



# WHITE EARTH RESERVATION ONSITE SEPTIC SYSTEM PERMIT

**PERMITS MUST BE POSTED AT JOB SITE,  
or AVAILABLE UPON REQUEST**

White Earth– Zoning Office  
Attn: Natural Resources Department  
41044 South Ice Cracking Road, Ponsford, MN 56575  
Phone: (218) 573-3007 – FAX: (218) 573-3009

## ONSITE SEPTIC SYSTEM APPLICATION / PERMIT

Legal Description, including name if applicable (see Home-Site Resolution, Lakeshore Lease or other document as appropriate):

Applicant Name:

Phone Number:

Mailing / Project  
Address:

**\*\*\*TO BE COMPLETED BY THE DESIGNER\*\*\***

Number of Bedrooms : \_\_\_\_\_ Well Casting Depth: \_\_\_\_\_ feet Garbage Disposal (Yes) (No) \_\_\_\_\_  
 Design Flow : \_\_\_\_\_ GPD Depth of other Wells within 100 ft. of system \_\_\_\_\_ feet Grinder Pump/Lift Station In House (Yes) (No) \_\_\_\_\_  
 (dwellings must be classified as Type 1) Proposed Design Type of Drainfield  
 Type of Observation: Probe Pit Boring  Replace Septic Tank  Chamber- H10, EQ36 other:   
 Original Soil (Yes) (No) Compacted Soil (Yes) (No)  Septic Tank/Drainfield  Standard rock depth: \_\_\_\_\_ inches  
 Depth to Restricting Layer : \_\_\_\_\_ feet  Drainfield only  Standard gravelless  
 Maximum Depth of System : \_\_\_\_\_ feet  Holding Tank  Standard Bed  Mound  
 Perc Rate : \_\_\_\_\_ Soil Sizing Factor: \_\_\_\_\_  Lift Station  At Grade  Pressurized Bed

Other Establishment: \_\_\_\_\_ GPD

SOIL BORING LOG				SOIL BORING LOG			
DEPTH (INCHES)	TEXTURE	COLOR & MUNSELL NO	STRUCTURE	DEPTH (INCHES)	TEXTURE	COLOR & MUNSELL NO	STRUCTURE
			BLOCKY PRISMATIC PLATY OR NONE				BLOCKY PRISMATIC PLATY OR NONE
			BLOCKY PRISMATIC PLATY OR NONE				BLOCKY PRISMATIC PLATY OR NONE
			BLOCKY PRISMATIC PLATY OR NONE				BLOCKY PRISMATIC PLATY OR NONE
			BLOCKY PRISMATIC PLATY OR NONE				BLOCKY PRISMATIC PLATY OR NONE

Type of Alarm Device on Lift Station or Holding Tank

Attach perc Test Information if Required

I hereby certify that I have completed this work in accordance with applicable ordinances, rules and laws

Name and Address of Designer: \_\_\_\_\_ Phone No.: \_\_\_\_\_

MPCA No: \_\_\_\_\_ Date of Site Eval.: \_\_\_\_\_ Signature of Designer: \_\_\_\_\_

Name of Installer (if different from Designer): \_\_\_\_\_ MPCA No: \_\_\_\_\_

Site plan must be drawn to dimension or to scale. Include: dimension of lot, existing and proposed buildings, easements and setbacks, location of any suitable soils, well and water line locations within 100 ft of system, distance to property lines, tank access route, soil borings and perc. Test locations, distance from OHWM, distance from buildings, alternate drainfield location. **Plans must also include all related design worksheets.**

SEE ATTACHED DRAWING

	Tank (estimated)	Tank* (actual)*	Mound (estimated)	Mound* (actual)*	*For office use only
Distance to Well					Tank size _____
Distance to Building					Lift station size _____
Distance to Property Line					Drainfield size _____
Distance to Pressure Line					Pump Hp _____
Distance to Ordinary High Water					Date Installed _____

\*\*\* FOR OFFICIAL USE ONLY \*\*\*

Any changes to the permit must first be approved by White Earth Tribal Council Zoning Office. No system shall be covered up without inspection by a Licensed ISTS Inspector. Inspections must be scheduled at least **24 hours prior** to time requested.

Date Application Received: \_\_\_\_\_

Application is hereby [ ] *approved* [ ] *denied* to install an individual septic system according to the specifications of the site evaluation and design submitted to the White Earth Tribal Council Zoning Office. By Order of:

\_\_\_\_\_  
Signature of Permitting Authority

Date Issued: \_\_\_\_\_

Permit Expires: \_\_\_\_\_

CERTIFICATE OF COMPLIANCE

A Certificate of Compliance or noncompliance must be submitted to the owner and to the White Earth Zoning Office upon completion of the Inspection. The certificate shall include a certified statement by the qualified employee or licensee who conducted the inspection, identify the type of system and whether the system is in compliance.

Certificate is hereby [ ] *approved* [ ] *denied* based upon Certificate of Compliance submitted .  
With proper maintenance, this system can be expected to function satisfactory, however, this is not a guarantee.

Date Submitted: \_\_\_\_\_

\_\_\_\_\_  
Signature of Permitting Authority