



COUNTY OF BECKER

Planning and Zoning

915 Lake Ave, Detroit Lakes, MN 56501

Phone: 218-846-7314 ~ Fax: 218-846-7266

BOARD OF ADJUSTMENT

NOTICE OF PUBLIC HEARING

****HEARING DATE AND LOCATION****

Thursday, October 12, 2017 @ 7:00 P.M.

Commissioner's Room-Becker County Courthouse
Detroit Lakes, MN. 56501

APPLICANT: Ryan & Sarah Anderson
21631 Co. Hwy. 32
Rochert, MN 56578

Project Location: 21631 Co. Hwy. 32, Rochert

APPLICATION AND DESCRIPTION OF PROJECT:

Request a variance to construct a dwelling to be located at fourteen feet (14) feet from the right of way of a county highway and to construct an attached garage to be located at twenty-five (25) feet from the right of way of a county highway, deviating from the required setback of forty-five (45) feet from the ROW of a county highway. This application was tabled from the October 12, 2017 Hearing by the applicant.

LEGAL LAND DESCRIPTION: Tax ID number: 100681000 Cotton Lake

SubdivisionName HERMAN'S COTTON LAKE SubdivisionCd 10009

Metes and Bounds: LOTS 8, 9, 10 & 11; Section 03, TWP 139, Range 40, Eagle View Township.

Replies/Comments: Interested parties are invited to submit to the Becker County Department of Planning, Zoning, and Land Use, written facts, arguments or objectives before the scheduled date of the Hearing. These statements should bear upon the suitability of the location and the adequacy of the Project and should suggest any appropriate changes believed to be desirable. Replies may be addressed to:

PLANNING AND ZONING DEPARTMENT

915 Lake Avenue

Detroit Lakes, MN 56501

FAX Number 218-846-7266

EMAIL: zoning@co.becker.mn.us

If you have questions about the Project, feel free to call 218-846-7314.

Jurisdiction: This Project comes under the Regulatory Jurisdiction of the Becker County Zoning Laws.

Regulatory Authority: This Application will be reviewed according to the provisions of the Becker County Zoning Ordinance. The decision whether to issue a Permit will be based on an evaluation of the probable impact including cumulative impacts, of the proposed activity. That decision will reflect the concern for both protection and utilization of important resources. All factors, which may be relevant to the proposal, will be considered including the cumulative effects: Land Use, Shoreline Protection, Water Supply and Conservation, Safety, Economics, in General, the Needs and Welfare of the People.

**** Weather conditions may change the Hearing date and time. If bad weather occurs, please listen to the local Detroit Lakes Radio Stations or contact the Zoning Office, by 4:30 PM on day of Hearing, for possible rescheduling of the Hearing.**



BECKER COUNTY PLANNING & ZONING

915 LAKE AVENUE, DETROIT LAKES, MN 56501
PHONE (218) 846-7314 - FAX (218) 846-7266

VARIANCE APPLICATION

PARCEL	
APP	Variance
YEAR	
SCANNED	

PROPERTY OWNER INFORMATION (as it appears on tax statement, purchase agreement or deed)

First name(s) Ryan & Sarah Last Name Anderson
Mailing Address 216.31 Co. Hwy 32 City, State, Zip Rochert, MN 56578
Phone Number (320) 305-1384 Project Address: 216.31 Co. Hwy 32
Parcel number(s) of property: 100681000 Sect - Twp - Range: D3-139-040
Township Name: Erie Legal Description: Herman's Cotton Lake Lots 8, 9, 10, & 11

Why is the variance being requested? (Mark all sections that apply)

- ☒ Setback Issues ☐ Lot size not in compliance with minimum standards
☐ Alteration to non-conforming structure ☒ Topographical Issues (hills, slopes, bluffs, wetlands)
☐ Other

Please provide a brief description detailing the above variance request:

We have a house, 4 cabins, and an old fish cleaning house on the property. We are requesting to remove them all but cabin 4. This will be used as a storage shed. We are proposing to construct a new home 47 ft from the centerline of the County road instead of the required setback of 95'.

What are you applying for less than the minimum distance (setback) from? from the centerline.

Setback must include decks and patios, current and proposed.

☐ Ordinary High Water Mark (OHWM) Proposed Distance (setback) _____ feet
☐ Lot Line Proposed Distance (setback) _____ feet
☒ Road Right of Way (ROW) C.L. Proposed Distance (setback) 47 feet
Type of Road [] Township [X] County [] State 14A to ROW to House
☐ Crest of bluff Proposed Distance (setback) _____ feet
☐ Impervious Surface Coverage Proposed Impervious Lot Coverage _____ sq ft
0.25810 %

Was the lot recorded prior to 1971?

☒ Yes

☐ No

Was the lot recorded between 1971 & 1992?

☐ Yes

☐ No

Was the lot recorded after 1992?

☐ Yes

☐ No

Will this be a new lot split?

☐ Yes

☐ No

What is the current square footage of the structure?

728 SF

What is the proposed addition square footage?

21056

What is the current height of the structure?

22 ft

What is the proposed height of the structure?

29 ft

Is there a basement to the structure?

Yes - walkout

Will the proposed addition have a basement?

Yes - walkout

Will the roofline of the existing structure be changed?

N/A

Will the main structural framework of the structure be altered?

N/A

What is the current percentage of lot coverage?

10.24%

What is the proposed percentage of lot coverage?

10.97%

RA



OTHER INFORMATION NEEDED TO COMPLETE THE APPLICATION:

1. A copy of the deed from the Recorder's Office;
2. Completed Site Application with sketch showing all setbacks, platted or surveyed dimensions of the lot and all existing and proposed buildings;
3. Non-refundable filing fee of \$326.00. **Make check payable to Becker County Zoning.**
4. Is the variance request after the fact? [] Yes [X] No
If yes, after the fact application fee is an additional \$600.00.

Please answer the following questions as they relate to your specific variance request:

- 1) In your opinion, is the Variance in harmony with the purposes and intent of the ordinance?
Yes (X) No () Why or why not?
Cannot meet road setbacks
- 2) In your opinion, is the Variance consistent with the Becker County Comprehensive Plan?
Yes (X) No () Why or why not?
New home is meeting all other setbacks, except the road setback.
- 3) In your opinion, does the proposal put property to use in a reasonable manner?
Yes (X) No () Why or why not?
New home will be meeting lake setback requirements and lot coverage is staying below 15%. Also, removing 3 cabins close to the lake.
- 4) In your opinion, are there circumstances unique to the property?
Yes (X) No () Why or why not?
Asking for placement of new home due to well location, septic location, & topography of hill for the walkout basement.
- 5) In your opinion, will the variance maintain the essential character of the locality?
Yes (X) No () Why or why not?
This is mostly a residential neighborhood and this new home will not change that.

The Board of Adjustments must make an affirmative finding on all of the five criteria listed above in order to grant a variance. The applicant for a variance has the burden of proof to show that all of the criteria listed above have been satisfied.

The undersigned certifies that they are familiar with application fees and other associated costs, and also with the procedural requirements of the County and other applicable ordinances.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. Planning and Zoning Staff along with Board of Adjustment Members may visit my property to review submitted plan requests.

Applicant's Signature: Ryan Anderson Date: 8/12/17
(Office Use)

Date Received _____ Accepted [] Incomplete Application [] Date _____

Zoning Administrator



Application for Site Permit
Becker County Planning and Zoning
915 Lake Ave, Detroit Lakes, MN 56501
Phone: 218-846-7314 Fax: 218-846-7266
www.co.becker.mn.us

PARCEL	
APP	SITE
YEAR	
SCANNED	

Property will be staked by _____
Date: _____

Please Print or Type All Information

Parcel Number (s)	Property (E911) Address	**911 Address Needed	Legal Description
100681000	21631 Co. Hwy 32	Rochert, MN 56578	Herman's Cotton Lake Lots 8, 9, 10, 11

Lake/River Name	Lake/River Class	Township Name	Section	TWP No.	Range
Cotton Lake	RD	Erie	03	139	040

Property Owner	Last Name	First Name	Mailing Address	Phone
Anderson Ryan	21631 Co. Hwy 32			(320) 305-1384
Contractor Name Lic #	Keith Zitzow	Rochert, MN 56578	Lic # 0003476	

Proposed Project (Check those that apply)

<input checked="" type="checkbox"/> New Dwelling	<input type="checkbox"/> Addition to Dwelling	<input type="checkbox"/> Replacement Dwelling*	<input type="checkbox"/> Mobile/Manfac. Home
<input checked="" type="checkbox"/> Attached Garage	<input type="checkbox"/> Detached Garage	<input type="checkbox"/> Storage Structure	<input type="checkbox"/> Addition to Non-dwelling
<input type="checkbox"/> Stairway	<input checked="" type="checkbox"/> Deck	<input type="checkbox"/> Recreational Unit	<input type="checkbox"/> Water Oriented Structure
<input type="checkbox"/> Fence	<input type="checkbox"/> Other	<input type="checkbox"/> Non Conforming Replacement (identify)	

*Existing Dwelling to be removed prior to 3 Cabins to be removed by Sept 2018 / 1 Cabin turned into Main house to be lived in until construction finished Storage shed

Onsite Water Supply (X) Deep Well () Shallow Well Well Depth 50 ft
MN Rules Chapter 4725 (MN well code) requires a 3' minimum structure setback to well

Onsite Sewage Treatment System Task, Drainfield, & lift station
Type of System Task, Drainfield, & lift station Date of Installation _____ Last Date Certified 1994
Must have current certificate of compliance on septic system prior to issuance of a permit

Lot Information Shoreland ☒ (X) Riparian () Non Riparian Non Shoreland _____

Lot Area 37,756 sq ft or .9 acres Water Frontage 200 ft Bluff () Yes (X) No

Impervious coverage refers to anything water cannot pass through. Structures, areas covered by a roof, concrete, asphalt, Class 5, sidewalks, patio pavers, etc. should all be included in this calculation. Decks should be included in this calculation if they have plastic underlayment or impervious surface underneath. Anytime you exceed 15% lot coverage a stormwater management plan and/or mitigation is required. **INCLUDE PROPOSED STRUCTURES IN CALCULATION.**

Please Note: Unless otherwise provided, a minimum of a 12 foot wide driveway from the nearest road right of way to the proposed structure must be included in both your plan and impervious surface calculation.

Impervious Surface	Dimensions	Sq. Footage	Impervious Surface	Dimensions	Sq. Footage
On property			On property		
Ex: Patio	10x12	120	Cabin 4		
DRIVEWAY	17x24	408	Storage shed	12x18	216
Patio	8x20	160	garage	12x22	264
House	20x40	800	driveway	18x24	468
Attached Garage/house	54x24	1,298	Total Impervious Material		4,044

Impervious Lot Coverage $\frac{4,044 \text{ ft}^2}{37,756} = .107 \times 100 = 10.7\%$
Total Impervious Lot Area Impervious Coverage Percentage

Topographical Alteration/Earth moving

() None () 10 cubic yards or less (X) 11- 50 cubic yards () over 50 cubic yards
Project over 50 cubic yards a storm water management plan must be included.

Deck 10x20 2000
Deck 34x18 6124 } 1072 Sq ft. Deck
Deck 20x10 2000

Characteristics of Proposed Dwelling/Dwelling Additions/Attached Garage/Decks

Cost of Project

(x) Dwelling 54 ft by 40 ft (x) Attached Garage 28 ft x 32 ft \$ 200,000

Outside Dimension (x) Deck/Patio 80 ft x 20 ft () Addition to existing _____ ft x _____ ft N/A

Setback to Side Lot Line 57 ft & Rear Lot Line 74 ft Side Side Setback to Road Right of Way 14 ft 47 to centerline

Setback to Bluff N/A Type of road County Highway

Setback to Wetland N/A 115' to Lake Is wetland protected () Yes (x) No

Setback to OHW (straight horizontal distance) 113' Elevation above OHW (Straight vertical distance) 8'

Setback to septic tank 10' Setback to drainfield 20'

Total No. Bedrooms 4 Maximum height proposed 29' # of Stories 1 3/4

Roof Change () Yes () No N/A Basement () Yes (x) No Walkout Basement (x) Yes () No

Characteristics of Proposed Non Dwelling/Non Dwelling Additions/Detached Garages/Storage Sheds

() Garage _____ ft by _____ ft () Storage Shed _____ ft x _____ ft () Fence _____ ft long x _____ high () other _____ ft x _____ ft

Outside Dimension () Addition to existing structure _____ ft x _____ ft () Fence _____ ft x _____ ft

Setback to Lot Line _____ ft & Rear Lot Line _____ ft Setback to Road Right of Way _____ ft Cost of Project \$ _____

Setback to Bluff _____ None Type of road _____

Setback to Wetland _____ Is wetland protected () Yes () No

Setback to OHW (straight horizontal distance) _____ Elevation above OHW (Straight vertical distance) _____

Setback to septic tank _____ Setback to drainfield _____

Roof Change () Yes () No Maximum height proposed _____ # of Stories _____

Bathroom proposed () Yes () No Sleeping Quarters proposed () Yes () No

*Garages and storage sheds cannot contain amenities for independent human habitation

Characteristics of Proposed Water Oriented Structure*

Cost of Project \$ _____

() Stairway () Deck () Boathouse () Screen Porch () Gazebo () Storage Structure

Outside Dimension _____ ft by _____ ft Sq ft _____

Setback to Lot Line _____ ft & _____ ft None Setback to Bluff _____

Setback to OHW (straight horizontal distance) _____ Elevation above OHW (Straight vertical distance) _____

Setback to septic tank _____ Setback to drainfield _____

Maximum height proposed _____

*Sleeping facilities or water supplies are not permitted in these structures

THIS IS A SITE PERMIT ONLY AND DOES NOT CONSTITUTE A BUILDING PERMIT
AS SET FORTH IN MN STATE STATUTES.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. I also understand that, once issued, a permit is valid for a period of one (1) year from the date of issuance and that Planning and Zoning Staff may visit my property to ensure compliance. If my property is located within the shoreland district, I understand that it is my responsibility to inform the Planning & Zoning Office once the building footings have been constructed. A Site Permit may be revoked at any time upon violation of said Ordinances and approved setbacks. Any changes to this site permit results in nullification of this permit and a new permit will have to be obtained.

