



Septic Application – Compliance/ Installation

For a Compliance Inspection, fill out pages 1 and 2.

Owner

Fee \$150

Name _____

Phone # _____

Email _____

Property Address _____ Parcel # _____

City, State, Zip _____

Mailing Address _____

City, State, Zip _____

Applicant

Applicant Same as Owner

Name _____

Phone # _____

Email _____

House Information

Year Constructed _____

of Bedrooms _____

of Bathrooms _____

Square Footage _____

Well Depth _____

Water Using Appliances

(check all that apply)

Water Softener Washing Machine Dishwasher

Grinder/ Ejector Garbage Disposal Sump Pump

COMPLIANCE INSPECTION

In the past two years, have any of the following occurred?

- Backing up into the house via toilets, showers, wash tubs, drains?
- Septic tank overflowing to ground surface?
- Moist, mushy ground or effluent surfacing along the drainfield?

When was the septic tank and/or lift station last pumped? _____

Reason for Inspection

- Home Sale
- Building Permit in Shoreland

Does the homeowner, realtor, or other representative wish to be present at the time of inspection?

If yes, Name _____

Phone _____

Clay County Sewer Code 6-1-10 : It is the responsibility of the seller to provide to the buyer a copy of the certification inspection indicating whether the system is in compliance or noncompliance prior to closing on an agreement to sell or transfer real property. During the period between November 1 and April 30, a request for a certification inspection must be submitted to the Clay County Environmental Services Division office prior to closing on an agreement to sell or transfer real property and the associated inspection completed by July 1.

In accordance with this code, realtor contact information is required to ensure proper communication with the buyer of a property for future scheduling and completion of inspection.

Realtor Information

Name _____

Phone # _____

Email _____

I hereby certify the above information to be correct and accurate to the best of my knowledge, and that I do not hold Clay County or its employees responsible for any damages, costs or claims resulting from any approvals, judgements, opinions, or findings issued upon completion of this inspection.

PROPERTY OWNER OR REPRESENTATIVE _____ DATE _____

INSTALLATION (If you are applying for a Compliance Inspection, **skip this section**)

Septic System

- New Remodel

Shoreland – Is the property in the shoreland from a lake (1000 ft) or river (300 ft)?

- Yes No

Lake/ Stream Name _____

Classification _____

SYSTEM SPECIFICATIONS

Tanks

- Septic Tank
 Pump Tank
 Holding Tank
 Other _____

Number of Tanks _____

Tank #1 size _____

Tank #2 size _____

Tank #3 size _____

Soil Treatment Area

- Rock Trench
 Chamber Trench Low-Profile Standard High-Capacity
 Seepage Bed
 Pressure Bed
 At-Grade
 Mound
 Other _____

Sq. Foot of STA _____

Installer _____

License # _____

Agreement: The undersigned hereby applies for permit to install, alter, or repair the sewage treatment system herein specified, agreeing to do all such work in strict accordance with the ordinances of Clay County and the State of Minnesota. **APPLICANT FURTHER AGREES TO ATTACH RELEVANT PLANS, PLOTS, SKETCHES, AND SPECIFICATIONS, AND THEY SHALL BECOME PART OF THE PERMIT AND ANY VARIATION FROM THESE PLANS WITHOUT WRITTEN PERMISSION FROM PERMITTING AUTHORITY SHALL INVALIDATE SAID PERMIT.**

Policy: Issuance of permits, approval by inspection, nor any other approval and/or certification of compliance issued or requested shall be construed to represent a guarantee or warranty of a sewage treatment system's operation or effectiveness of that treatment.

ALL APPLICATIONS FOR PERMITS MUST BE ACCOMPANIED BY COMPLETE SITE EVALUATION DATA AS DEEMED RELEVANT BY PERMITTING AUTHORITY.

Installer is responsible for notification for system inspection at least 24 hours prior to system being covered.

It is the responsibility of the installer to meet all setbacks and requirements of the code and provide Clay County Environmental Health with a design of the system before the system is installed.

I have read and agree to the conditions as specified above.

Signature of Applicant _____ Date _____

Note: Application must be filled out in its entirety before a permit is issued.
Make checks payable to **Clay County Treasurer**.