISION
14900 - 61ST STREET N., P.O. BOX 8
STILLWATER, MN 55082-0008
(612) 430-6708

Application Fee - \$90.00 _____
Permit Fee - \$90.00 _____
Additional Reviews - \$25.00/hr. (1 hr. min.) _____
Subdivision Fee - \$100.00 + \$50.00/lot _____

Application Number **31-91005**

Legal Description and Parcel Identification Number
LOT 3, 4, 5 & 6, Block 10, Assumption City

Applicant Mailing Address City Zip Phone
LEROY NORDEN FOR LIBERTY FINANCIAL BANK, MENNONGA, MN 56551 1-800-246-5036

Owner (if different from applicant) Mailing Address City Zip Phone
LIBERTY FINANCIAL BANK, TELEGRAPH CHEROKEE, STILLWATER, MN 55082

Use of Building: BANK Number of Bedrooms or Gallons Per Day: _____

Check the following fixtures which are or will be installed:
Garbage Disposal _____ Recreational Bathing Facility (Jacuzzi, hot tub, etc.) _____

Type of Work: New Alteration Repair Approval Only

Has site previously been reviewed by Washington County? No Yes
(If previously approved, attach letter of approval) Approved Denied

The following exhibits are required as part of this application and shall be attached hereto: Percolation Test Logs; Soil Boring Logs; Site Plan drawn to scale showing location of buildings, lot lines, percolation test holes, soil boring holes, proposed location of system and well; 2 copies of the System Design; and 1 copy of the Final Building Plan. The house and the drainfield areas must be staked. Improper or inadequate test or information will result in delays in processing.

Agreement: The undersigned hereby makes Application for Permit to Install or Extend Sewage Treatment System herein specified, agreeing that all such work shall be done in strict accordance with ordinances and regulations of the County of Washington, Minnesota. Applicant agrees that the Site Plan, Sketches and Design submitted herewith, and which are reviewed by the Washington County Building Official or his agent, together with any requirement and/or restriction made necessary by conditions peculiar to a particular location, shall become a part of the permit. Applicant further agrees to provide access, at reasonable times, to the Building Official or his agent for the purpose of performing inspections required and that no part of the system shall be covered until it has been inspected and accepted. APPLICATION IS FOR AN INSTALLATION AT A SPECIFIC LOCATION; ANY DEVIATION FROM THE APPROVED LOCATION WILL VOID THE PERMIT. It shall be the responsibility of the applicant for the permit to notify the Office of the Building Official that the installation is ready for inspection.

LeRoy Norden FOR LIBERTY FINANCIAL BANK 5-2-91
Signature of Applicant Date

Washington County does not discriminate on the basis of race, color, national origin, sex, religion, age or handicapped status in employment or the provision of services.

FOR OFFICE USE ONLY:

Reviews: Planner _____ Inspector _____ Date _____

Site Evaluation:
Soil Boring Evaluation: Depth of Water Table, Seasonal Water Table (Mottled Soil), Impervious Layer or Bedrock: _____

Soils Map Data: _____	Percolation Test Evaluation: _____					
Setbacks:	Required (circle)					Actual
Well (including adjacent property)	50'	75'	100'	150'		
Wetland, Pond, Lake, Stream, River, or Bluffline	20'	40'	75'	100'	150'	

Conclusions: Site Suitable: _____ Site Unsuitable: _____ Additional Tests Required: _____ Verify Use: _____

NOTES:

NYHUS ENGINEERING
2745 WINNETKA AVE. N., SUITE 243
P.O. BOX 27100
GOLDEN VALLEY, MN 55427

JUN 11 1991

June 5, 1991

Washington County Public Health
Environment and Land Use Division
14900 - 61st Street N., P.O. Box 6
Stillwater, MN 55082-0006

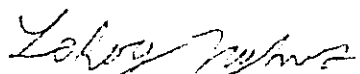
Re: FIRSTAR Branch Bank

Gentlemen:

Enclosed is the application for a permit to install a private sewage treatment system. The site plan showing the system will be submitted with the building plans.

Please call me at 1-800-446-5038 if you have any questions or need additional information.

Sincerely,
NYHUS ENGINEERING


LEROY NYHUS, P.E.

copy to: Dovolis Johnson & Ruggieri



1902 SOUTH GREELEY STREET

439-5410 Fax # 439-8555

**GEORGE W. OLSEN
CONSTRUCTION CO., Inc.**

BOX 20

STILLWATER, MINNESOTA 55082-0020

January 3, 1992

31-91005

Jacobsen Removal
3175 Spruce St.
St. Paul, MN 55117

Attn: Tom Dreslar

Re: Firstar Bank
Lakeland Shores, MN

Dear Tom:

As per attached letter from Washington County (Attn: Allan Goodman).

Be sure to submit "as built" dwgs to Washington County by no later than Friday,
January 10, 1992.