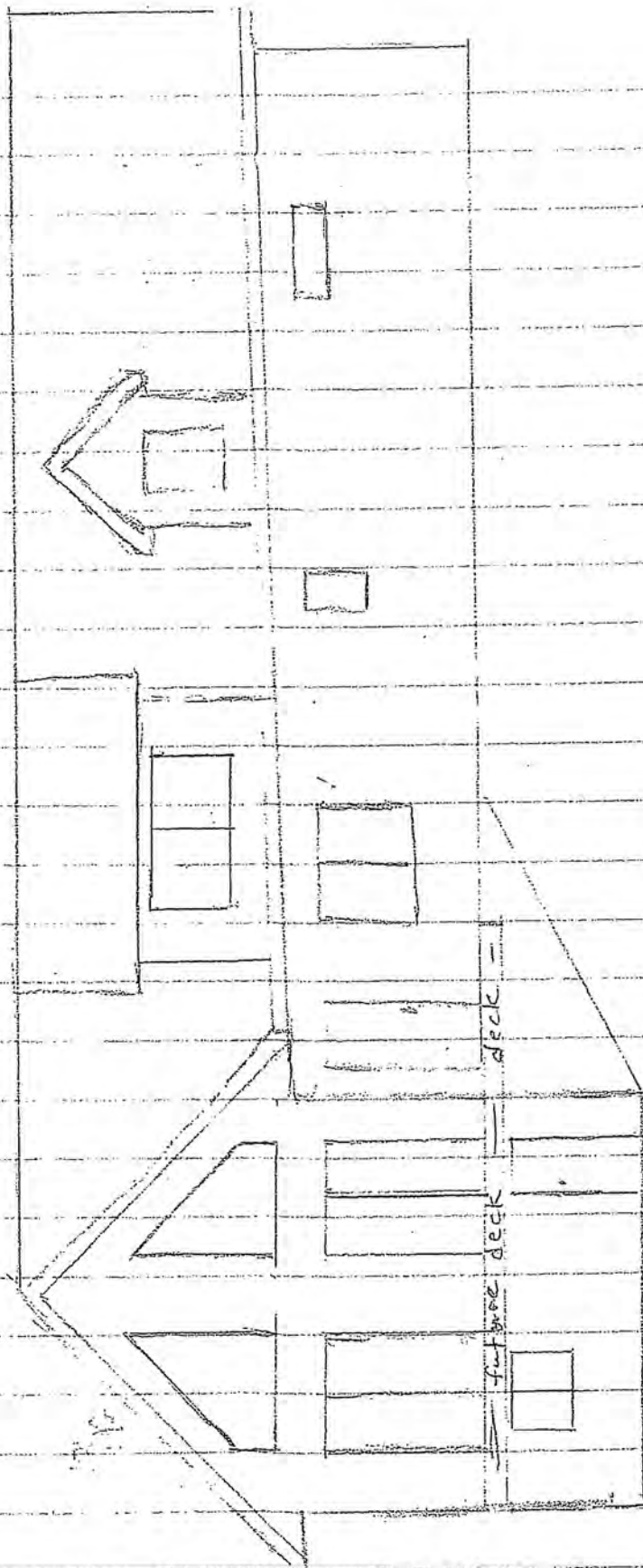
Ryan P. Anderson
Signature

8/12/17
Date

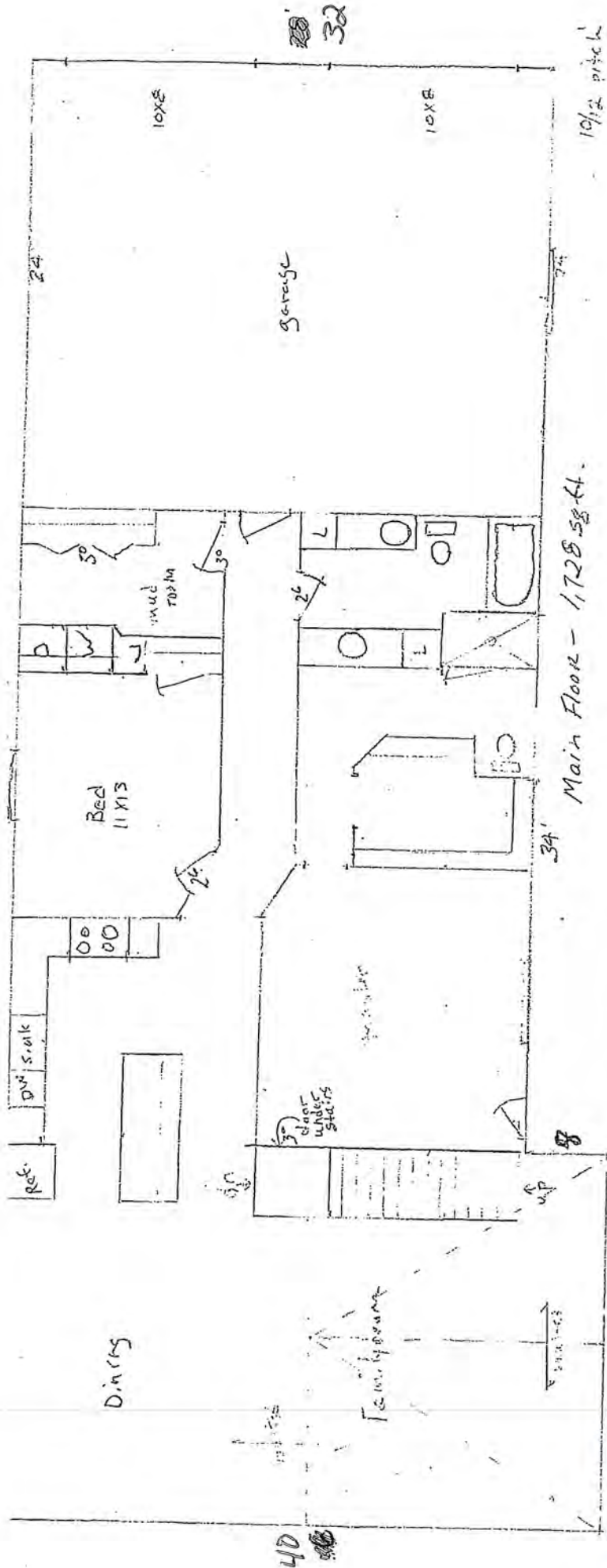
Ryan & Sarah Anderson

Cotton Lake

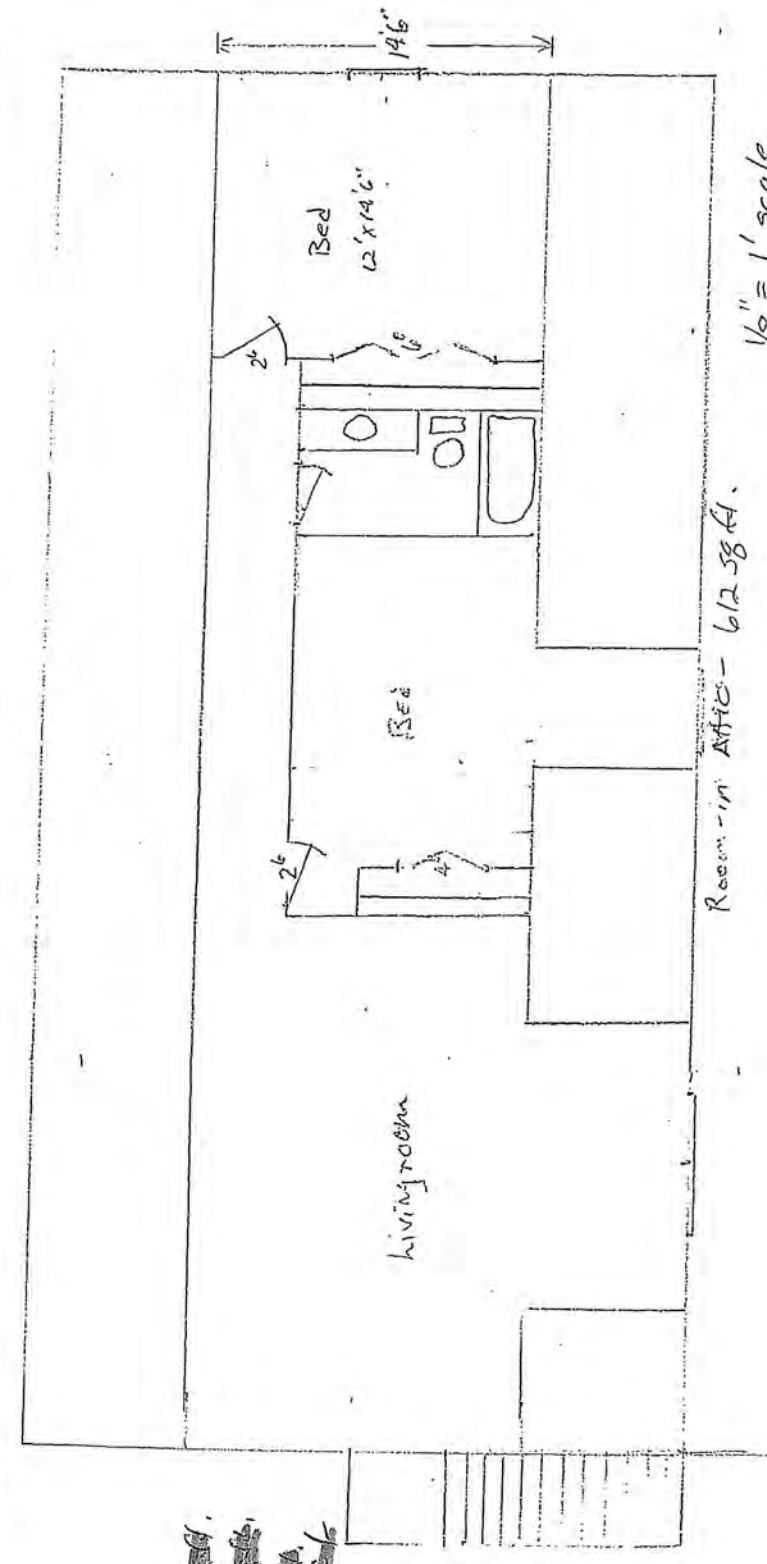
only request



Picture - Not to scale

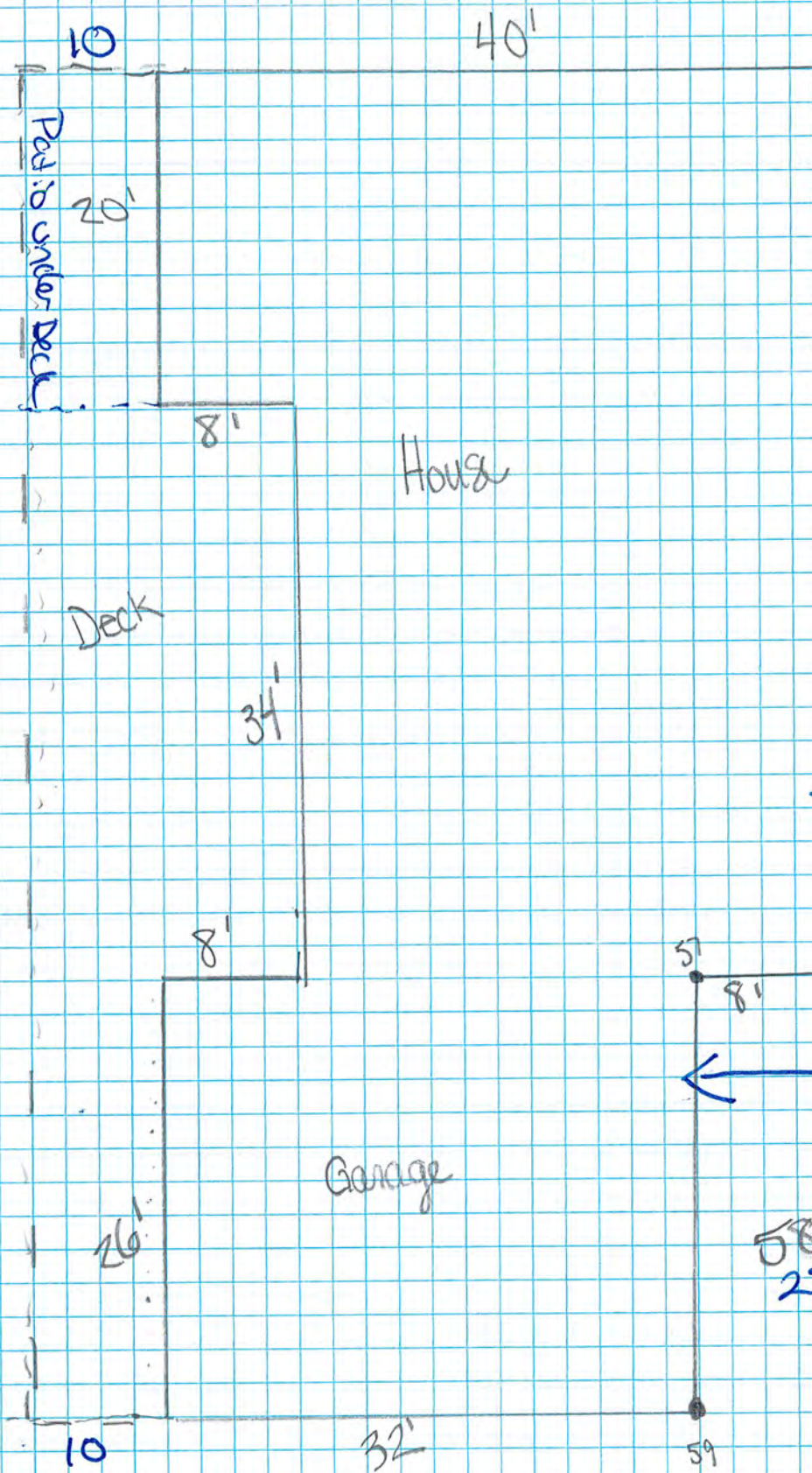


orig plan.



~~finished 34' x 20' = 680 sq ft.~~
~~unfinished 34' x 20' = 680 sq ft.~~
~~down 34' x 20' = 680 sq ft.~~
~~down 34' x 20' = 680 sq ft.~~

113 ft to
OHW



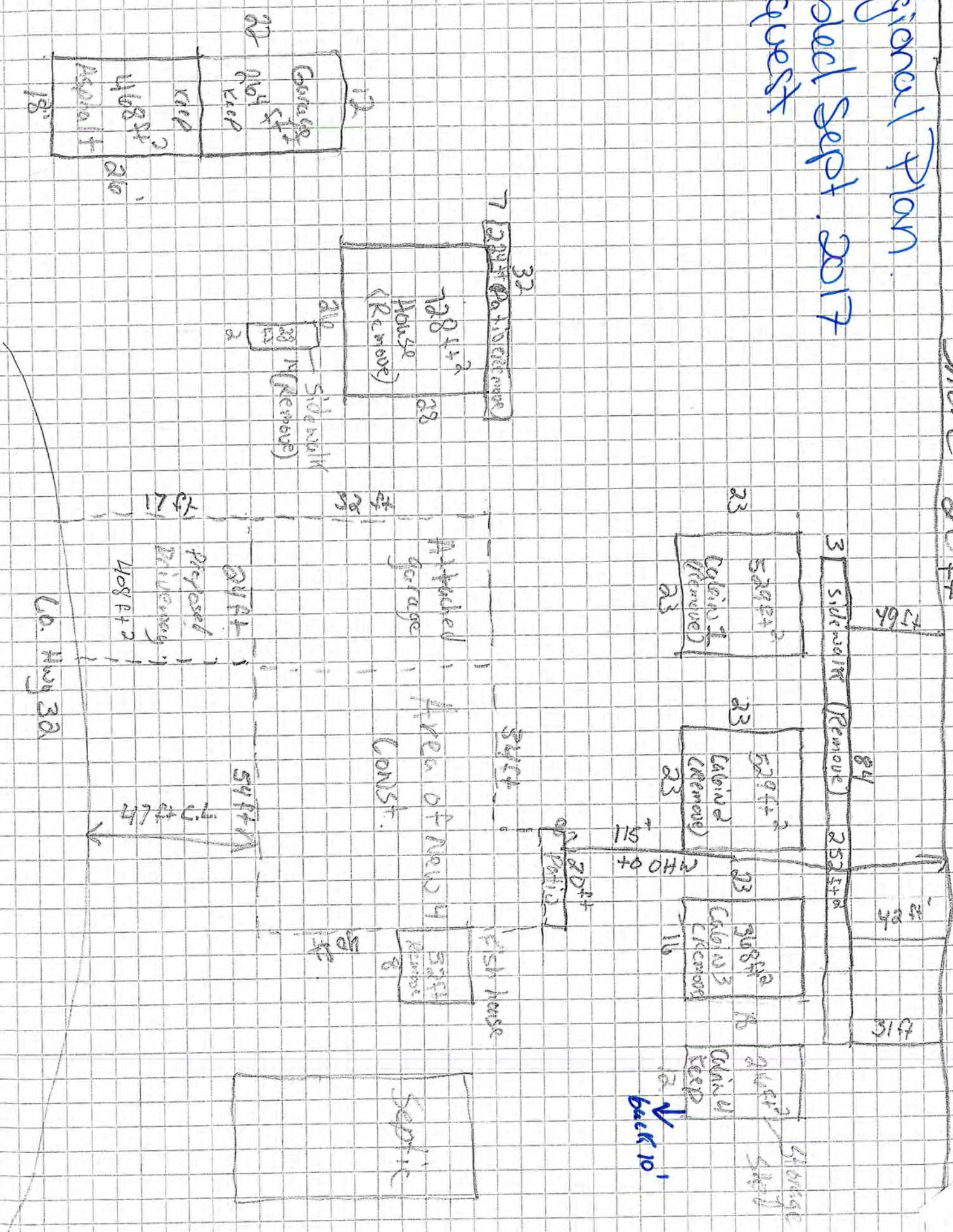
47
50 ft to center line
14 to Row
←

58 ft to CL
25 to Row
←

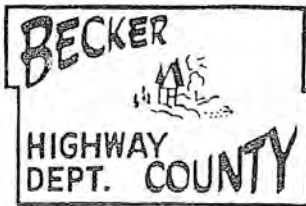
Change design
of house to move
deck back
garage back
8 ft.

Original Plan Tabled Sept. 2017 Request

Shore 20 ft



Date owner notified of application outcome: _____



Becker County Highway Department

200 E. State St.
DETROIT LAKES, MINNESOTA 56501-3128
Office 218-847-4463 Shop 218-847-7516
FAX 218-847-4465

DAVID S. HEYER, P.E.
County Engineer

CURTISS WELDON, Ass't. Engr.
JOHN OKESON, Maint. Supv.

May 10, 1994

Ronald Anderson
Rural Route
Detroit Lakes, MN 56501

RE: Proposed Structure off CSAH #32

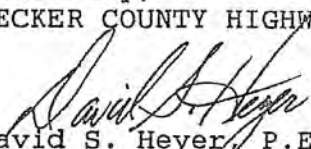
Dear Ron:

Recently you stopped by my office and together we went over your plans to build a garage on your property off CSAH #32 to determine if the garage would encroach on our right of way.

The right of way on CSAH #32 is 33' from centerline - the proposed structure will be built 35' from centerline. Therefore, if this structure is built as planned, it will not encroach on the County right of way.

If the proximity of the proposed garage is similar to other buildings on adjacent lots, then your plans meet our approval also.

Sincerely,
BECKER COUNTY HIGHWAY DEPARTMENT


David S. Heyer, P.E.
Becker County Engineer

DSH:ph

cc: Floyd Svenby ✓

10.0682.000
Neighbor to Ryan
Added 12/1/94
Ryan - unknown
CCPR 0.00

603387

No delinquent taxes and transfer entered
this 5th day of Dec, 2012

Ryan J. Tangle
Becker County Auditor/Treasurer

By [Signature] Deputy

10.0681.000

BECKER COUNTY RECORDER
STATE OF MINNESOTA
Document No. 603387

December 6, 2012 at 10:47 AM

I hereby certify that the within
instrument was recorded in this office.

Darlene Maneval, County Recorder

By SKS Deputy

WARRANTY DEED

**CERTIFICATE OF REAL
ESTATE VALUE FILED. #8943**

STATE DEED TAX DUE HEREON: \$470.91

Date: November 27th, 2012

FOR VALUABLE CONSIDERATION, the Grantor, **Evelyn V. Anderson**, a single person,
hereby conveys and warrants to the Grantees, **Gary E. Anderson and Nita Anderson**, as joint
tenants, real property in **Becker County**, Minnesota, described as follows:

Lots Eight (8), Nine (9), Ten (10) and Eleven (11) of Herman's Cotton Lake Addition, according to the
certified Plat thereof on file and of record in the office of the County Recorder in and for Becker County,
Minnesota.

PN: 10.0681.000

Together with all hereditaments and appurtenances belonging thereto; subject to the following
exceptions: Easements, restrictions, and reservations of record, if any.

 The Grantor(s) certify that the Grantor(s) does/do not know of any wells located on the described real
estate.

 A Well Disclosure Certificate accompanies this document.

X The Grantor(s) certify that the status and number of well(s) on the described real estate has not
changed since the last previously filed Well Disclosure Certificate.

Evelyn V. Anderson
Evelyn V. Anderson

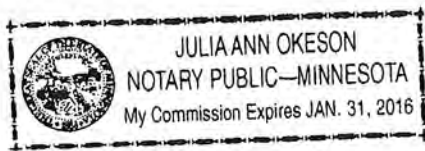
BECKER COUNTY DEED TAX
AMT. PD. \$ 470.91
Receipt # 521943
Becker County Auditor/Treasurer

chg
paid
well
non/std
extra

STATE OF MINNESOTA)
) SS.
COUNTY OF BECKER)

The undersigned Notary Public does hereby certify that **Evelyn V. Anderson, a single person**, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she signed, sealed and delivered said instrument as her free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and notarial seal this 27th day of November, 2012.



Julia Ann Okeson
Notary Public
My commission expires: Jan. 31, 2016

Mail tax statements to:
Gary E. Anderson and Nita Anderson
No Change

To: This document prepared by:
Minnesota Title & Closing Company
819 Washington Avenue
Detroit Lakes, MN 56501
Telephone: (218) 847-1297

644459

BECKER COUNTY RECORDER
STATE OF MINNESOTA
Document No. 644459

August 14, 2017 at 11:23 AM
I hereby certify that the within
instrument was recorded in this office.
Patricia Swenson, County Recorder
By SKS Deputy

No delinquent taxes and transfer entered
this 14th day of Aug, 2017

Mary E Hendrickson
Becker County Auditor/Treasurer

By [Signature] Deputy

10.0681-000

QUIT CLAIM DEED
Individual(s) to Individual(s)

Minnesota Uniform Conveyancing Blanks
Form 10.3.1 (2016)

eCRV number: _____

DEED TAX DUE: \$ 1.65

DATE: 08-10-2017
(month/day/year)

FOR VALUABLE CONSIDERATION, Gary E. Anderson and Nita A. Anderson, husband & wife
(insert name and marital status of each Grantor)

hereby conveys and quitclaims to Ryan P. Anderson and Sarah E. Anderson
(insert name of each Grantee)

hereby conveys and quitclaims to Ryan P. Anderson and Sarah E. Anderson
(insert name of each Grantee) ("Grantee"), as

(Check only one box.)

