

Pennington County Septic System Permit Application

Pennington SWCD
 201 Sherwood Avenue S
 Thief River Falls, MN 56701
 Phone (218) 683-7075
 Email: peter.nelson@pennington.mnswcd.org

To be Completed by Homeowner



Property Owner Name			Address		
Phone #			City, State, Zip		
Township	Section	Range	Qtr./Qtr.	Lot Size/Acres	Parcel Number
Structure Characteristics # of Bedrooms _____ # of Bathrooms _____ Basement? Yes No Lift pump? Yes No			Is site located in a shoreland, floodplain, or wellhead protection area? Yes No Unsure Permit Fee - \$100 Date Paid: _____ * \$25 if you watch SSTS video on website Date Watched: _____		
Project Type Check all that apply: New System New Dwelling Repair New Tank Replacement Holding Tank			Anticipated Use Check all that apply: Residential Dishwasher Multi Family Garbage Disposal Single Family Clothes Washing Machine Seasonal Jacuzzi/Hot Tub Commercial Water Conditioning Unit (i.e. water softener) Other Establishment (food, beverage, or lodging)		
Name of Licensed Designer					
Name of Licensed Installer or homeowner if doing self-installation					
Name of Licensed Inspector					

The following documents must be included: (signed and dated)
Design Documents Site Evaluation with two soil verifications

Regulations:

- This permit is valid for twelve (12) months from date of issuance.
- If any septic system is covered before being inspected by a State licensed inspector, it shall be uncovered upon the direction of the inspector.
- **A copy of the design MUST given to SWCD staff before any excavation is started.**
- A Certificate of Compliance or Notice of Noncompliance shall be prepared by the inspector, following an inspection, and provided to the property owner and the SWCD within 15 days of the compliance inspection.
- Any person who violates the Sewage and Wastewater Treatment Ordinance or who makes any false statement on a certificate of compliance shall be guilty of a misdemeanor punishable by imprisonment or a fine or both as defined by law.

I hereby apply for a Septic System Permit, and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the Ordinance of Pennington County and with all applicable State Codes; that I understand this is not a permit, but only an application for a permit, and work is not to start without a permit; and work will be in accordance with the approved design. I also understand that by submitting this application, I am consenting to allow the Pennington SWCD to inspect and verify that all information in the application is complete and correct; and to conduct inspections before, during and after construction for compliance with the permit and the Pennington County Sewage and Wastewater Treatment Ordinance.

 Signature of Applicant

 Date

For Office Use

Application # _____ Application Approved _____ Application Received _____ Compliance Inspection _____ Copies Sent to Owner _____