



**Greater Bemidji Area  
Joint Planning Board**

**Application for Septic Permit**

Please complete this application carefully and completely. PLEASE PRINT. Failure to fill in all of the required information may result in a delay of processing your application.

<b>OFFICE USE ONLY</b>	
Complete App. Rec'd _____	
Date Permitted _____	
Permit Number _____	
Comments _____	
_____	

A fee of \$ \_\_\_\_\_ made payable to the **City of Bemidji** must accompany this application. Additional escrow or verification fees may apply for approved projects.

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An escrow account is established as indicated above to cover technical and legal expenses incurred by the Joint Planning Board (JPB) as part of the plan review. The applicant is responsible for all costs incurred by the JPB during plan review. If the escrow amount drops below 10% of the original deposit amount the JPB may require submittal of an additional escrow deposit sufficient to cover any anticipated expenses. Upon determination by the JPB that the project is complete or expired, the JPB will return the remaining escrow deposit to the applicant.

<b>APPLICANT IS:</b>	<input type="checkbox"/> OWNER* <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> DESIGNER <input type="checkbox"/> OTHER
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<b>SITE</b>	Project Site Address _____	Parcel No. _____
	<b>Is the homeowner doing any of the work?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No            *If yes to either question, attach sheet explaining scope or work	

<b>OWNER</b>	Owner Name _____	
	Owner Address _____	Phone Number _____
	City, State, Zip _____	E-mail Address _____

<b>INSTALLER</b>	Contractor Name _____	License Number _____
	Address _____	Phone Number _____
	City, State, Zip _____	E-mail Address _____

<b>DESIGNER</b>	Designer Name _____	License Number _____
	Address _____	Phone Number _____
	City, State, Zip _____	E-mail Address _____

<b>MAINTAINER SERVICER</b>	Name _____	License Number _____
	Address _____	Phone Number _____
	City, State, Zip _____	E-mail Address _____

**\*If the property owner is not the applicant, an 'Authorized Agent' form is required with this application.**

**DESIGN INFORMATION**

Proposed Install / Construction Date: \_\_\_\_\_

Type of Use?  Residential → Number of bedrooms \_\_\_\_\_

Residential (Cluster) → Total Design Flow: \_\_\_\_\_ gpd

Commercial → Other Establishment (Ch. 7081)?  Yes  No

Total Design Flow: \_\_\_\_\_ gpd

Meter to be installed?  Yes  No

Meter Type \_\_\_\_\_ Appx. # Employees \_\_\_\_\_

Project Type:  Holding Tank  New System Install  Replacement/Modification  Repair (w/design changes)

Septic Type:  Type I – Mound/At-Grade  Type I – Seepage/Pressure Bed  Type I – Rock Trench/Chamber

Type II – Privies / Holding Tanks / Floodplain Area  Type III System  Other \_\_\_\_\_

**If replacement**, will old system be crushed/abandoned?  Yes  No Will old system be removed?  Yes  No

**MPCA SSTS Abandonment Reporting form must be submitted for all system abandonments. If done during install, it must be submitted alongside the as-built inspection report**

**Number of Tanks: Existing: \_\_\_\_\_ |-| Crush/Abandon: \_\_\_\_\_ |+| New: \_\_\_\_\_ |=| TOTAL: \_\_\_\_\_**

**-REQUIRED DOCUMENTS-**

OSTP Preliminary/Field Evaluation Form(s)

Site Design

OSTP Design Summary Worksheets

U of M Septic System Management Plan

Soil Observation Logs

Pumping Contract (*required for holding tank systems, and subject to biennial operating permit*)

Deed

Other (work scope, etc) \_\_\_\_\_

**ALL APPLICANTS MUST SIGN BELOW**

I hereby certify that I am the owner or authorized agent of the owner of the above described property and that all uses will conform to the provisions of the Greater Bemidji Area Zoning and Subdivision Ordinance. I further certify that I will comply with all conditions placed upon this permit should this application be approved. Intentional or unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid. I also authorize Greater Bemidji Area Joint Planning staff to inspect the property during review of this application and subsequent construction during reasonable times of the day.