- ☐ tenants in common,
☒ joint tenants,

(If more than one Grantee is named above and either no box is checked or both boxes are checked,
this conveyance is made to the named Grantees as tenants in common.)

real property in Becker County, Minnesota, legally described as follows:

Section 03 Township 139 Range 040 Herman's Cotton Lake Lots 8, 9, 10 & 11 (Parcel #100681000)

NA
EA
Lots Eight (8), Nine (9), Ten (10) and Eleven (11) of Herman's Cotton
Lake Addition, according to the certified Plat thereof
on file and of record in the office of the County
Recorder in and for Becker County, Minnesota

Consideration of transfer is \$500 or less NA
EA

Check here if all or part of the described real property is Registered (Torrens) ☒

together with all hereditaments and appurtenances belonging thereto.

BECKER COUNTY DEED TAX

AMT. PD. \$ 1.65

Receipt # 657791

Becker County Auditor/Treasurer

chg
paid
well

603387

No delinquent taxes and transfer entered
this 5th day of Dec, 2012

Ryan J. Tanager
Becker County Auditor/Treasurer

By [Signature] Deputy

10.0681.000

BECKER COUNTY RECORDER
STATE OF MINNESOTA

Document No. 603387

December 6, 2012 at 10:47 AM

I hereby certify that the within
instrument was recorded in this office.

Darlene Maneval, County Recorder

By SKS Deputy

WARRANTY DEED

**CERTIFICATE OF REAL
ESTATE VALUE FILED #8943**

STATE DEED TAX DUE HEREON: \$470.91

Date: November 27th, 2012

FOR VALUABLE CONSIDERATION, the Grantor, **Evelyn V. Anderson**, a single person,
hereby conveys and warrants to the Grantees, **Gary E. Anderson and Nita Anderson**, as joint
tenants, real property in **Becker County**, Minnesota, described as follows:

Lots Eight (8), Nine (9), Ten (10) and Eleven (11) of Herman's Cotton Lake Addition, according to the
certified Plat thereof on file and of record in the office of the County Recorder in and for Becker County,
Minnesota.

PN: 10.0681.000

Together with all hereditaments and appurtenances belonging thereto; subject to the following
exceptions: Easements, restrictions, and reservations of record, if any.

— The Grantor(s) certify that the Grantor(s) does/do not know of any wells located on the described real
estate.

— A Well Disclosure Certificate accompanies this document.

X

The Grantor(s) certify that the status and number of well(s) on the described real estate has not
changed since the last previously filed Well Disclosure Certificate.

BECKER COUNTY DEED TAX

AMT. PD. \$ 470.91

Receipt # 5219413

Becker County Auditor/Treasurer

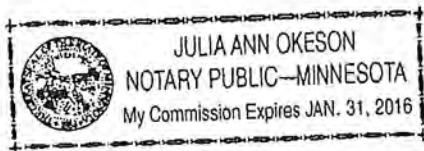
Evelyn V. Anderson
Evelyn V. Anderson

chg
paid
well
non/std
extra

STATE OF MINNESOTA)
) SS.
COUNTY OF BECKER)

The undersigned Notary Public does hereby certify that **Evelyn V. Anderson, a single person**, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she signed, sealed and delivered said instrument as her free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and notarial seal this 27th day of November, 2012.



Julia Ann Okeson
Notary Public
My commission expires: Jan. 31, 2016

Mail tax statements to:
Gary E. Anderson and Nita Anderson
NO Change

To: This document prepared by:
Minnesota Title & Closing Company
819 Washington Avenue
Detroit Lakes, MN 56501
Telephone: (218) 847-1297

**APPLICATION
FOR SEWAGE SYSTEM
CERTIFICATE OF COMPLIANCE**
With The Becker County Zoning Ordinance

Application Number <u>8347</u>
Tax Parcel Number <u>10,0681.000</u>
Fire Number of Project Location

A. GENERAL INFORMATION

1. Applicant's Name (Last, First, M.I.) <u>Anderson, Evelyn</u>		2. Authorized Agent (If applicable)	
3. Mailing Address (Street, RFD, Box Number, City, State, Zip Code) <u>HC 10 Box 242 Robert MN 56578</u>			
4. Day Phone	5. Evening Phone	6. Section <u>3</u>	7. Township <u>Eric</u>

B. PROPERTY DESCRIPTION

1. Lot(s), Block, Subdivision Name <u>Hermans Cotton Lake Beach Lots 8, 9, 10 + 11</u>																															
7. Note: If the property is a metes and bounds description, check here [] and attach a copy of the exact legal description.																															
SEWAGE SYSTEM DATA Anticipated Use a. [] Single Family b. [<input checked="" type="checkbox"/>] Multiple Family c. [] Commercial d. [] Agricultural e. [] Other (specify) Type of System a. [<input checked="" type="checkbox"/>] Septic Tank Only b. [] Drainfield Only c. [] Septic Tank & Drainfield d. [] Holding Tank e. [] Alternative System (specify) Type of Drainfield a. [] Standard System b. [] Mound (pressure distribution) c. [] Mound (gravity distribution) Well Data a. Depth: <u>+50'</u> b. Diameter: <u>4"</u> Type of Well a. [<input checked="" type="checkbox"/>] Drilled b. [] Sand Point	<div style="text-align: center;">1 inch Equals DESIGN</div> <div style="text-align: center;">Show Distance Between Sewage System And Buildings, Property Lines, Lake, Roads And All Wells Within 125 Feet.</div> <table border="0" style="width: 100%;"><thead><tr><th></th><th style="text-align: center;">Tank</th><th style="text-align: center;">Drainfield</th><th></th><th style="text-align: center;">Tank</th><th style="text-align: center;">Drainfield</th></tr></thead><tbody><tr><td>Distances to Well:</td><td style="text-align: center;">- <u>50</u></td><td style="text-align: center;"> </td><td>Distance to Pressure Line:</td><td style="text-align: center;">- <u>40</u></td><td style="text-align: center;"> </td></tr><tr><td>Distance to Building:</td><td style="text-align: center;">- <u>+10'</u></td><td style="text-align: center;"> </td><td>Tank Capacity (gal.) & Area of Drainfield (ft. 2):</td><td style="text-align: center;">- <u>1500</u></td><td style="text-align: center;"> </td></tr><tr><td>Distance to Property Line:</td><td style="text-align: center;">- <u>50</u></td><td style="text-align: center;"> </td><td>Distance to Ordinary High Water Level:</td><td style="text-align: center;">- <u>+75'</u></td><td style="text-align: center;"> </td></tr><tr><td>Distance to Suction Line:</td><td style="text-align: center;">- <u>N/A</u></td><td style="text-align: center;"> </td><td>Drainfield Separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:</td><td style="text-align: center;">-</td><td style="text-align: center;"> </td></tr></tbody></table>		Tank	Drainfield		Tank	Drainfield	Distances to Well:	- <u>50</u>		Distance to Pressure Line:	- <u>40</u>		Distance to Building:	- <u>+10'</u>		Tank Capacity (gal.) & Area of Drainfield (ft. 2):	- <u>1500</u>		Distance to Property Line:	- <u>50</u>		Distance to Ordinary High Water Level:	- <u>+75'</u>		Distance to Suction Line:	- <u>N/A</u>		Drainfield Separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:	-	
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Distance to Suction Line:	- <u>N/A</u>		Drainfield Separation from Highest Known Ground Water Level, Impervious Lens or Soil Mottling:	-																											
I hereby certify with my signature that all data on my application forms, plans and specifications are true and correct: _____																															
Signature of Applicant _____ Date _____																															

TO BE COMPLETED BY ZONING OFFICE

- [] CERTIFICATE IS HEREBY DENIED: (See Back For Reasons)
- [☒] CERTIFICATE IS HEREBY GRANTED; Based upon the application, addendum form, plans, specifications and all other supporting data. With proper maintenance this system can be expected to function satisfactorily, however this is not a guarantee.

BECKER COUNTY ZONING OFFICE
Gabriel Diers
Signature
Zoning Technician 11-21-94
Title Date

BECKER COUNTY

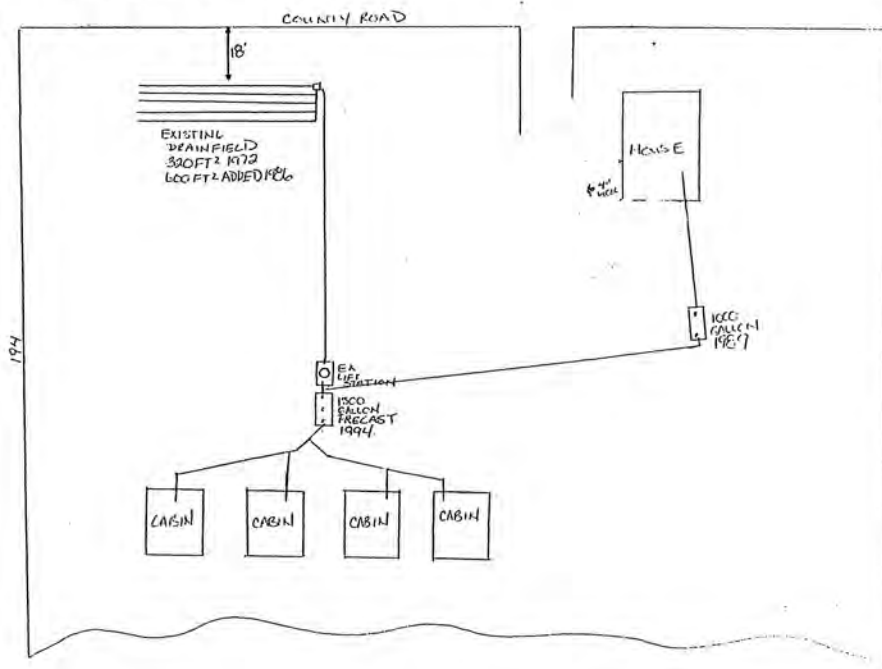
SEWER PERMIT NUMBER 8341

ISSUED TO: Evelyn Anderson DATE: November 21, 1994

WORK AUTHORIZED in acceptance with application on file in the Becker County Zoning Office, site plan and following data:

WORK CATEGORY	SYSTEM	DESIGN	DATA
<input type="checkbox"/> NEW SYSTEM		TANK	DRAINFIELD
<input checked="" type="checkbox"/> REPAIR	DISTANCE TO WELL	50 ft +	
	DISTANCE TO BUILDING	10 ft +	
ANTICIPATED USE	DISTANCE TO PROPERTY LINE	50 ft +	
<input checked="" type="checkbox"/> SINGLE FAMILY	DISTANCE TO SUCTION LINE	n/a	
<input type="checkbox"/> MULTIPLE FAMILY	DISTANCE TO PRESSURE LINE	10 ft +	
<input type="checkbox"/> COMMERCIAL	DISTANCE TO LAKE/STREAM	75 ft +	
<input type="checkbox"/> OTHER	TANK CAPACITY (GALLONS)	1500 gal	
	AREA OF DRAINFIELD (SQ FT)		existing
	DEPTH TO WATER TABLE		

☒ STANDARD SYSTEM ☐ MOUND SYSTEM



Hayd Svenby FAS
Signature of Authorized Agent

Zoning Administrator
Title

November 21, 1994
Date

Permit Expires May 21, 1995

PERMIT MUST BE DISPLAYED AT JOB SITE

NO CHANGES may be made to this permit without written approval from the Becker County Zoning Office. No system shall be covered without inspection. Please notify Becker County Zoning Office one (1) working day prior to time inspection is needed.



These data are provided on an "AS-IS" basis, without warranty of any type, expressed or implied, including but not limited to any warranty as to their performance, merchantability, or fitness for any particular purpose.

1:1,123	
This map is not a substitute for accurate field surveys or for locating actual property lines and any adjacent features.	
Date: 9/13/2017	



Mobile, on-line, paperless or in person!

Need to make a loan payment in the middle of the night?
Want to transfer funds first thing in the morning from your
phone? Like to download bank statements into your
checking software? Need to check account balances
anywhere - anytime? Pop in for cash at the ATM?

and whenever it is convenient for you!

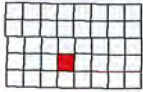


FDIC www.mahnomenbank.com

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103 North Main Street - Mahanomen MN - 218-935-5251 and 205 Main Avenue West - Twin Valley MN - 218-584-5161

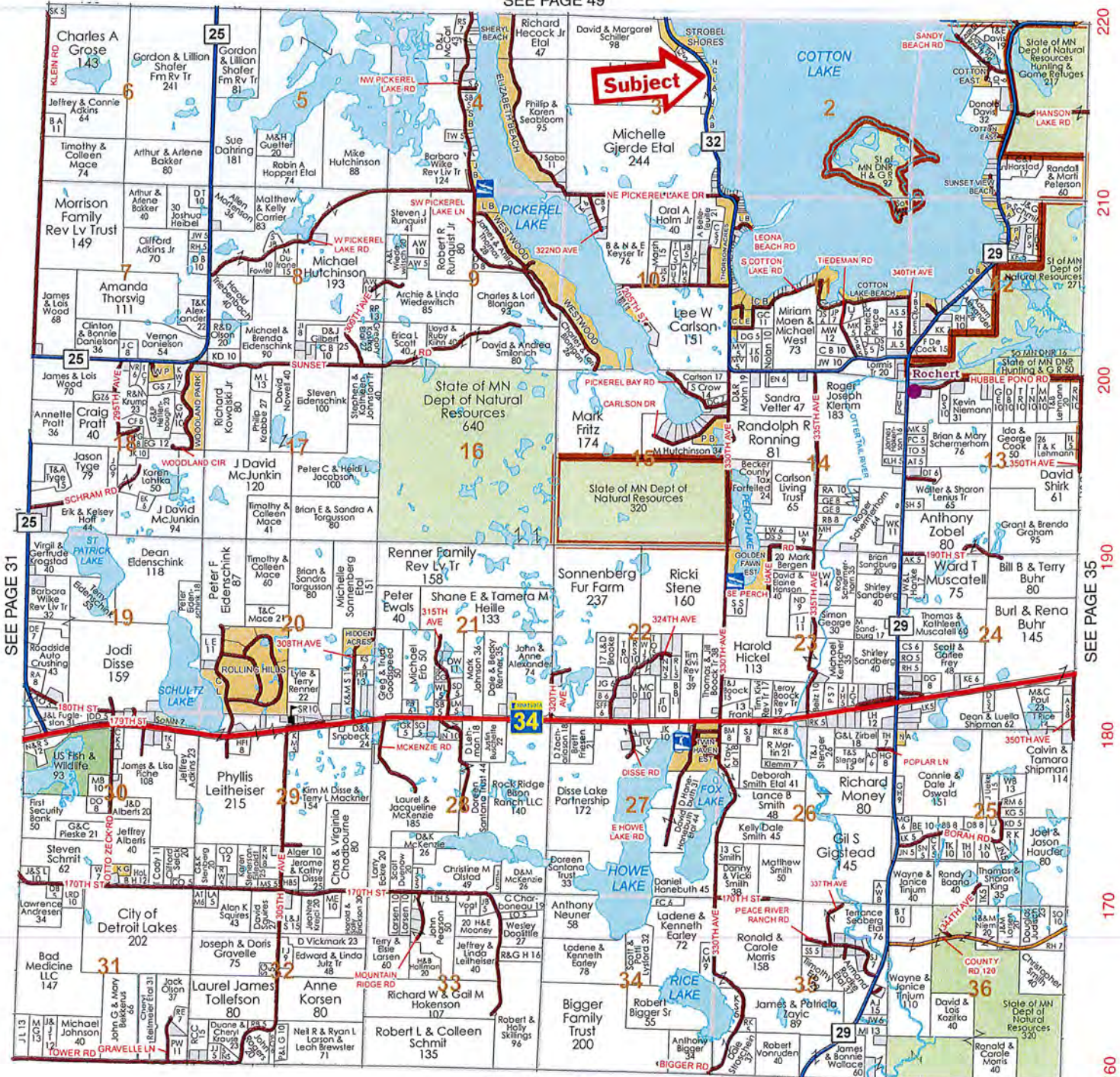


Erie

Township 139N - Range 40W

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SEE PAGE 49



SEE PAGE 17



COUNTY OF BECKER

Planning and Zoning

915 Lake Ave, Detroit Lakes, MN 56501
Phone: 218-846-7314 ~ Fax: 218-846-7266

BOARD OF ADJUSTMENT NOTICE OF PUBLIC HEARING

HEARING DATE AND LOCATION

Thursday, November 9, 2017 @ 7:00 P.M.
Commissioner's Room-Becker County Courthouse
Detroit Lakes, MN. 56501

APPLICANT: Tom & Cynthia Knoll
17259 Co. Hwy. 39
Frazee, MN 56544

Project Location: 43621 218th St., Osage

APPLICATION AND DESCRIPTION OF PROJECT: Request a variance to construct a 10x16 foot addition to a non-conforming structure to be located at sixty (60) feet from the ordinary high water mark of the lake. Also, requesting a variance to construct two 6x24 foot open porch additions and to raise the roof six (6) feet, for a 16x24 foot vertical addition of an existing non-conforming structure both to be located at seventy (70) feet from the OHW of the lake. All structures deviating from the required setback of one hundred feet (100) from a recreational development lake, due to setback issues.

LEGAL LAND DESCRIPTION: Tax ID number: 330310000 Toad Lake; SubdivisionName THE PINES 139 38 SubdivisionCd 33007 Metes and Bounds: LOT 11 & 66' STRIP ADJ REAR & LOTS 12-14; Section 04, TWP 139, Range 38, Toad Lake Township.

Replies/Comments: Interested parties are invited to submit to the Becker County Department of Planning, Zoning, and Land Use, written facts, arguments or objectives before the scheduled date of the Hearing. These statements should bear upon the suitability of the location and the adequacy of the Project and should suggest any appropriate changes believed to be desirable. Replies may be addressed to:

PLANNING AND ZONING DEPARTMENT
915 Lake Avenue
Detroit Lakes, MN. 56501

FAX Number 218-846-7266
EMAIL: zoning@co.becker.mn.us

If you have questions about the Project, feel free to call 218-846-7314.

Jurisdiction: This Project comes under the Regulatory Jurisdiction of the Becker County Zoning Laws.

Regulatory Authority: This Application will be reviewed according to the provisions of the Becker County Zoning Ordinance. The decision whether to issue a Permit will be based on an evaluation of the probable impact including cumulative impacts, of the proposed activity. That decision will reflect the concern for both protection and utilization of important resources. All factors, which may be relevant to the proposal, will be considered including the cumulative effects: Land Use, Shoreline Protection, Water Supply and Conservation, Safety, Economics, in General, the Needs and Welfare of the People.

