



Dakota County Environmental Management
 14955 Galaxie Avenue
 Apple Valley MN 55124
 Ph: 952-891-7000 Fax: 952-891-7031

**LAND USE PERMIT APPLICATION FOR
 NEW CONSTRUCTION with SUBSURFACE
 SEWAGE TREATMENT SYSTEM**

A permit must be obtained before beginning any construction activity. All building construction must be inspected by the township building official. All septic systems must conform to Dakota County Ordinance 113 and MN Rules 7080-7083 including required Shoreland setbacks.

Owner Name & Current Address: _____

Property Address (if different): _____

City/Zip _____ Parcel ID: _____

Email Address: _____

Primary Phone Number: _____

Please check all that apply:

✓	Part A: Type of Structure
<input type="checkbox"/>	Single Family Dwelling
<input type="checkbox"/>	Duplex
<input type="checkbox"/>	Mobile Home
<input type="checkbox"/>	Shouse
<input type="checkbox"/>	Basement
<input type="checkbox"/>	Slab on Grade
<input type="checkbox"/>	Walkout
<input type="checkbox"/>	Number of Bedrooms: _____



Permit Fee (based on value of structure)	
\$1.00 - \$30,000	\$136
\$30,001 - \$40,000	\$143
\$40,001 - \$50,000	\$166
\$50,001 - \$100,000	\$181
\$100,001 - \$200,000	\$364
\$200,001 +	\$542
<i>Working without a permit is Double the permit fee</i>	
Permit Fee Part A: _____	

Builder: _____
Company Name Address Name of Competent person on site

Phone #: _____ Email: _____

Structure Setbacks and Lot Specifications

Structural Setback From:	Recreation Lake	Natural Environment Lake	Recreation River	Scenic River	Transition River	Agricultural River	Remote River	Tributary River
Federal State or county Road	50 feet	50 feet	50 feet	50 feet	50 feet	50 feet	50 feet	50 feet
Township Road / RR	40 feet	40 feet	40 feet	40 feet	40 feet	40 feet	40 feet	40 feet
Ordinary High Water Mark	100 feet	200 feet	200 feet	200 feet	200 feet	200 feet	200 feet	100 feet
Side & rear lot line	10 feet	10 feet	10 feet	10 feet	10 feet	10 feet	10 feet	10 feet
Bluffline	40 feet	40 feet	40 feet	40 feet	40 feet	40 feet	40 feet	40 feet
Unplatted cemetery	50 feet	50 feet	50 feet	50 feet	50 feet	50 feet	50 feet	50 feet
<i>Sewer to OHWM</i>	75 feet	150 feet	150 feet	150 feet	150 feet	150 feet	150 feet	75 feet
Minimum lot size (sq. ft.)	40,000	80,000*	87,120	174,240	80,000	80,000	N/A	80,000
Maximum structure height	35 feet	35 feet	35 feet	35 feet	35 feet	35 feet	35 feet	35 feet
Lot width at building line & water frontage	150 feet	200 feet	250 feet	250 feet	250 feet	150 feet	300 feet	100 feet

Township setbacks may be greater. Check with your township for setback information.

Please check all that apply:

✓	Part B: Septic System	Permit Fee
	Type I Trench/Mound/Bed	\$374
	Type II	\$188
	Type III	\$374
	Type IV	\$433
	Repair (NEW)	\$363
	2 nd Soils Verification (NEW)	\$250
	Annual Operating Permit	\$136
	Large System Construction Permit (>2500 gpd capacity)	\$870
	Septic System Variance	\$974
	Pump maintenance fee	\$3/per record
	Is there floodplain on the property?	Yes / No
		Permit Fee Part A: _____
		Permit Fee Part B: _____
		TOTAL Fees: _____

Designer: _____	_____	_____
Name	Address	MPCA License #
Phone #: _____	Email: _____	
Installer: : _____	_____	_____
Name	Address	MPCA License #
Phone #: _____	Email: _____	

HOMEOWNER CHECK LIST

- Structures and septic systems must meet County shoreland and floodplain setback requirements.
- Total Permit fee, house plans and septic system design must accompany this application. The permit fee includes the septic system design review, and all inspection(s).
- House plans can be 8.5" X 11". If you submit an architectural size set of plans, they can be copied and returned if requested.
- Check or money order should be made payable to: DAKOTA COUNTY TREASURER. To make a credit card payment, please call 952.891.7110.
- A 24-hour notice is required for an inspection.
- Permits are valid for one year.
- Dakota County must receive an as-built inspection record for the septic system prior to issuing the certificate of compliance.

I agree that any plans and specifications submitted are part of this permit application. I understand that Dakota County takes no responsibility for the proper design of the project. I accept all responsibility for the design of the project and for all damages resulting from the failure of the project due to improper design, and understand that false or misleading information may be grounds for invalidating this permit. I hereby certify that the information provided is correct and agree to have the proposed work done in strict accordance with the description given and according to the provisions of the Dakota County Ordinance 50, Ordinance 113, and Minnesota Rules 7080-7083. I understand that this permit is valid for a period of one year from the date of issuance.

Signature: _____ Date: _____

For Office Use Only: Permit #: _____ Check #: _____ Amount: _____ Approved by: _____	Comments:
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