Also submit one (1) set of "as built" dwgs to GWO office.

GWO can Xerox your "as built" dwgs, if required.

If you have any questions, call Dick Olsen @ 439-5410.

Yours very truly,

GEORGE W. OLSEN CONSTRUCTION CO., INC.

Dick Olsen

DO/mw

Encl:

CC: Terry Johnson
Rod Hofland
Polly Harrison
Scott Nelson
Allan Goodman



WASHINGTON COUNTY

DEPARTMENT OF PUBLIC HEALTH

GOVERNMENT CENTER
14900 61ST STREET NORTH, P.O. BOX 6 • STILLWATER, MINNESOTA 55082 0006
Office (612) 430-6655 Facsimile Machine (612) 430-6739
Code Enforcement Office: (612) 430-6656 or (612) 430-6708

Mary Luth
Public Health Director

Rose Green
Office Manager

Doug Ryan
Environment/Land Use
Division Manager

Karen Zoloznak
Community Health
Division Manager

December 31, 1991

RECEIVED

DEC 31 1991

S.W.O.

Jacobsen Excavating
Attn: Tom Dreshar
3173 Spruce Street
Little Canada, MN 55117

Dear Mr. Dreshar:

We have contacted your office several times by telephone and left messages to submit an as-built drawing to us for the Firststar Bank at 16540 2nd St. S. in City of Lakeland Shores.

We cannot issue the Certificate of Occupancy for the Firststar Bank Building until we receive the as-built drawing from you.

Please submit the as-built immediately.

A handwritten signature in cursive script that reads "Allan R. Goodman".

Allan R. Goodman
Building Official

ARG/sfw

cc: Firststar Bank
George Olsen Construction Co.



EQUAL EMPLOYMENT OPPORTUNITY / AFFIRMATIVE ACTION

**AS-BUILT REPORT
INDIVIDUAL SEWAGE TREATMENT SYSTEM**

Washington County Code Enforcement
14900 61st Street N.
Stillwater, MN 55082
612/430-6708 or 612/430-6656

RECEIVED JAN 03 1992 PUBLIC HEALTH
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Legal Description or Complete Street Address		City or Township		
<u>16540 2nd St. So</u>		<u>Lakeland Shore</u>		
Owner Name	Mail Address	City	State	Zip
<u>Kirsten Bank</u>	<u>16540 2nd St. S.</u>	<u>Lakeland Shore</u>	<u>Mn.</u>	<u>5</u>
Installer	Mail Address	City	State	Zip
<u>Jacobson Exc</u>	<u>3173 Spruce St</u>	<u>Little Canada</u>	<u>Mn</u>	<u>55117</u>

Septic Tank Information

Tank Manufacturer: Custom Concrete Liquid Capacity: 1000 gpl

Pump Chamber (if installed):

Tank Manufacturer: _____ Liquid Capacity: _____

Horsepower of Pump: _____

Pump Discharge in Gallons Per Minute: _____ at _____ Feet of Head

Type of Warning Device: _____

Number of Gallons Pumped Per Cycle: _____

Drainfield Trench

Width: 3' - (2) Length of Each Trench: 60'

Depth of Trench Bottom from Finished Grade: 11"

Method of Distribution: GRAVITY

Depth of Rock Under Distribution Pipe: 1"

Area Required: 100' x 60' Area As Built: 100' x 60'

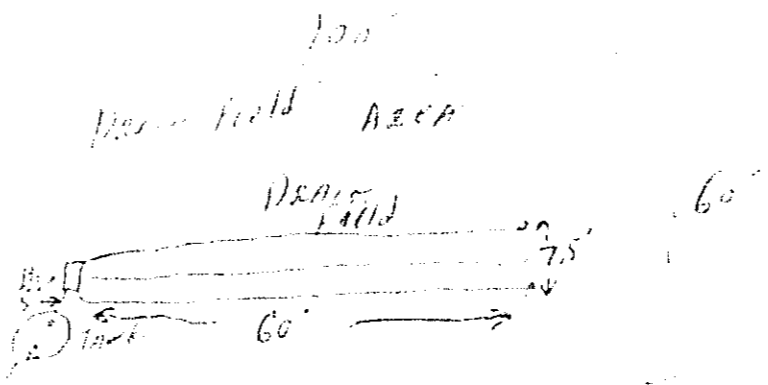
Complete site plan on attached sheet. On the site plan, include location of:

structures, septic tank, pump chamber, line from house to tank, line from tank treatment system, distribution lines, distribution or drop boxes, well, and driveway. Show all distances applicable to the sewage treatment system (distance from structure to tank, tank to treatment system, distance between distribution lines, length of distribution lines, and distance between well and sewage treatment system). Indicate NORTH on the site plan and the scale of the plan.

CEASBUILT.LSR:UC 691

SEPTIC PERMIT NUMBER 31-91005

FIR site
Bank



← N

Hwy 95