**** Weather conditions may change the Hearing date and time. If bad weather occurs, please listen to the local Detroit Lakes Radio Stations or contact the Zoning Office, by 4:30 PM on day of Hearing, for possible rescheduling of the Hearing.**



BECKER COUNTY PLANNING & ZONING

915 LAKE AVENUE, DETROIT LAKES, MN 56501

PHONE (218) 846-7314 - FAX (218) 846-7266

VARIANCE APPLICATION

PARCEL	
APP	Variance
YEAR	
SCANNED	

PROPERTY OWNER INFORMATION (as it appears on tax statement, purchase agreement or deed)

First name(s) Tom & Cynthia Last Name Knoll
Mailing Address 17259 CO. Hwy. 39 City, State, Zip Frazee, MN 56544
Phone Number 218-849-9645 - Tom Project Address: 43621 218th St. Osage, MN
Parcel number(s) of property: 849-4034 - Joyce 33.0310.000 Sect - Twp - Range: 4-139-038
Township Name: Toad Lake Legal Description: The Pines Lot 11 & 66' strip & Lots 12-14.

Why is the variance being requested? (Mark all sections that apply)

- ☒ Setback Issues ☐ Lot size not in compliance with minimum standards
☒ Alteration to non-conforming structure ☐ Topographical Issues (hills, slopes, bluffs, wetlands)
☐ Other

Please provide a brief description detailing the above variance request:

Request variances to add an entry way to an existing 1930's cabin to be at 30' from center line instead of required 53' & 60' from OHW instead of 100'. Also replace cabin roof & raise roof 6' for sleeping quarters above, & add open porch on each side of cabin for storage of lawn mower & garden tools etc.

What are you applying for less than the minimum distance (setback) from?

Setback must include decks and patios, current and proposed.

- ☒ Ordinary High Water Mark (OHWM) Proposed Distance (setback) 60' feet
☐ Lot Line Proposed Distance (setback) _____ feet
☒ Road Right of Way (ROW) CENTER LINE Proposed Distance (setback) 30' feet
Type of Road ☒ Township [] County [] State
☐ Crest of bluff Proposed Distance (setback) _____ feet
☐ Impervious Surface Coverage Proposed Impervious Lot Coverage _____ sq ft %

Was the lot recorded prior to 1971?

☒ Yes

☐ No

Was the lot recorded between 1971 & 1992?

☒ Yes

☐ No

Was the lot recorded after 1992?

☐ Yes

☒ No

Will this be a new lot split?

☐ Yes

☒ No

What is the current square footage of the structure? 384

What is the proposed addition square footage? 160 - entry way + 288 for open porches.

What is the current height of the structure? 15'

What is the proposed height of the structure? 21'

Is there a basement to the structure? NO

Will the proposed addition have a basement? NO

Will the roofline of the existing structure be changed? yes

Will the main structural framework of the structure be altered? NO

What is the current percentage of lot coverage? 7.7%

What is the proposed percentage of lot coverage? 8.8%

OTHER INFORMATION NEEDED TO COMPLETE THE APPLICATION:

- ✓ 1. A copy of the deed from the Recorder's Office;
- ✓ 2. Completed Site Application with sketch showing all setbacks, platted or surveyed dimensions of the lot and all existing and proposed buildings;
- ✓ 3. Non-refundable filing fee of \$326.00. **Make check payable to Becker County Zoning.**
4. Is the variance request after the fact? [] Yes [X] No
If yes, after the fact application fee is an additional \$600.00.

Please answer the following questions as they relate to your specific variance request:

- 1) In your opinion, is the Variance in harmony with the purposes and intent of the ordinance?
Yes (X) No () Why or why not?
Due to the placement of the existing
cabin.
- 2) In your opinion, is the Variance consistent with the Becker County Comprehensive Plan?
Yes (X) No () Why or why not?
Adding these additions still leaves the
property well below the required 15% lot coverage.
- 3) In your opinion, does the proposal put property to use in a reasonable manner?
Yes (X) No () Why or why not?
updating this cabin will make it useable
instead of having to tear it down, it is in need
of repair.
- 4) In your opinion, are there circumstances unique to the property?
Yes (X) No () Why or why not?
There is not much room between the
Lake and the creek especially with the
road being in between there.
- 5) In your opinion, will the variance maintain the essential character of the locality?
Yes (X) No () Why or why not?
Residential use now, and these additions
and repairs to the cabin will not change
this use.

The Board of Adjustments must make an affirmative finding on all of the five criteria listed above in order to grant a variance. The applicant for a variance has the burden of proof to show that all of the criteria listed above have been satisfied.

The undersigned certifies that they are familiar with application fees and other associated costs, and also with the procedural requirements of the County and other applicable ordinances.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. Planning and Zoning Staff along with Board of Adjustment Members may visit my property to review submitted plan requests.

Applicant's Signature: Thomas Kroll Date: 10-6-17

(Office Use)

Date Received _____ Accepted [] Incomplete Application [] Date _____

Zoning Administrator

Authorized Agent Form

1. Form must be legible and completed in ink.

2. Check appropriate box(es). Write any specific restrictions on the checked item in the space provided (e.g. "garage site permit" or "valid only on permit applications submitted between 06/01/20XX and 08/01/20XX"). If you want your agent to represent you on a conditional use or variance application and also be authorized to obtain the related permit(s), be sure to check and complete the "permit application" item as well. If an item's box is checked and the accompanying space is left blank, the authorization granted on that item is valid for a period of one year from the date of signature on this form until Becker County Planning and Zoning receives signed, written notification from the property owner(s) stating otherwise or the property's ownership changes.

I (we), Tom Knoll hereby authorize Joyce Holm to act
(landowner-print name) (agent-print name)
as my (our) agent on the following item(s): appropriate box(es)

☒ permit application (write in permit "type" - e.g. site, septic, etc.): Site

☐ plat application: _____

☐ conditional use application: _____

☒ variance application: _____

☐ other: _____

on my (our) property located at:

Tax Parcel Number(s): 33.0310.000 Physical Site Address: 43621 218th st. Osage, mn

Legal Description: _____ 56570

Section: 4 Township: 139 Range: 38 Lot: 11 through 14 + 66' strip
Block: _____ Plat Name: The Pines

Agent Contact Information

Agent address: 13600 E Pearl Lake Rd D.L. MN 56501
Street City State Zip Code
Agent phone #(s): 218-849-4834 Agent fax #: _____

Agent email address: joycehdm@hotmail.com

Thomas Knoll 10-6-17
Property Owner(s) Signature(s) Date

State of Minnesota
County of Becker

On this _____ day of _____ before me personally appeared _____

to me known to be the person(s) described in and who executed the foregoing instrument; and acknowledged

that _____ executed the same as _____ free act and deed.

(Notary Stamp)

Notary Public

Office Use Only:

Date received: _____ Expiration Date: _____



Application for Site Permit
Becker County Planning and Zoning
915 Lake Ave, Detroit Lakes, MN 56501
Phone: 218-846-7314 Fax: 218-846-7266
www.co.becker.mn.us

PARCEL	
APP	SITE
YEAR	
SCANNED	

Project must be staked out on the lot prior to permit being approved **10-6-17**

Please Print or Type All Information

Parcel Number (s)	Property (E911) Address	**911 Address Needed	Legal Description
33.0310.000	43621 218 th St	Osage, MN 56540	The Pines Lot 11 + 66' strip + Lots 12-14

Lake/River Name	Lake/River Class	Township Name	Section	TWP No.	Range
Big Toad	RD	Toad Lake	4	139	038

Property Owner	Last Name	First Name	Mailing Address	Phone
Tom + Cynthia	Knoll		17259 Co Hwy 39	218-849-9645-Tam
Contractor Name Lic #			Frazer, MN 56544	218-849-4834 Joyce Holm

Proposed Project (Check those that apply) *entry way + 2 open porches*

<input type="checkbox"/> New Dwelling	<input checked="" type="checkbox"/> Addition to Dwelling	<input type="checkbox"/> Replacement Dwelling*	<input type="checkbox"/> Mobile/Manfac. Home
<input type="checkbox"/> Attached Garage	<input type="checkbox"/> Detached Garage	<input type="checkbox"/> Storage Structure	<input type="checkbox"/> Addition to Non-dwelling
<input type="checkbox"/> Stairway	<input type="checkbox"/> Deck	<input type="checkbox"/> Recreational Unit	<input type="checkbox"/> Water Oriented Structure
<input type="checkbox"/> Fence	<input checked="" type="checkbox"/> Other <i>Replace</i>	<input type="checkbox"/> Non Conforming Replacement (identify)	

*Existing Dwelling to be removed prior to *roof + raise it 6' on existing cabin.*

Onsite Water Supply (X) Deep Well () Shallow Well Well Depth _____
MN Rules Chapter 4725 (MN well code) requires a 3' minimum structure setback to well
working w/Bergstrom on septic.

Onsite Sewage Treatment System
Type of System *Tank + drainfield* Date of Installation _____ Last Date Certified *10-1-2000*
Must have current certificate of compliance on septic system prior to issuance of a permit

Lot Information Shoreland ☒ (X) Riparian () Non Riparian Non Shoreland _____

Lot Area *40,075.2* sq ft or *.92* acres Water Frontage *200* ft Bluff () Yes (X) No

Impervious coverage refers to anything water cannot pass through. Structures, areas covered by a roof, concrete, asphalt, Class 5, sidewalks, patio pavers, etc. should all be included in this calculation. Decks should be included in this calculation if they have plastic underlayment or impervious surface underneath. Anytime you exceed 15% lot coverage a stormwater management plan and/or mitigation is required. **INCLUDE PROPOSED STRUCTURES IN CALCULATION.**

Please Note: Unless otherwise provided, a minimum of a 12 foot wide driveway from the nearest road right of way to the proposed structure must be included in both your plan and impervious surface calculation.

Impervious Surface	Dimensions	Sq. Footage	Impervious Surface	Dimensions	Sq. Footage
On property			On property		
Ex: Patio	10 x 12	120	(2) proposed open porches	6 x 24 x 2	288
DRIVEWAY	16 x 16	256	2nd cabin existing	20 x 20	400
Driveway	90 x 10	900	Trailer House/porch existing		812
cabin (to be worked on)	16 x 24	384	Sheed existing		336
proposed entry	16 x 10	160	Total Impervious Material		3,536
Impervious Lot Coverage	<i>3,536</i>	<i>40,075.2</i>			
Total Impervious					
Lot Area					

$\frac{3,536}{40,075.2} \times 100 = 8.8\%$

Impervious Coverage Percentage

Topographical Alteration/Earth moving

☒ None () 10 cubic yards or less () 11-50 cubic yards () over 50 cubic yards

Project over 50 cubic yards a storm water management plan must be included with permit application.

Characteristics of Proposed Dwelling/Dwelling Additions/Attached Garage/Decks		Cost of Project
() Dwelling ____ ft by ____ ft	() Attached Garage ____ ft x ____ ft	\$ <u>25,000</u>
Outside Dimension () Deck/Patio ____ ft x ____ ft	<u>entry way</u> (X) Addition to existing <u>16</u> ft x <u>10</u> ft	<u>6'</u> to add sleeping quarters upstairs & extend roof out <u>6'</u> on each overhang for 2 open porches.
Setback to Side Lot Line <u>40</u> & Rear Lot Line <u>+50</u> ft	Setback to Road Right of Way <u>30</u> ft	
Setback to Bluff _____	Type of road <u>Twpshp</u>	
Setback to Wetland _____	Is wetland protected () Yes () No	
Setback to OHW (straight horizontal distance) <u>60'</u> to the New entry way.	Elevation above OHW (Straight vertical distance) _____	
Setback to septic tank <u>10'</u>	Setback to drainfield <u>+50</u>	
Total No. Bedrooms <u>1</u>	Maximum height proposed <u>21'</u>	# of Stories <u>1 3/4</u>
Roof Change (X) Yes () No	Basement () Yes (X) No	Walkout Basement () Yes (X) No

Characteristics of Proposed Non Dwelling/Non Dwelling Additions/Detached Garages/Storage Sheds		Cost of Project
() Garage ____ ft by ____ ft	() Storage Shed ____ ft x ____ ft	() Fence ____ ft long x ____ high () other ____ ft x ____ ft
Outside Dimension () Addition to existing structure ____ ft x ____ ft	() Fence ____ ft x ____ ft	
Setback to Lot Line ____ ft & Rear Lot Line ____ ft	Setback to Road Right of Way ____ ft	\$ _____
Setback to Bluff _____	Type of road _____	
Setback to Wetland _____	Is wetland protected () Yes () No	
Setback to OHW (straight horizontal distance) _____	Elevation above OHW (Straight vertical distance) _____	
Setback to septic tank _____	Setback to drainfield _____	
Roof Change () Yes () No	Maximum height proposed _____	# of Stories _____
Bathroom proposed () Yes () No	Sleeping Quarters proposed () Yes () No	
*Garages and storage sheds cannot contain amenities for independent human habitation		

Characteristics of Proposed Water Oriented Structure*	Cost of Project \$
() Stairway () Deck () Boathouse () Screen Porch () Gazebo () Storage Structure	
Outside Dimension ____ ft by ____ ft	Sq ft _____
Setback to Lot Line ____ ft & ____ ft	Setback to Bluff _____
Setback to OHW (straight horizontal distance) _____	Elevation above OHW (Straight vertical distance) _____
Setback to septic tank _____	Setback to drainfield _____
Maximum height proposed _____	
*Sleeping facilities or water supplies are not permitted in these structures	

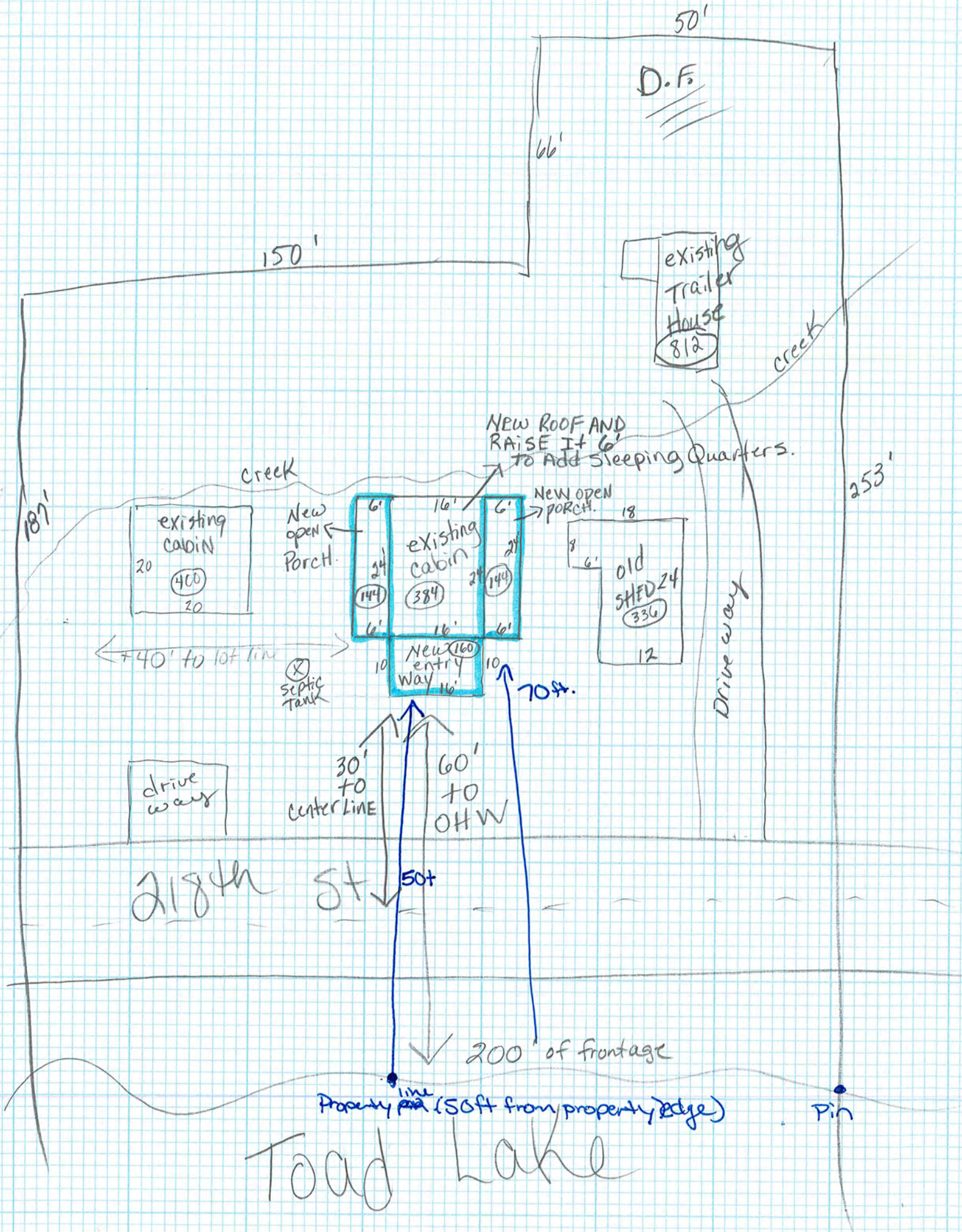
THIS IS A SITE PERMIT ONLY AND DOES NOT CONSTITUTE A BUILDING PERMIT
AS SET FORTH IN MN STATE STATUTES.

