

**SCOTT COUNTY, MINNESOTA**  
**APPLICATION FOR SUBSURFACE SEWAGE TREATMENT SYSTEM (SSTS) PERMIT**

**COUNTY USE ONLY**

Project Address \_\_\_\_\_ Twp/City \_\_\_\_\_ Date Received \_\_\_\_\_  
Site Evaluator \_\_\_\_\_ Installer \_\_\_\_\_ Permit # \_\_\_\_\_  
System Type I II III IV V Fee \_\_\_\_\_  
Septic Tank Size as per design submitted and approved \_\_\_\_\_ Receipt # \_\_\_\_\_  
Pump Tank Size as per design submitted and approved \_\_\_\_\_ New \_\_\_\_\_ Replacement \_\_\_\_\_  
Drainfield Size as per design submitted and approved (below) Permitted Depth to Limiting Layer \_\_\_\_\_  
\_\_\_\_\_ # Potential Bedrooms \_\_\_\_\_  
\_\_\_\_\_ Other Establishment gpd \_\_\_\_\_

**APPLICANT USE ONLY**

Applicant \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_  
Applicant Mail Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Owner (if different) \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_  
Owner Mail Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Soil observations and an SSTS design meeting Minn. SSTS Rules and the Scott County SSTS Ordinance must accompany this application.  
Applicant hereby agrees that, upon issuance of this permit, all work done and all materials used shall be in compliance with Minnesota State Rules and any applicable township, city, and Scott County Ordinances. The applicant must also ensure that the Scott County Environmental Services Dept. is notified of any SSTS installation by 9:00 a.m. of the day the inspection is requested.  
Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**CITY USE ONLY** Recommend Approval \_\_\_\_\_ Recommend Denial \_\_\_\_\_ Date \_\_\_\_\_

City Representative: Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Comments: \_\_\_\_\_

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**SSTS Setbacks:** Building: (tanks) \_\_\_\_\_ (drainfield) \_\_\_\_\_, Lake/Creek/Wetland \_\_\_\_\_, Well \_\_\_\_\_, Lot Line 10 feet and not in any Right-of-Way or Easement.

The Scott County Environmental Services Dept. approves this permit subject to existing regulations & the following conditions:

1. This permit is valid for 12 months from the date issued.
2. The property owner (or applicant, if different from the property owner) is responsible for assuring that the Installer receives a copy of the final Department approved design.
3. All required setbacks and elevations must be verified and maintained.
4. The primary and alternate drainfield locations must be fenced or otherwise protected while any building construction activity is occurring on the site. This protection must be maintained after construction as required by the Scott County SSTS Ordinance and this permit.
5. Divert surface water away from or around the drainfield area.
6. Protect sewer lines and all other SSTS components from freezing.
7. Sod or seed the area as soon as possible upon completion to prevent soil erosion and damage to the drainfield (for late season installations, hay or straw can be substituted until sodding or seeding can be done in the spring).
8. The Department may require a fee, escrow or other security as described in the County Fee Schedule if the owner requests occupancy of a dwelling before a certificate of compliance for the SSTS has been issued by the Department.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_