Applicant: \_\_\_\_\_

Applicant Name (typed or printed) \_\_\_\_\_

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

**OFFICE USE ONLY**

Distance from nearest structure? \_\_\_\_\_ Distance from well? \_\_\_\_\_

Is a variance necessary for this project?  Yes  No  Don't Know  Attach copies

Is property within 1000 feet of a public water?  Yes  No Name of Lake/River? \_\_\_\_\_

Is any portion of the property a wetland?  Yes  No

Septic Data: Year Installed: \_\_\_\_\_ Last Compliance Inspection: \_\_\_\_\_

Pass Compliance  Fail Compliance  Notarized Stipulation  Other \_\_\_\_\_

Municipal Services: Water  Yes  No Sewer:  Yes  No\* \*If no, is hook up possible?  Yes  No

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_ Complete Application  Yes  No

**COMPLETED FORMS CAN BE SUBMITTED AT 315 5<sup>TH</sup> STREET NW, SUITE #2, BEMIDJI, MN 56601**



Greater Bemidji Area Joint Planning Board  
City of Bemidji Northern Township

315 5<sup>th</sup> Street NW, Suite #2, Bemidji, MN 56601 Office (218) 759-3579 Fax (218) 759-3591

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**GREATER BEMIDJI AREA JOINT PLANNING BOARD (JPB)**  
**SUBSURFACE SEWAGE TREATMENT SYSTEM PERMIT INSTRUCTIONS**

The JPB Zoning & Subdivision Ordinance requires all septic system installations, modifications, or repairs to obtain a permit. **All developments/dwellings that are not connected to municipal or a central sewer system must be connected to an on-site Subsurface Sewage Treatment System (SSTS).** This policy applies to all septic systems in the City of Bemidji, and Northern Township (Greater Bemidji Area).

1. The following steps shall be completed to obtain a permit to install an in the Greater Bemidji Area.
  - a. Obtain a complete site evaluation and a completed **SSTS** design from a licensed designer (include license # on the application).
  - b. Obtain and complete an **SSTS** permit application from the JPB. (Installer or designer may do this for the property owner).
  - c. Submit a completed application for an **SSTS** Permit with a complete evaluation and design and Management Plan to the JPB at least three (3) business days before beginning septic work.
  - d. The required forms are available from the U of M Extension Service SSTS Program at: <http://septic.umn.edu/formsandsheets/bytype/index.htm#design>
  - e. Pay the permit fee with the application (includes inspection fee).
2. Upon receiving a complete application with signatures, the JPB will submit for review to a licensed contractor. JPB will contact the installer, as listed on the permit application, with permission to begin work upon approval by licensed contractor.
3. Once the installation/repair is complete, the installer must contact the JPB contract SSTS Inspector Dave Larson at least 48 hours before the requested inspection and follow up the morning of the install to confirm the time you will be ready for inspection. Dave can be reached at 218-751-2570 (office), or 218-766-7528 (cell), or via e-mail at: [larsonenviro@midco.net](mailto:larsonenviro@midco.net).
4. Upon completion of installation, the system must be inspected in accordance with MPCA rules and regulations and the JPB Ordinance. **The inspection must be conducted before the system is fully covered without exception.** The JPB inspector will conduct an inspection and prepare an as-built report for record.
5. Upon final completion, inspection, and receipt of the inspector's report, an information packet is mailed to the homeowner. This will include the original permit, the installation inspection report, and information on how the homeowner can obtain good septic maintenance information. This information may be obtained from a publication produced by the U of M Extension Service Wastewater Resources website at:

<http://www.extension.umn.edu/distribution/naturalresorces/DD6583.html#1>.

A printed document of this information is available for review in our Offices.