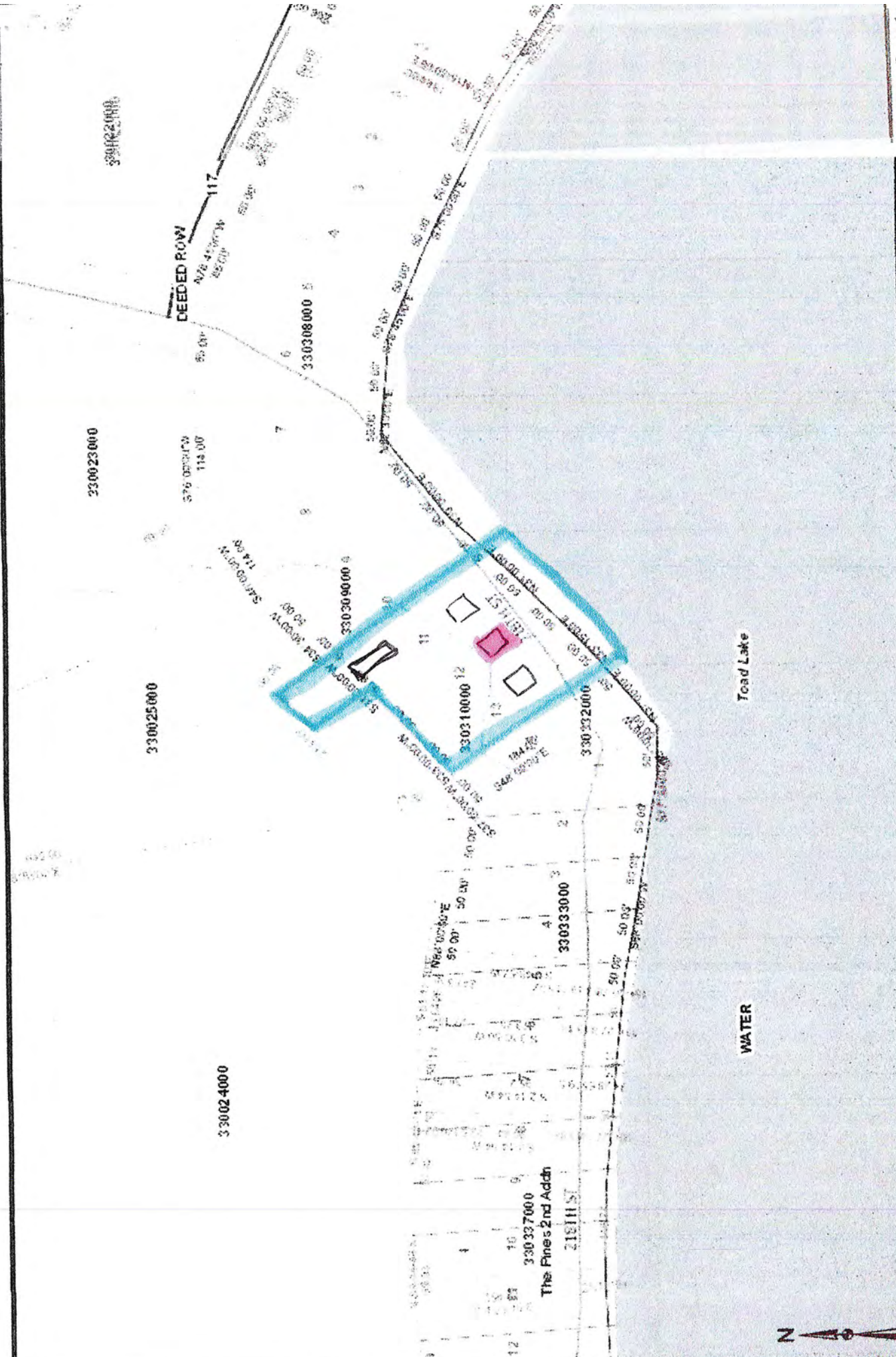
I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. I also understand that, once issued, a permit is valid for a period of one (1) year from the date of issuance. If my property is located within the shoreland district, I understand that it is my responsibility to inform the Planning & Zoning Office once the building footings have been constructed. A Site Permit may be revoked at any time upon violation of said Ordinances and approved setbacks. Any changes to this site permit results in nullification of this permit and a new permit will have to be obtained.

Project must be staked out on the lot prior to approval of permit. Project will be staked by (date) _____

Thomas Knoff
Signature

10-6-17
Date





<p>These data are provided on an "AS-IS" basis, without warranty of any type, expressed or implied, including but not limited to any warranty as to their performance, merchantability, or fitness for</p>	<p>1:1,515</p>	<p>Date: 2/19/2017</p>
<p>Becker County</p>	<p>Becker County</p>	<p>Becker County</p>



Cabin to be worked on



6'6"
↑
raiz
roof

add entry way
Here in
Front.
Tyvek
Entry
rap

6'6"

6'6"

Tyvek
HomeWrap

Tyvek
HomeWrap

T H

Tyvek
HomeWrap

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HomeWrap

Tyvek
HomeWrap

Tyvek
HomeWrap

Tyvek
HomeWrap

Tyvek
HomeWrap

rap

rap

rap

rap

rap

rap

rap

Just a view of
other side.



549148

No delinquent taxes and transfer entered
this 25th day of June, 20 07

Roxanne L. Tanager
Becker County Auditor/Treasurer

By JB Deputy

33-0310-000

33-0025-000

33-0332-000

FORM NO. 27-M-QUIT CLAIM DEED

Individual(s) to Individual(s)

STATE DEED TAX DUE HEREON: \$1.65

Dated: June 15, 2007.

FOR VALUABLE CONSIDERATION, **Thomas Knoll and Cynthia Knoll**, husband and wife, Grantors, hereby convey and quitclaim to Cynthia Knoll, a married person, Grantee, real property in Becker County, Minnesota, described as follows:

Lots Eleven (11), Twelve (12) and Thirteen (13), The Pines, according to the plat thereof on file and of record in the office of the Register of Deeds in and for Becker County, Minnesota.

33-000

33-0310-000

AND

A tract of the width of 50 feet and depth of 66 feet (Part of Gov't Lot No. Three (3), Section Four (4), Township One Hundred Thirty-nine (139) North of Range Thirty-eight (38), West) lying in the rear of and immediately adjacent to said Lot No. Eleven (11) of The Pines, designated on the plat of The Pines as "Road Way" but which was never used as such and which was abandoned for such use upon the location and establishment of said County Aid Road No. Eight (8).

AND

Lot Fourteen (14), The Pines Addition, according to Plat.

33-310

AND

33-0025-000

A Three and Twenty-eight Hundredths (3.28) acre tract of land in Government Lot Four (4), Section Four (4), Township One Hundred Thirty-nine (139) North, Range Thirty-

BECKER COUNTY DEED TAX

AMT. PD. \$ 1.65

Receipt # 3163725
Becker County Auditor/Treasurer

JUN 25 2007

chg
paid
well
non/std
extra

BECKER COUNTY RECORDER
STATE OF MINNESOTA
Document No. 549148

June 25, 2007 at 1:46 PM

I hereby certify that the within
instrument was recorded in this office.

Darlene Maneval, County Recorder

By HB Deputy

eight (38) West of the Fifth (5th) Principal Meridian in Becker County, Minnesota, described as follows: Beginning at the intersection of the southerly line of State Highway Numbered 34 with the Easterly line of said Government Lot 4; thence running South eighty-two degrees fifty-nine minutes West (S 82 degrees 59 minutes West) three hundred fifteen (315.0) feet on and along the Southerly line of said Highway to a steel post seven feet in length; thence South eight degrees fifty-three minutes East (S 08 degrees 53 minutes East) six hundred forty-five (645.0) feet to a steel post set two hundred fifty (250.0) feet from the shore of Toad Lake, said point being also located North eight degrees fifty-three minutes West (N 08 degrees 53 minutes W) seventy-seven and three tenths (77.3) feet from the Northeast Corner of Lot Two (2) of the Subdivision platted and called "2nd Addition to the Pines"; thence running North fifty degrees three minutes East (N 50 degrees 03 minutes E) two hundred fifty-three (253.0) feet to a steel post seven feet in length set on the East Line of the said Gov't Lot 4; thence running five hundred sixteen (516.0) feet northerly along the East line of said Gov't Lot 4 to the point of beginning.

AND

All right, title and interest in and to an easement for driveway purposes, along the East line of Lot 13 of the Pines Addition on Toad Lake, Becker County, Minnesota.

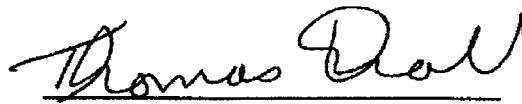
AND

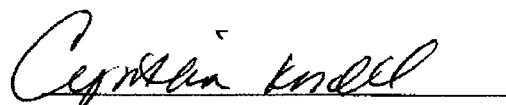
33-0332-000

Lot One (1) of Second Addition to Pines, being a subdivision of part of Lots Three (3) and Four (4), Section 4, Township 139, Range 38, according to certified Plat thereof on file and of record in the office of Register of Deeds in and for Becker County, Minnesota.

together with all hereditaments and appurtenances belonging thereto, subject to the following exceptions: all easements, restrictions, and reservations of record, if any.

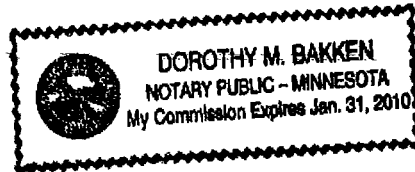
CONSIDERATION OF THIS TRANSFER IS LESS THAN \$500.00.


Thomas Knoll


Cynthia Knoll

STATE OF MINNESOTA)
)ss
COUNTY OF BECKER)

The foregoing instrument was acknowledged before me this 15th day of June, 2007, by Thomas Knoll and Cynthia Knoll, husband and wife, Grantors.



Dorothy Bakken
Notary Public
My commission expires: _____

THIS INSTRUMENT DRAFTED BY:

Brant R. Beeson
BEESON LAW OFFICE, P.A.
611 Summit Avenue, P O Box 70
Detroit Lakes, MN 56502-0070
(218) 844-5000

Send Tax Statements to:
Cynthia Knoll
43621 218th Street
Osage, MN 56570

BRB.lb

Becker County
Auditor-Treasurer Office
915 Lake Avenue
Detroit Lakes, MN 56501
218-846-7311
www.co.becker.mn.us

PIN: 33.0310.000 AIN:
BILL NUMBER: 1090017
LENDER:
OWNER NAME: KNOLL CYNTHIA L

TAXPAYER(S):

CYNTHIA L KNOLL
43621 218TH ST
OSAGE MN 56570

\$\$\$

REFUNDS?
You may be eligible
for one or even two
refunds to reduce
your property tax.
Read the back of
this statement to
find out how to
apply

PROPERTY ADDRESS

43621 218TH ST
OSAGE, MN 56570

DESCRIPTION

Acres: 0.92 Section 04 Township 138
Range 038
SubdivisionName THE PINES 138 38

Line 13 Detail

S-1010/15 SOLIC -40.00
Principal 40.00
Interest 0.00

TAX STATEMENT

2017

2016 Values for taxes payable in

Step	VALUES AND CLASSIFICATION		
	Taxes Payable Year:	2016	2017
1	Estimated Market Value:	156,400	165,300
	Homestead Exclusion:	0	0
	Taxable Market Value:	156,400	165,300
	New Improvements		
	Expired Exclusions:		
2	Property Classification:	Res Non-Hstd	Res Non-Hstd
	Sent in March 2016		
3	PROPOSED TAX		
	Sent in November 2016		
	PROPERTY TAX STATEMENT		
	First half taxes due 05/15/2017		\$752.00
	Second half taxes due 10/15/2017		\$752.00
	Total taxes due in 2017		\$1,504.00

Tax Detail for Your Property:			
Taxes Payable Year:			
		2016	2017
Tax and Credits	1. Use this amount on Form M1PR to see if you are eligible for a property tax refund. File by August 15. If this box is checked, you owe delinquent taxes and are not eligible.	<input type="checkbox"/>	\$0.00
	2. Use these amounts on Form M1PR to see if you are eligible for a special refund.	\$0.00	\$0.00
	3. Property taxes before credits	\$1,398.00	\$1,464.00
	4. Credits that reduce property taxes	\$0.00	\$0.00
	5. Property taxes after credits	\$1,398.00	\$1,464.00
Property Tax by Jurisdiction	6. BECKER COUNTY	\$605.13	\$659.14
	7. TOAD LAKE	\$270.45	\$254.22
	8. State General Tax	\$0.00	\$0.00
	9. SCHOOL DISTRICT 0023	\$82.82	\$95.23
	10. Special Taxing Districts	\$437.07	\$451.45
		\$2.53	\$3.96
		\$0.00	\$0.00
		\$0.00	\$0.00
	11. Non-school voter approved referenda levies	\$0.00	\$0.00
	12. Total property tax before special assessments	\$1,398.00	\$1,464.00
	13. Special assessments	\$40.00	\$40.00
	14. YOUR TOTAL PROPERTY TAX AND SPECIAL ASSESSMENTS	\$1,438.00	\$1,504.00
	Tax Amount Paid		\$0.00

2

2nd Half Payment Stub - Payable 2017

Detach and return this stub with your 2nd half payment.
To avoid penalty, pay on or before October 15, 2017.

Total Property Tax for 2017 \$1,504.00
2nd Half Tax Amount \$752.00
Penalty, Interest, Fee Amount \$0.00
Amount Paid \$0.00
2nd Half Total Amount Due \$752.00
Balance Good Through 10/15/2017

Res Non-Hstd

PIN: 33.0310.000
AIN:

BILL NUMBER: 1090017

TAXPAYER(S): CYNTHIA L KNOLL
43621 218TH ST
OSAGE MN 56570

Paid By _____

MAKE CHECKS PAYABLE TO:

Becker County
Auditor-Treasurer Office
915 Lake Avenue
Detroit Lakes, MN 56501

1

1st Half Payment Stub - Payable 2017

Detach and return this stub with your 1st half payment.
To avoid penalty, pay on or before May 15, 2017.
If your tax is \$100.00 or less, pay the entire tax by May 15, 2017.

Total Property Tax for 2017 \$1,504.00
1st Half Tax Amount \$752.00
Penalty, Interest, Fee Amount \$0.00
Amount Paid \$0.00
1st Half Total Amount Due \$752.00
Balance Good Through 05/15/2017

Res Non-Hstd

PIN: 33.0310.000
AIN:

BILL NUMBER: 1090017

TAXPAYER(S): CYNTHIA L KNOLL
43621 218TH ST
OSAGE MN 56570

Paid By _____

MAKE CHECKS PAYABLE TO:

Becker County
Auditor-Treasurer Office
915 Lake Avenue
Detroit Lakes, MN 56501



Compliance Inspection Form for Existing Individual Sewage Treatment Systems

This form reflects the requirements of the 1996 version of MN Rules Chapter 7080

Minnesota Pollution Control Agency

Note: Local inspection standards may be more or less restrictive than the state requirements. These differences must be made available by the Local Unit of Government.

Date of Inspection: 10-1-00
Property Owner(s) Tom Knoll Telephone (218) 842-3693
Person requesting inspection (if different than owner) _____ Telephone (2) _____
Reason for inspection: _____
Site Address RT 1 bx 389 City Osage, MN
Zip Code 56570 Unit of Government Regulating this property Becker County
Fire No. _____ Parcel No. _____ Township Name Town Lake
Township 139 Range 38W Section 4 Quarter _____

(Check appropriate sewer system component and indicate location on site sketch).

<u>Tank (s):</u>	<u>Soil Treatment System:</u>	<u>Other (briefly describe):</u>	<u>Flow Meter</u>
<input checked="" type="checkbox"/> Septic tank <u>2</u>	<input type="checkbox"/> Rock trench	<input type="checkbox"/> Alternative system _____	Yes <input checked="" type="checkbox"/> <u>NO</u>
<input type="checkbox"/> Aerobic tank	<input type="checkbox"/> Gravelless pipe trench	<input type="checkbox"/> Experimental system _____	If yes, _____
<input checked="" type="checkbox"/> Pump tank	<input type="checkbox"/> Chamber trench	<input type="checkbox"/> Warranted system _____	
<input type="checkbox"/> Holding tank	<input type="checkbox"/> Seepage bed	Exp. Date: _____	
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Mound	<input type="checkbox"/> Other _____	
	<input type="checkbox"/> At-grade		

System Classification

System Built Prior to April 1, 1996 and not Located in Shoreland or Wellhead Protection Area or Serving a Food, Beverage or Lodging Establishment	Any System located in Shoreland or Wellhead Protection Area or Serving a Food, Beverage or Lodging Establishment, plus all systems Built after April 1, 1996
Is the system an imminent public health threat (IPHT)? Upgrade 1. Discharge of sewage to the ground surface? YES NO 10 mo 2. Discharge of sewage to drain tile or surface waters? YES NO 10 mo 3. Sewage backup into dwelling? YES NO 10 mo 4. Situation with the potential to immediately and adversely impact or threaten public health or safety? YES NO 10 mo Is the system failing? 5. Less than TWO feet of vertical separation between system bottom and saturated soil or bedrock? YES NO LGU** 6. A seepage pit, cesspool, drywell, or leaching pit? YES NO LGU**	Is the system an IPHT? Upgrade 1. Discharge of sewage to the ground surface? YES <input checked="" type="checkbox"/> <u>NO</u> 10 mo 2. Discharge of sewage to drain tile or surface waters? YES <input checked="" type="checkbox"/> <u>NO</u> 10 mo 3. Sewage backup into dwelling? YES <input checked="" type="checkbox"/> <u>NO</u> 10 mo 4. Situation with the potential immediately and adversely impact or threaten public health or safety? YES <input checked="" type="checkbox"/> <u>NO</u> 10 mo Is the system failing? 5. Less than THREE feet of vertical separation between system bottom and saturated soil or bedrock? YES <input checked="" type="checkbox"/> <u>NO</u> LGU** 6. A seepage pit, cesspool, drywell, or leaching pit? YES <input checked="" type="checkbox"/> <u>NO</u> LGU**

** LGU = Local Unit of Government ordinance must specify the time period within which the system must be upgraded.

STATUS OF THE SYSTEM

Based on the compliance criteria above the system status is (check one) ☒ in compliance (functioning) ☐ failing ☐ an imminent threat therefore, this document is a (check one) ☒ Certificate of Compliance ☐ Notice of Noncompliance.

What methods were used to make the determinations for the compliance inspection?

locate & inspect tanks used camera inside tanks
visual inspection of grounds & manual soil boring
found leaking inspection pipe - was fixed

Please attach the following:

- 1) Site sketch. Suggested items for drawing include: Well, well setback to system, dwelling or other establishment, tank(s), soil treatment system, reserved soil treatment area, curtain drain, property lines, waterways, and buried lines (those NOT installed by the utility). Include sizes and length and approximate distances from fixed reference points such as streets and buildings.
- 2) Soil boring logs, showing each horizon. Indicate the texture, structure, color, depth of each different soil type, evidence of mottling, bedrock and standing water and whether the material is fill. Locate each boring on attached site sketch.
- 3) A list of any and all requirements of the local ordinance that are different than the state requirements referred to on this form.

CERTIFICATION

A. I hereby certify that all the information I have provided regarding the individual sewage treatment system is true, accurate, and complete.

Property Owner _____ Date _____

B. I hereby certify as a state of Minnesota licensed Inspector and/or Designer I or Qualified Employee Inspector and/or Qualified Employee Designer I that I conducted an investigation in accordance with applicable requirements that accurately determined the compliance status of this system and that my observations recorded are accurate as of this date. No determination of future hydraulic performance has been nor can be made due to unknown conditions during system construction, abuse of the system, inadequate maintenance, or future water usage.

Inspector's name (print) Randy Anderson Phone 612-209-0546

License and/or Registration Number 634 Address P.O. box 1421

Employed by Anderson ON-site Address Detroit Lakes, MN 56501

Valid until 2002 unless the system becomes an imminent threat to public health or safety as defined at Minn. R. 7080.0020, subp. 19a, before that time.

