

# LAND USE PERMIT APPLICATION FOR NEW CONSTRUCTION with

## SUBSURFACE SEWAGE TREATMENT SYSTEM

#### **Dakota County Environmental Resources**

14955 Galaxie Avenue, Apple Valley MN 55124

Phone: 952-891-7000 Fax: 952-891-7031

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:

$\checkmark$	Part A: Type of Structure		Permit Fee (based on	value of structure)
	Single Family Dwelling		\$1.00 - \$30,000	\$152
	Duplex		\$30,001 - \$40,000	\$161
	Mobile Home		\$40,001 - \$50,000	\$186
	House	$\rightarrow$	\$50,001 - \$100,000	\$204
	Pole Building		\$100,001 - \$200,000	\$410
	Basement		\$200,001 +	\$610
	Slab on Grade		Ag Building	\$65
	Walkout		Working without a permit is Double the permit fee	
	Number of Bedrooms:			

Builder:\_

Company Name

\_\_\_\_\_

Address

Name of competent person on site

Phone #:

Email: 

Structure Setbacks and Lot Specifications								
	Recreation Lake	Natural Environment Lake	Recreation River	Scenic River	Transition River	Agricultural River	Remote River	Tributary River
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
Sewer to OHWM	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:

$\checkmark$	Part B: Septic System	Permit Fee
	Type I Trench/Mound/Bed	\$409
	Туре II	\$206
	Туре III	\$409
	Туре IV	\$473
	Repair	\$206
	2 <sup>nd</sup> Soils Verification	\$274
	Annual Operating Permit	\$148
	Large System Construction Permit (>2500 gpd capacity)	\$951
	Septic System Variance	\$1064
	Pump maintenance fee	\$3/per record
	Is there floodplain on the property?	Yes No
		Permit Fee Part A:
		Permit Fee Part B:
		TOTAL Fees:
		1

Designer:	Address	MPCA License #
Phone #:	Email:	
Installer: Name	Address	MPCA License #
Phone #·	Fmail <sup>.</sup>	

## 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 952-891-7000.
- 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:	Comments:
Permit #:	
Check #:	
Amount:	
Approved by:	