

DAKOTA COUNTY SEPTIC SYSTEM TAX ASSESSMENT PROGRAM

APPLICATION

Dakota County Water Resources Western Service Center 14955 Galaxie Avenue Apple Valley MN 55124 952-891-7000 dee.mcdaniels@co.dakota.mn.us Dakota County Ordinance #113: Subsurface Sewage Treatment Systems establishes a tax assessment loan program to upgrade failing septic systems. Ordinance #113 establishes the minimum requirements for regulation of septic systems for the treatment and dispersal of sewage within Dakota County to protect public health and safety, groundwater quality and to prevent or eliminate the development of public nuisances.

Application Procedures

- 1 Review and follow the Borrower Owner Check List, included with this application.
- 2. Complete the application and return to the County at the address listed above. The County will review the application and verify that the property is homesteaded and that the property taxes are current. The Owner will be notified whether the application has been approved or denied.
- 3. No septic work can be started before approval of the application to be included in the assessment.
- 4. The applicant(s) must sign and return a copy of the "Notice to Landowner" with the application.
- 5. After the system has been installed and inspected, the applicant/Owner must sign and return the <u>original</u> signed and notarized copy of the Agreement of Assessment and Waiver of Irregularity and Appeal.

SECTION B: PROPERY INFORMATION

Property Identification Number (PIN):		Lot Size:
Property Address:		
Legal Description:		
Year Built:	Number of Bedrooms: _	
Age of Failing Septic System:		

SECTION A: OWNER INFORMATION						
Property Owner:		(First Name)	(\.A:-l			
(Last Name)		(First Name)	(Middle Initial)			
Co-Owner:						
(Last Name)		(First Name)	(Middle Initial)			
Mailing Address (if different)						
(PO Bo	x)	(City)	(State)	(Zip Code)		
Phone #:						
Email Address:						
SIGNATURE(S) REQUIRED : I hereby certify that the information provided is correct and understand that false or misleading information may be grounds for invalidating this application.						
Applicant Signature	Date	Co-applicant Signature Date		Date		