Signature [Signature] Date 10-1-00

Upgrade Criteria

Minnesota Statutes § 115.55 ("law") Upgrade Requirements

Any situation with the potential to immediately and adversely affect or threaten public health or safety, must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period of time if required by local ordinance.

If the local unit of government with jurisdiction over the system has adopted an ordinance containing alternative local standards, the existing system must comply with the ordinance. If the system does not comply with the ordinance, it must be upgraded, replaced, or its use discontinued according to the ordinance.

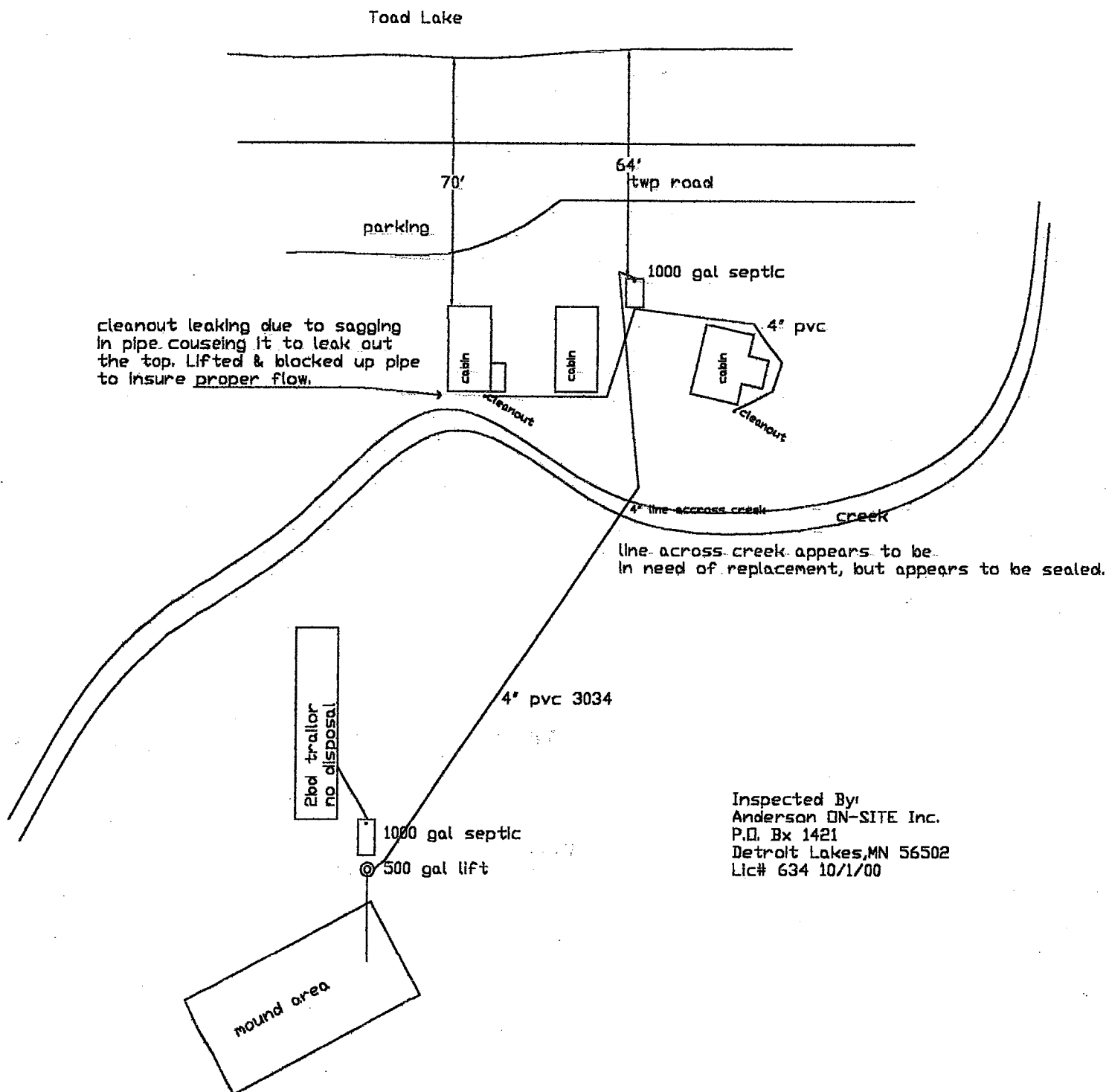
If a seepage pit, drywell, cesspool, or leaching pit exists and the local unit of government with jurisdiction over the system has not adopted local standards to the contrary, the system is failing and must be upgraded, replaced, or its use discontinued within the time required by local ordinance.

If the system fails to provide sufficient groundwater protection, then the local unit of government or its agent shall order that the system be upgraded, replaced, or its use discontinued within the time required by rule or the local ordinance.

If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This does not apply to systems in shoreland areas, wellhead protection areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

Tom Knoll
Rt 1 Bx 389
Osage, MN 56570

N
Scale 1"=40'



Inspected By:
Anderson ON-SITE Inc.
P.O. Bx 1421
Detroit Lakes, MN 56502
Lic# 634 10/1/00



These data are provided on an "AS-IS" basis, without warranty of any type, expressed or implied, including but not limited to any warranty as to their performance, merchantability, or fitness for any particular purpose.

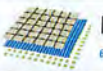
1:749	This map is not a substitute for accurate field surveys or for locating actual property lines and any adjacent features.
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Personalized for your business!

- Aerial Maps
- District/Boundary Maps
- Radius Maps

- Topographical Maps
- City Maps
- Multi-County Maps

- Township Maps
- Hunting Lodge Maps
- Special Feature or Location Maps



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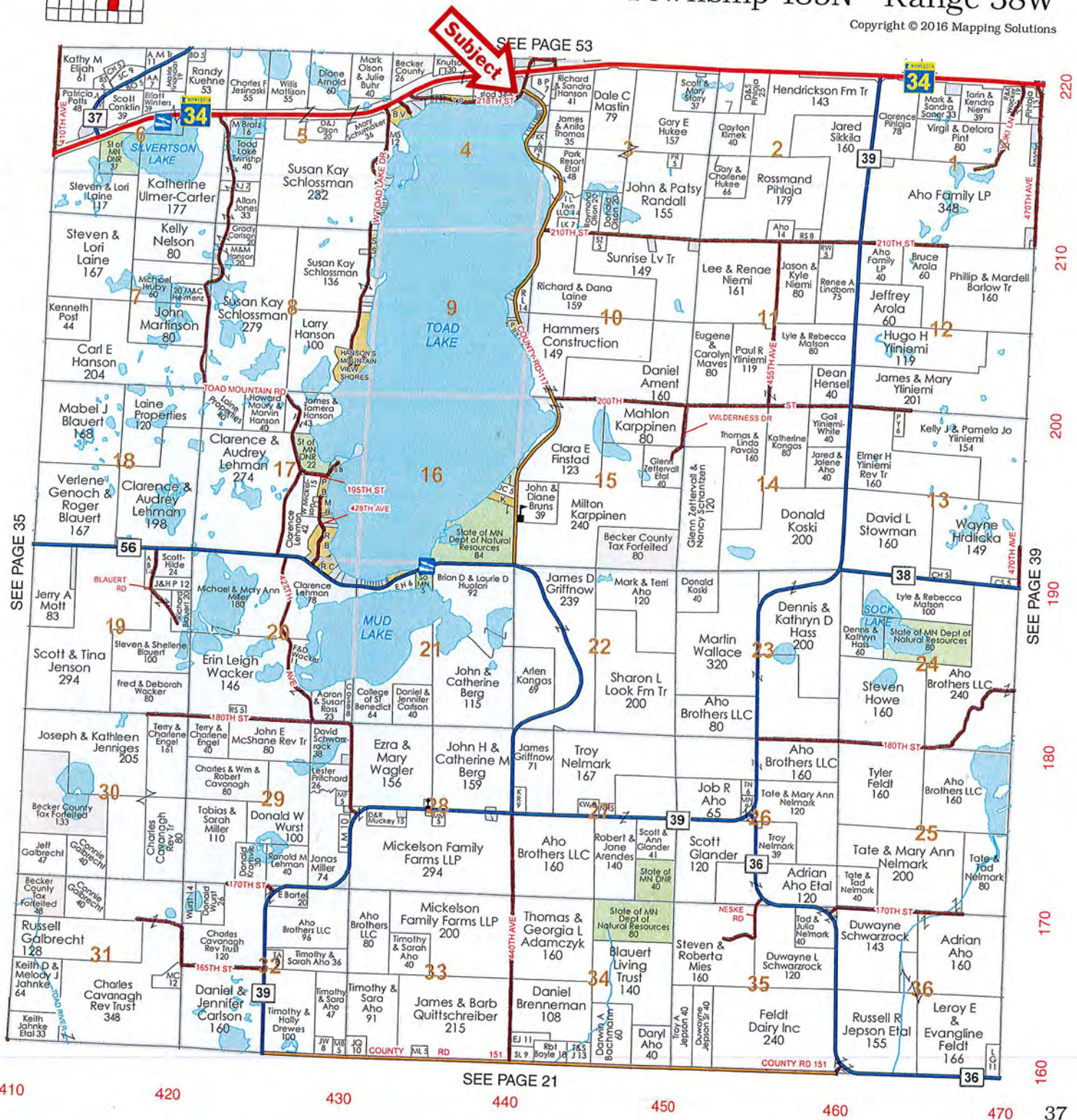
mappingsolutionsGIS.com • (816) 903-3500



Toad Lake

Township 139N - Range 38W

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COUNTY OF BECKER

Planning and Zoning

915 Lake Ave, Detroit Lakes, MN 56501

Phone: 218-846-7314 ~ Fax: 218-846-7266

BOARD OF ADJUSTMENT

NOTICE OF PUBLIC HEARING

****HEARING DATE AND LOCATION****

Thursday, November 9, 2017 @ 7:00 P.M.

Commissioner's Room-Becker County Courthouse
Detroit Lakes, MN. 56501

APPLICANT: Christopher & Rachel Ebeling
1403 81st Ave. S.
Fargo, ND 58104

Project Location: 15350 E. Lakeland Dr., Audubon

APPLICATION AND DESCRIPTION OF PROJECT:

Request a variance to construct a dwelling to be located at seventy-five (75) feet from the ordinary high water mark of the lake, deviating from the required setback of one hundred (100) feet from the OHW of a recreational development lake, due to setback and topographical issues.

LEGAL LAND DESCRIPTION: Tax ID number: 170860000; Little Cormorant Lake; SubdivisionName
LAKELAND ESTATES Block 001 SubdivisionCd 17036 ; Metes and Bounds: LOT 23 EX .98 ACRE IN NW COR
& EX 2.40 AC E OF CHANNEL AKA TRACT D, EX 2 AC TRACT E & EX 3 AC TRACT C
REF:17.0043.001,002,17.0863.00; Section 04, TWP 138, Range 42, Lake Eunice Township.

Replies/Comments: Interested parties are invited to submit to the Becker County Department of Planning, Zoning, and Land Use, written facts, arguments or objectives before the scheduled date of the Hearing. These statements should bear upon the suitability of the location and the adequacy of the Project and should suggest any appropriate changes believed to be desirable. Replies may be addressed to:

PLANNING AND ZONING DEPARTMENT
915 Lake Avenue
Detroit Lakes, MN. 56501

FAX Number 218-846-7266
EMAIL: zoning@co.becker.mn.us

If you have questions about the Project, feel free to call 218-846-7314.

Jurisdiction: This Project comes under the Regulatory Jurisdiction of the Becker County Zoning Laws.

Regulatory Authority: This Application will be reviewed according to the provisions of the Becker County Zoning Ordinance. The decision whether to issue a Permit will be based on an evaluation of the probable impact including cumulative impacts, of the proposed activity. That decision will reflect the concern for both protection and utilization of important resources. All factors, which may be relevant to the proposal, will be considered including the cumulative effects: Land Use, Shoreline Protection, Water Supply and Conservation, Safety, Economics, in General, the Needs and Welfare of the People.

**** Weather conditions may change the Hearing date and time. If bad weather occurs, please listen to the local Detroit Lakes Radio Stations or contact the Zoning Office, by 4:30 PM on day of Hearing, for possible rescheduling of the Hearing.**



BECKER COUNTY PLANNING & ZONING

915 LAKE AVENUE, DETROIT LAKES, MN 56501
PHONE (218) 846-7314 - FAX (218) 846-7266

VARIANCE APPLICATION

PARCEL	
APP	Variance
YEAR	
SCANNED	

PROPERTY OWNER INFORMATION (as it appears on tax statement, purchase agreement or deed)

First name(s) Christopher Dean and Rachel Lee Last Name Ebeling
Mailing Address 1403 81st Ave S City, State, Zip Fargo, ND 58104
Phone Number 701-541-0475 Project Address: 15350 E Lakeland Dr, Audobon, MN
Parcel number(s) of property: 170860000 Sect - Twp - Range: 04 - 138 - 042

Township Name: Lake Eunice Legal Description: Lakeland Estates Block 001

Lot 23 Ex .98 Acre in NW Cor & Ex 2.40 Ac E of Channel AKA Track D, EX 2 AC Tract AC E & EX 3 AC Tract C

Why is the variance being requested? (Mark all sections that apply)

- ☒ Setback Issues ☐ Lot size not in compliance with minimum standards
☐ Alteration to non-conforming structure ☒ Topographical Issues (hills, slopes, bluffs, wetlands)
☐ Other

Please provide a brief description detailing the above variance request:

Requesting a lake setback variance due to topographical concerns with the wetland area behind the home. The current proposed location of the rear corner of the cabin above ground foundation point approaches the same elevation as the wetland behind. We have concerns with the water table entering above and inside the footing, foundation wall and fill materials seasonally and/or during wet years. This is an update to open site permit approved 9/14/17.

What are you applying for less than the minimum distance (setback) from?

Setback must include decks and patios, current and proposed.

- ☒ Ordinary High Water Mark (OHWM) Proposed Distance (setback) 75 feet
☐ Lot Line Proposed Distance (setback) feet
☐ Road Right of Way (ROW) Proposed Distance (setback) feet
 Type of Road [] Township [] County [] State
☐ Crest of bluff Proposed Distance (setback) feet
☐ Impervious Surface Coverage Proposed Impervious Lot Coverage sq ft
 %

Was the lot recorded prior to 1971?

Yes

☐ No

Was the lot recorded between 1971 & 1992?

Yes

☐ No

Was the lot recorded after 1992?

☒ Yes

No

Will this be a new lot split?

Yes

☐ No

What is the current square footage of the structure? N/A - RV on site currently

What is the proposed addition square footage? 1116 sq feet - cabin move

What is the current height of the structure? N/A

What is the proposed height of the structure? 18 feet est

Is there a basement to the structure? N/A

Will the proposed addition have a basement? Crawlspace

Will the roofline of the existing structure be changed? N/A

Will the main structural framework of the structure be altered? N/A

What is the current percentage of lot coverage? 1.7 %

What is the proposed percentage of lot coverage? 4.09 %



OTHER INFORMATION NEEDED TO COMPLETE THE APPLICATION:

1. A copy of the deed from the Recorder's Office;
2. Completed Site Application with sketch showing all setbacks, platted or surveyed dimensions of the lot and all existing and proposed buildings;
3. Non-refundable filing fee of \$326.00. **Make check payable to Becker County Zoning.**
4. Is the variance request after the fact? [] Yes [x] No
If yes, after the fact application fee is an additional \$600.00.

Please answer the following questions as they relate to your specific variance request:

- 1) In your opinion, is the Variance in harmony with the purposes and intent of the ordinance?
Yes (x) No () Why or why not?
The intent of the variance process is to allow for relief in unique situations. Due to the topography of the land, the home fits more appropriately in the requested location without causing a burden on the landscape.
- 2) In your opinion, is the Variance consistent with the Becker County Comprehensive Plan?
Yes (x) No () Why or why not?
Many lakeside properties present unique challenges but can be reasonably accommodated with variances to standard rules.
- 3) In your opinion, does the proposal put property to use in a reasonable manner?
Yes (x) No () Why or why not?
The proposed variance will place the cabin on a more natural location based on the topography of the land, requiring less disturbance to the natural state of the land.
- 4) In your opinion, are there circumstances unique to the property?
Yes (x) No () Why or why not?
The property contains a natural wetland section on the rear side of the proposed cabin, resulting in the land sloping back down towards the wetland.
- 5) In your opinion, will the variance maintain the essential character of the locality?
Yes (x) No () Why or why not?
Placing the cabin in this location better fits the topography of the lot.

The Board of Adjustments must make an affirmative finding on all of the five criteria listed above in order to grant a variance. The applicant for a variance has the burden of proof to show that all of the criteria listed above have been satisfied.

The undersigned certifies that they are familiar with application fees and other associated costs, and also with the procedural requirements of the County and other applicable ordinances.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. Planning and Zoning Staff along with Board of Adjustment Members may visit my property to review submitted plan requests.

Applicant's Signature: Ch. Elz Date: 10/9/17

(Office Use)

Date Received _____ Accepted [] Incomplete Application [] Date _____

Zoning Administrator



Application for Site Permit
Becker County Planning and Zoning
915 Lake Ave, Detroit Lakes, MN 56501
Phone: 218-846-7314 Fax: 218-846-7266
www.co.becker.mn.us

PARCEL	
APP	SITE
YEAR	
SCANNED	

Property will be staked by _____
Date: _____

Please Print or Type All Information

Parcel Number (s)	Property (E911) Address	**911 Address Needed	Legal Description
170860000	15350 E. LAKELAND DR		LAKELAND ESTATES BLOCK 1 LOT 23

Lake/River Name	Lake/River Class	Township Name	Section	TWP No.	Range
CITRE CORMORANT LAKE	LAKE	LAKE EUNICE	04	13B	42

Property Owner	Last Name	First Name	Mailing Address	Phone
EBBLING	CHRIS	RACHEL	1403 81ST AVE S	701-544-0475
Contractor Name Lic #				

Proposed Project (Check those that apply)

<input checked="" type="checkbox"/> New Dwelling	<input type="checkbox"/> Addition to Dwelling	<input type="checkbox"/> Replacement Dwelling*	<input type="checkbox"/> Mobile/Manuf. Home
<input type="checkbox"/> Attached Garage	<input type="checkbox"/> Detached Garage	<input checked="" type="checkbox"/> Storage Structure	<input type="checkbox"/> Addition to Non-dwelling
<input type="checkbox"/> Stairway	<input checked="" type="checkbox"/> Deck	<input type="checkbox"/> Recreational Unit	<input type="checkbox"/> Water Oriented Structure
<input type="checkbox"/> Fence	<input type="checkbox"/> Other	<input type="checkbox"/> Non Conforming Replacement (identify) _____	

*Existing Dwelling to be removed prior to _____

→ RELOCATE ON PROPERTY

Onsite Water Supply () Deep Well () Shallow Well Well Depth _____
MN Rules Chapter 4725 (MN well code) requires a 3' minimum structure setback to well

Onsite Sewage Treatment System (RENNER)
Type of System HOLDING TANK Date of Installation EARLY 2018 Last Date Certified _____
Must have current certificate of compliance on septic system prior to issuance of a permit

Lot Information Shoreland ☒ () Riparian () Non Riparian Non Shoreland _____

Lot Area _____ sq ft or 2.03 acres Water Frontage 390⁺ ft Bluff () Yes (X) No

Impervious coverage refers to anything water cannot pass through. Structures, areas covered by a roof, concrete, asphalt, Class 5, sidewalks, patio pavers, etc. should all be included in this calculation. Decks should be included in this calculation if they have plastic underlayment or impervious surface underneath. Anytime you exceed 15% lot coverage a stormwater management plan and/or mitigation is required. **INCLUDE PROPOSED STRUCTURES IN CALCULATION.**

Please Note: Unless otherwise provided, a minimum of a 12 foot wide driveway from the nearest road right of way to the proposed structure must be included in both your plan and impervious surface calculation.

Impervious Surface	Dimensions	Sq. Footage	Impervious Surface	Dimensions	Sq. Footage
On property			On property		
Ex: Patio	10 x 12	120			
DRIVEWAY	25 x 65	1625	DECK (TBD)	20 x 20 + 10 x 10 + 10 x 10	600 ft ²
CARIN	1116	1116			
SHED	12 x 20	240			
			Total Impervious Material		

Impervious Lot Coverage 3501 ÷ 58,426 Lot Area = .06409 x 100 = 6.409 %
Total Impervious Impervious Coverage Percentage

Topographical Alteration/Earth moving

() None () 10 cubic yards or less (X) 11-50 cubic yards () over 50 cubic yards
Project over 50 cubic yards a storm water management plan must be included.

Characteristics of Proposed Dwelling/Dwelling Additions/Attached Garage/Decks**Cost of Project**☒ Dwelling 32 ft by 38 ft ☐ Attached Garage _____ ft x _____ ft\$ 25,000.00Outside Dimension ☒ Deck/Patio 30 ft x 20 ft ☐ Addition to existing _____ ft x _____ ftSetback to Side Lot Line 110 ft & Rear Lot Line 225 ftSetback to Road Right of Way 95 ftSetback to Bluff NAType of road PRIVATESetback to Wetland 100Is wetland protected ☐ Yes ☒ NoSetback to OHW (straight horizontal distance) 75'Elevation above OHW (Straight vertical distance) 10' ESTSetback to septic tank 30'Setback to drainfield NATotal No. Bedrooms 4Maximum height proposed 22 # of Stories 1.5Roof Change ☐ Yes ☒ NoBasement ☐ Yes ☒ No CRAWLSPACE Walkout Basement ☐ Yes ☐ No**Characteristics of Proposed Non Dwelling/Non Dwelling Additions/Detached Garages/Storage Sheds**☐ Garage _____ ft by _____ ft ☒ Storage Shed 12 ft x 20 ft ☐ Fence _____ ft long x _____ high ☐ other _____ ft x _____ ftEXISTINGOutside Dimension ☐ Addition to existing structure _____ ft x _____ ft ☐ Fence _____ ft x _____ ftSetback to Side Lot Line 140 ft & Rear Lot Line 325 ftSetback to Road Right of Way 75 ft**Cost of Project**\$ 0.00Setback to Bluff NAType of road PRIVATESetback to Wetland 80Is wetland protected ☐ Yes ☒ NoSetback to OHW (straight horizontal distance) 100'Elevation above OHW (Straight vertical distance) 10' ESTSetback to septic tank 50'Setback to drainfield NARoof Change ☐ Yes ☒ NoMaximum height proposed 12' # of Stories 1Bathroom proposed ☐ Yes ☒ NoSleeping Quarters proposed ☐ Yes ☒ No

*Garages and storage sheds cannot contain amenities for independent human habitation

Characteristics of Proposed Water Oriented Structure***Cost of Project \$**☐ Stairway ☐ Deck ☐ Boathouse ☐ Screen Porch ☐ Gazebo ☐ Storage Structure

Outside Dimension _____ ft by _____ ft

Sq ft _____

Setback to Side Lot Line _____ ft & _____ ft

Setback to Bluff _____

Setback to OHW (straight horizontal distance) _____

Elevation above OHW (Straight vertical distance) _____

Setback to septic tank _____

Setback to drainfield _____

Maximum height proposed _____

*Sleeping facilities or water supplies are not permitted in these structures

THIS IS A SITE PERMIT ONLY AND DOES NOT CONSTITUTE A BUILDING PERMIT
AS SET FORTH IN MN STATE STATUTES.

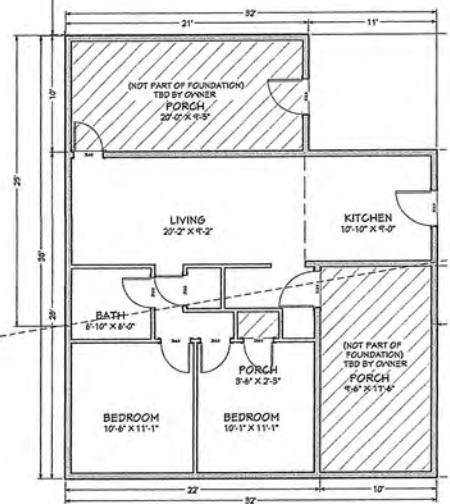
I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. I also understand that, once issued, a permit is valid for a period of one (1) year from the date of issuance and that Planning and Zoning Staff may visit my property to ensure compliance. If my property is located within the shoreland district, I understand that it is my responsibility to inform the Planning & Zoning Office once the building footings have been constructed. A Site Permit may be revoked at any time upon violation of said Ordinances and approved setbacks. Any changes to this site permit results in nullification of this permit and a new permit will have to be obtained.


Signature10/9/17
Date

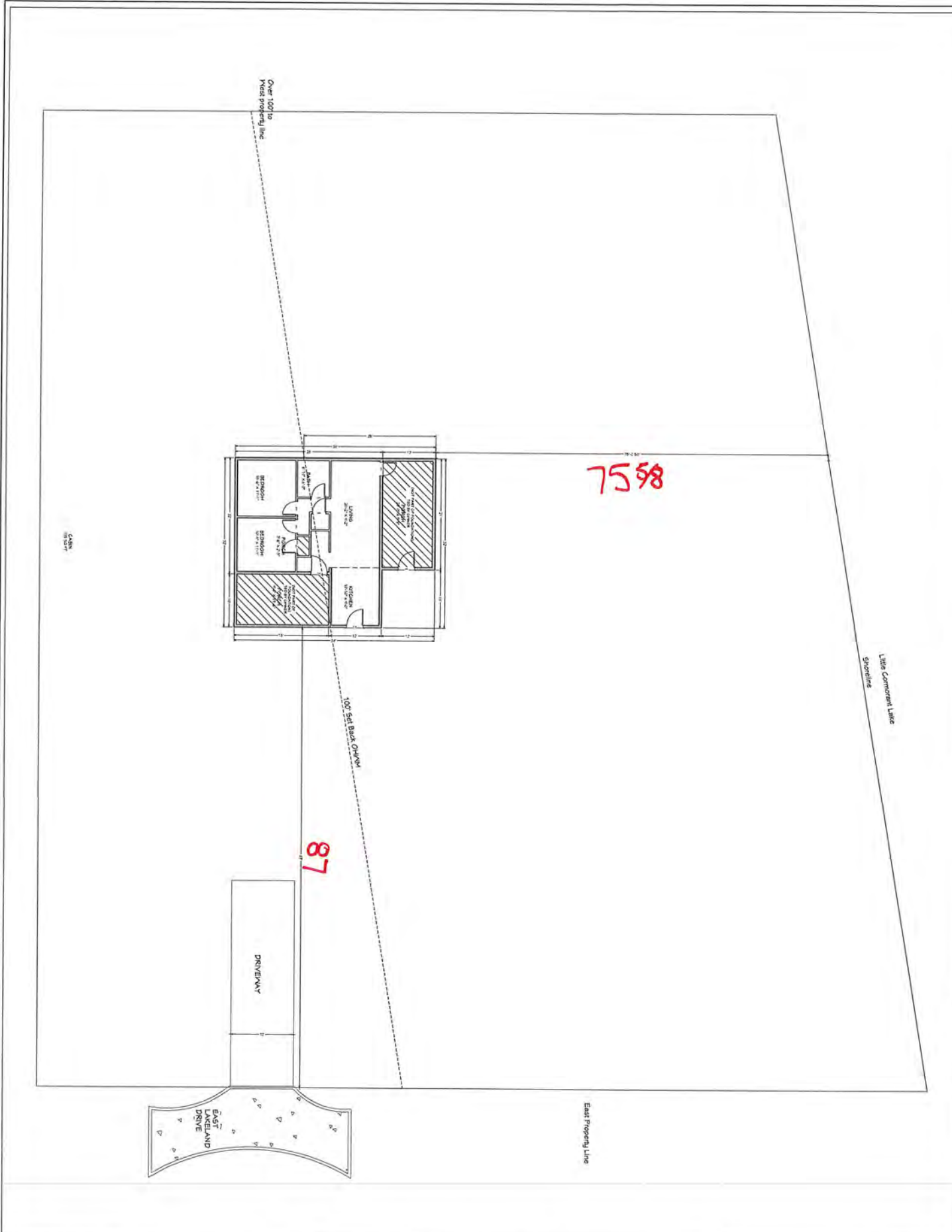
Lake

7585 SL

Over 100' to
West property line



CABIN
105 SQ FT



E-1 SHEET:	SCALE: 3/32" = 1'-0"	DATE: 10/9/2017	DRAWINGS PROVIDED BY: PAUL DAVIS 25130 Co. Hwy. 6 Detroit Lakes, MN 56501 218-847-1800	PROJECT DESCRIPTION: EBELING EAST LAKE LAND DRIVE DETROIT LAKES, MN 56501	PROJECT MANAGER: Mike Lovelace DESIGNER: Jesse Saunders SITE PLAN	NO. DESCRIPTION BY DATE	CLIENT SIGN-OFF
						DATE	

Becker County
Auditor-Treasurer Office
915 Lake Avenue
Detroit Lakes, MN 56501
218-846-7311
www.co.becker.mn.us

PIN: 17.0860.000
BILL NUMBER: 1083085
LENDER:
OWNER NAME: EBELING CHRISTOPHER DEAN

AIN:

TAXPAYER(S):

CHRISTOPHER DEAN EBELING & RACHEL LEE EB
1403 81ST AVE S
FARGO ND 58104

\$\$\$

REFUNDS?
You may be eligible
for one or even two
refunds to reduce
your property tax.
Read the back of
this statement to
find out how to
apply

PROPERTY ADDRESS

DESCRIPTION
Section 04 Township 138 Range 042
SubdivisionName LAKE AND
ESTATES Block 001 SubdivisionC

TAX STATEMENT

2017

2016 Values for taxes payable in

VALUES AND CLASSIFICATION		
Taxes Payable Year:	2016	2017
Estimated Market Value:	115,500	115,600
Homestead Exclusion:	0	0
Taxable Market Value:	115,500	115,600
New Improvements		
Expired Exclusions:		
Property Classification:	Seasonal	Seasonal
Sent in March 2016		
Step 1		
Step 2	PROPOSED TAX	
	Sent in November 2016	
		918.00
Step 3	PROPERTY TAX STATEMENT	
	First half taxes due 05/15/2017	\$458.00
	Second half taxes due 10/15/2017	\$458.00
	Total taxes due in 2017	\$916.00

Tax Detail for Your Property:			\$916.00	
Taxes Payable Year				
		2016	2017	
	1. Use this amount on Form M1PR to see if you are eligible for a property tax refund. File by August 15. If this box is checked, you owe delinquent taxes and are not eligible.	<input type="checkbox"/>	\$0.00	
	2. Use these amounts on Form M1PR to see if you are eligible for a special refund.	\$0.00		
Tax and Credits	3. Property taxes before credits	\$902.00	\$916.00	
	4. Credits that reduce property taxes			
	A. Agricultural market value credit	\$0.00	\$0.00	
	B. Other credits	\$0.00	\$0.00	
	5. Property taxes after credits	\$902.00	\$916.00	
Property Tax by Jurisdiction	6. BECKER COUNTY	A. County	\$446.99	\$460.74
	7. LAKE EUNICE		\$120.57	\$138.84
	8. State General Tax		\$148.08	\$145.90
	9. SCHOOL DISTRICT 2689	A. Voter approved levies	\$128.54	\$131.61
		B. Other local levies	\$55.95	\$36.14
	10. Special Taxing Districts	A. BC EDA	\$1.87	\$2.77
		B. Others	\$0.00	\$0.00
		C. TIF	\$0.00	\$0.00
	11. Non-school voter approved referenda levies		\$0.00	\$0.00
	12. Total property tax before special assessments		\$902.00	\$916.00
		13. Special assessments	\$0.00	\$0.00
		14. YOUR TOTAL PROPERTY TAX AND SPECIAL ASSESSMENTS	\$902.00	\$916.00
	Tax Amount Paid		\$0.00	

2

2nd Half Payment Stub - Payable 2017

Detach and return this stub with your 2nd half payment.
To avoid penalty, pay on or before October 15, 2017.

PIN: 17.0860.000
AIN:
BILL NUMBER: 1083085
TAXPAYER(S):

Paid By

CHRISTOPHER DEAN EBELING & RACHEL LEE
EB
1403 81ST AVE S
FARGO ND 58104

MAKE CHECKS PAYABLE TO:

Becker County
Auditor-Treasurer Office
915 Lake Avenue
Detroit Lakes, MN 56501

Total Property Tax for 2017 \$916.00
2nd Half Tax Amount \$458.00
Penalty, Interest, Fee Amount \$0.00
Amount Paid \$0.00
2nd Half Total Amount Due \$458.00
Balance Good Through 10/15/2017
Seasonal

1

1st Half Payment Stub - Payable 2017

Detach and return this stub with your 1st half payment.
To avoid penalty, pay on or before May 15, 2017.
If your tax is \$100.00 or less, pay the entire tax by May 15, 2017.

PIN: 17.0860.000
AIN:
BILL NUMBER: 1083085
TAXPAYER(S):

Paid By

CHRISTOPHER DEAN EBELING & RACHEL LEE
EB
1403 81ST AVE S
FARGO ND 58104

MAKE CHECKS PAYABLE TO:

Becker County
Auditor-Treasurer Office
915 Lake Avenue
Detroit Lakes, MN 56501

Total Property Tax for 2017 \$916.00
1st Half Tax Amount \$458.00
Penalty, Interest, Fee Amount \$0.00
Amount Paid \$0.00
1st Half Total Amount Due \$458.00
Balance Good Through 05/15/2017
Seasonal

Onsite Septic System Application

Becker County Planning & Zoning
915 Lake Ave, Detroit Lakes, MN 56501
Phone (218)-846-7314; Fax (218)-846-7266

PARCEL	
APP	SEPTIC
YEAR	
SCANNED	

RECEIVED
SEP 14 2017

1. PROPERTY DATA (as it appears on the tax statement, purchase agreement or deed)

Parcel Number(s) of property where the system will be installed: 170860000

Is this a split of an existing property? Yes ☒ No ☐

(If yes and a parcel number has not yet been assigned, indicate the main parcel number from which the new parcel was split.)

Section 4 Township 138 Range 42 Township Name Lake Eunice

Lake Name Little Corm Lake Classification RD

Legal Description: Lake land Est Block 1 Lot 23

Project Address: 15350 E Lakeland Dr.

2. PROPERTY OWNER INFORMATION (as it appears on the tax statement, purchase agreement or deed)

Owner's First Name Christopher Owner's Last Name Ebeling

Mailing Address 1403 81st Ave S City, State, Zip Fargo ND. 58104

Phone Number _____

3. DESIGNER/INSTALLER INFORMATION

Designer Name Rick Renner Company Name Renner Ex. LLC License # 2567

Address 14306 W Hwy 11 Audubon Phone Number 439-3514

Installer Name Same Company Name _____ License # _____

Address _____ Phone Number _____

4. SYSTEM DESIGN INFORMATION

System Status

- ☒ Vacant Lot-No existing system-new structure
☐ Replacement - structure removed and being rebuilt
☐ Failing -Replacement- cesspool/seepage pit or other
☐ Enlargement of system-Undersized
☐ Repairs Needed to existing
☐ Additional system on property

What will new system serve? Check one

- ☒ Dwelling
☐ Resort/Commercial
☐ Commercial (Non-resort)
☐ Other - explain below _____

9-2-17 Date of site
evaluation

Design Flow 600 Gallons Per Day

Number of Bedrooms 4

Garbage Disposal Yes ☒ No ☐

Dishwasher Yes ☒ No ☐

Lift station in House Yes ☒ No ☐

Grinder pump in House Yes ☒ No ☐

Well Depth to be Drilled
Depth of other wells within
100 ft of system _____

Original Soil ☒ Compacted Soil _____

Type of Soil Observation

Pit ☐ Probe ☒ Boring

Depth to Restricting Layer _____

Maximum Depth of System _____

Size of All Tanks to be installed

☐ gal Single Compartment Septic Tank
☐ gal Compartmented Tank 2000
☐ Pit Privy

☐ gal Separate Lift Station
☐ gal Holding Tank
☐ Existing Tank to be used

☐ Existing tank w/new Additional Tank
☐ Existing tank w/new Lift Station
☐ Holding Tank with Privy

Total Number of tanks to be installed in this system 1 (This # will be reported to MPCA at end of year.)

PARCEL	
APP	SEPTIC
YEAR	

Type of Drainfield Full Size of Drainfield Reduced/Warrantied size

_____ Chamber Trench _____ sq ft _____ sq ft

_____ Rock Trench _____ sq ft _____ sq ft

_____ Gravelless _____ sq ft _____ sq ft

_____ Mound _____ sq ft *** _____ sq ft

_____ Pressure Bed _____ sq ft *** _____ sq ft

_____ Seepage Bed _____ sq ft *** _____ sq ft

_____ At-grade _____ sq ft *** _____ sq ft

_____ Alternative / _____ sq ft *** ***Attach Worksheets

Performance

Type of chamber _____

Depth of Rock _____

Alarm? Yes X No _____

Type of Alarm Float

Size of Lift Pump _____

Size of Lift Line _____

PROPOSED SETBACKS

TANK	DRAINFIELD
50' +	
30'	
40' +	
75'	

Distance to Well _____

Distance to Building _____

Distance to Property Line _____

Distance to OHW of Lake _____

Distance to Pressure Line _____

Distance to Wetland/Protected Water _____

Perc Rate _____ Soil Sizing Factor _____ *If SSF other than .83, attach Perc Test Data

Soil Borings (three are required)

Depth	Texture	Color	Structure		Depth	Texture	Color	Structure

Depth	Texture	Color	Structure		Depth	Texture	Color	Structure

5. REQUIRED DOCUMENTS

U of MN worksheets are required for mounds, pressure beds, seepage beds, at-grades or Type IV or Type V systems. Are the required worksheets attached? _____ Yes X No

6. DESIGNER'S CERTIFIED STATEMENT

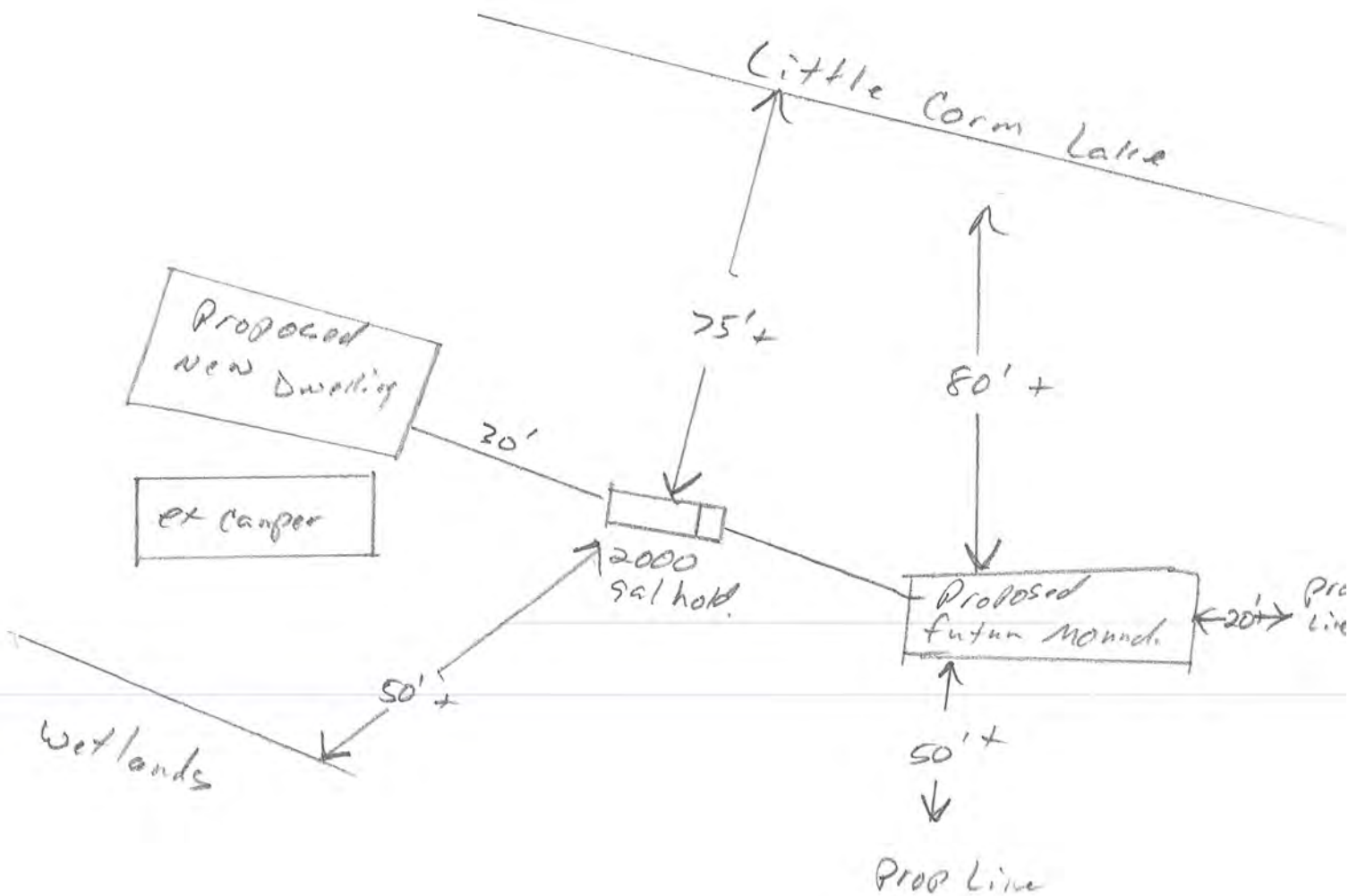
I, Rick Renner certify that I have completed the preceding design work in accordance with all applicable requirements (including, but not limited to Minnesota Chapter 7080 and the Becker County Individual Sewage Treatment System Ordinance).

Signature of Designer _____ Date 9-13-17

SKETCH OF PROPERTY

Please sketch all structures and septic systems on the property;
Include setbacks and wells within 100 feet of the property.

PARCEL	
APP	SEPTIC INSPECTION
YEAR	



APP	SEPTIC
YEAR	

***** FOR OFFICE USE ONLY *****

Application Approved by: Linda D. Hall Date: 9/18/17
 Amount Paid \$150.00 Receipt Number _____ Permit Number _____

NOTES: _____

INSPECTION REPORT

Home Information

Does the structure contain any of the following elements?

Garbage disposer ☐ Yes ☐ No Dishwasher ☐ Yes ☐ No
 Grinder pump ☐ Yes ☐ No Lift pump in basement ☐ Yes ☐ No
 Effluent screen installed? ☐ Yes ☐ No Effluent screen manufacturer _____

Alarm required? ☐ Yes ☐ No Alarm Type _____ Alarm manufacturer _____

Lift pump in system? ☐ Yes ☐ No Pump manufacturer _____

Number of bedrooms _____

Component Information

Tank size _____ Tank manufacturer _____
 Drainfield size _____
 Drainfield medium _____ Medium manufacturer _____
 Drainfield medium size/depth _____

Soil Verification

Vertical separation verified for Boring #1 on _____ Depth _____
 Vertical separation verified for Boring #2 on _____ Depth _____
 Vertical separation verified for Boring #3 on _____ Depth _____

Setback Verification

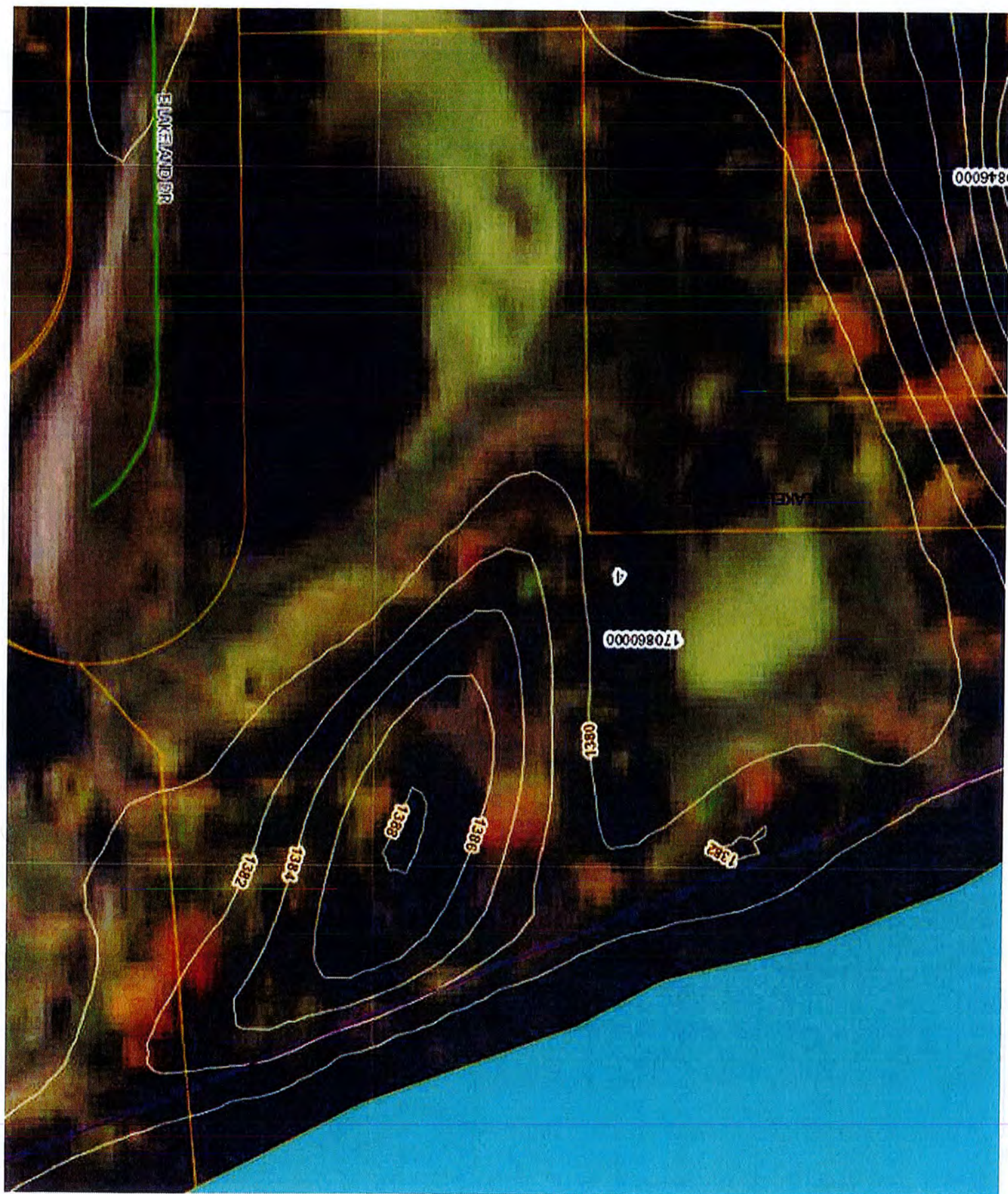
	TANK	DRAINFIELD
Distance to Well	_____	_____
Distance to Building	_____	_____
Distance to Property Line	_____	_____
Distance to OHW of Lake	_____	_____
Distance to Pressure Line	_____	_____
Distance to Wetland/Protected Water	_____	_____

Date System Installed _____ Installer _____ Inspector _____

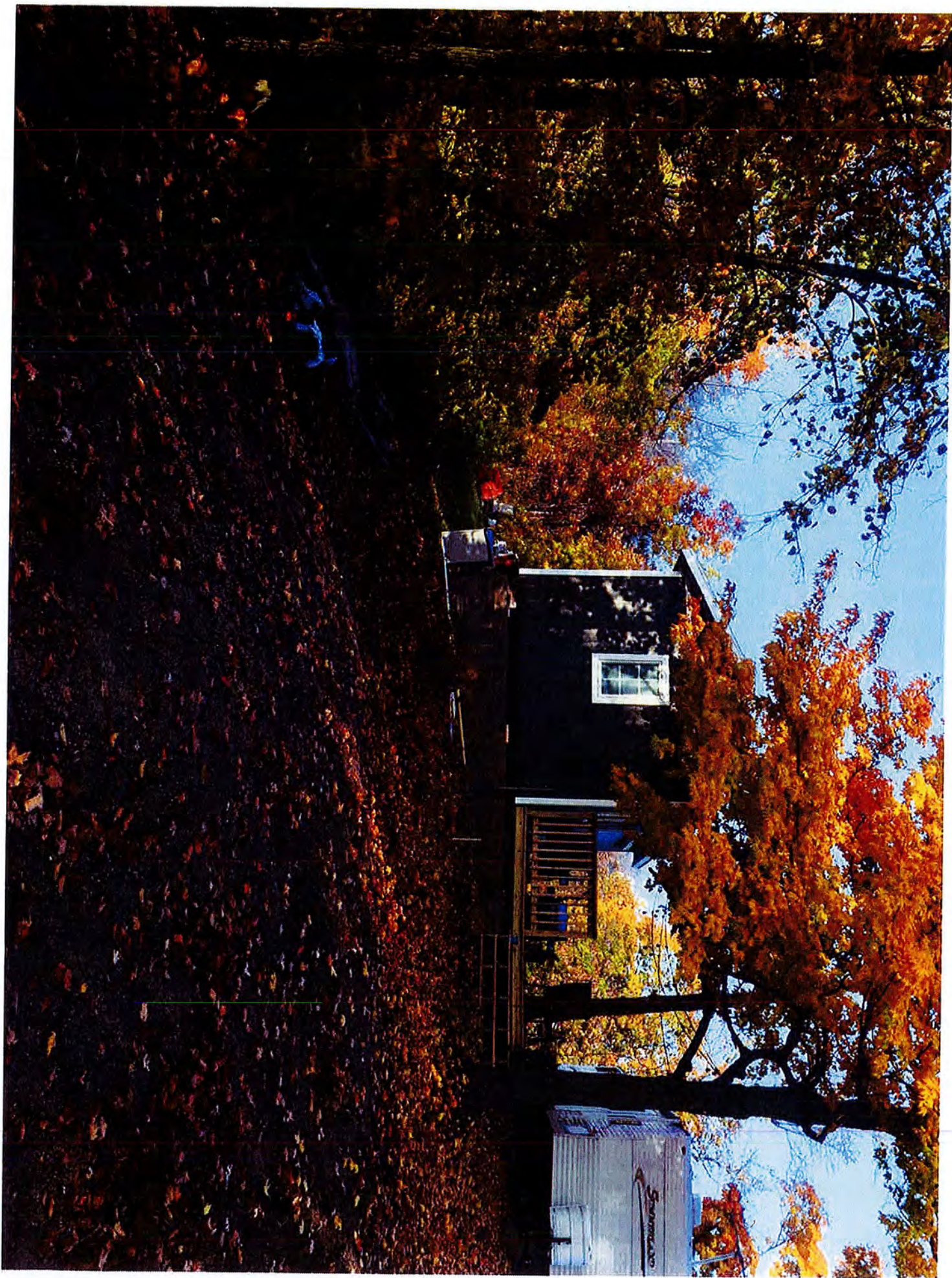
CERTIFICATE OF COMPLIANCE

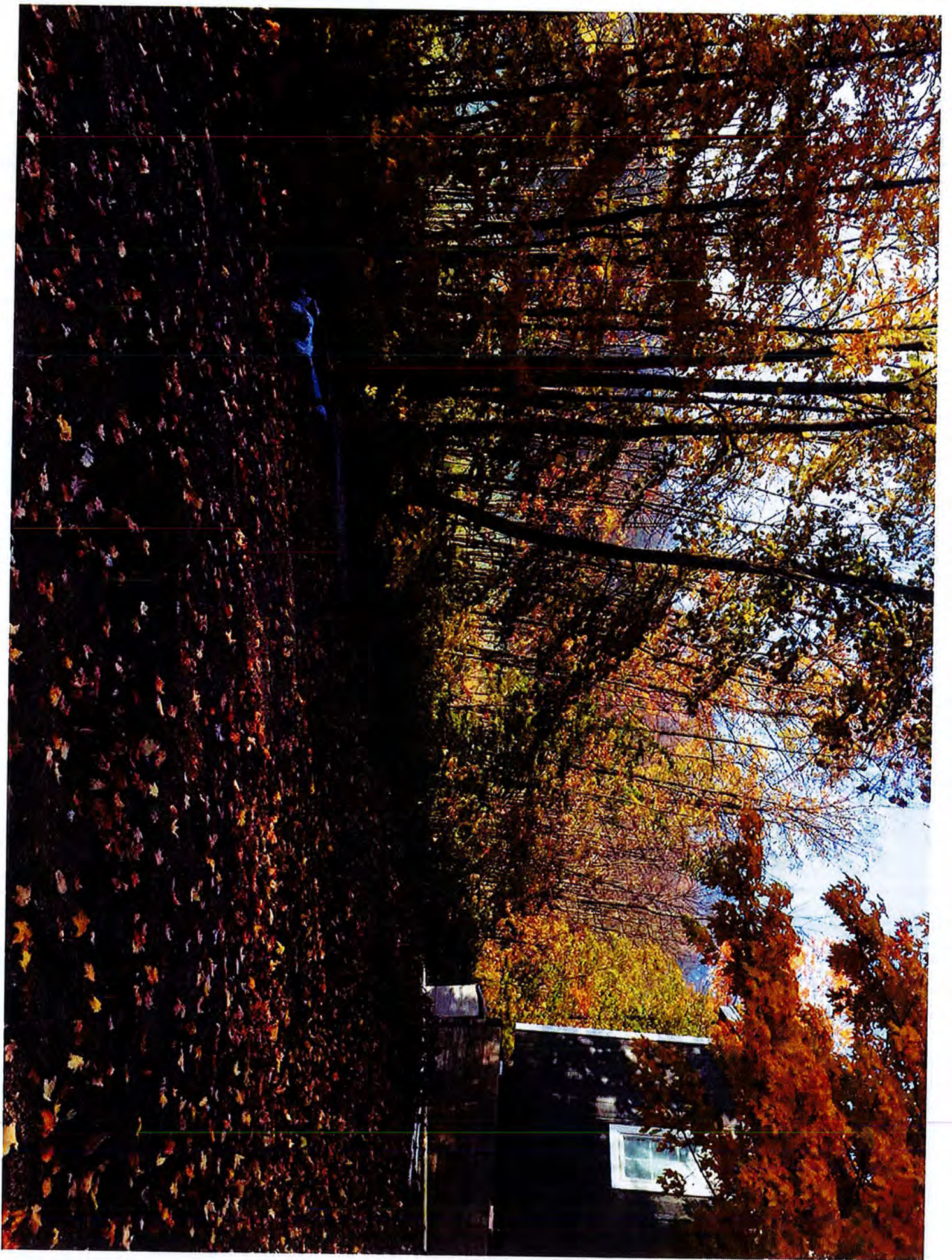
() Certificate Is Hereby Denied
 () Certificate is Hereby Granted Based upon the Application, addendum from, plans, specifications and all other supporting data.
 With property maintenance, this system can be expected to function satisfactory, however, this is not a guarantee.

Signature _____ Title _____ Date _____
 (Certificate of Compliance is not valid unless signed by a Registered Qualified Employee)











These data are provided on an "AS-IS" basis, without warranty of any type, expressed or implied, including but not limited to any warranty as to their performance, merchantability, or fitness for any particular purpose.

1:1,123

This map is not a substitute for accurate field surveys or for locating actual property lines and any adjacent features.

Date: 10/9/2017

Becker County





Leighton

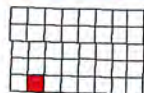
broadcasting



A Marketing Company

"Serve, Connect and Celebrate
Our Community"

1340 Richwood Rd.
Detroit Lakes, MN 56501
Phone: 218-847-5624

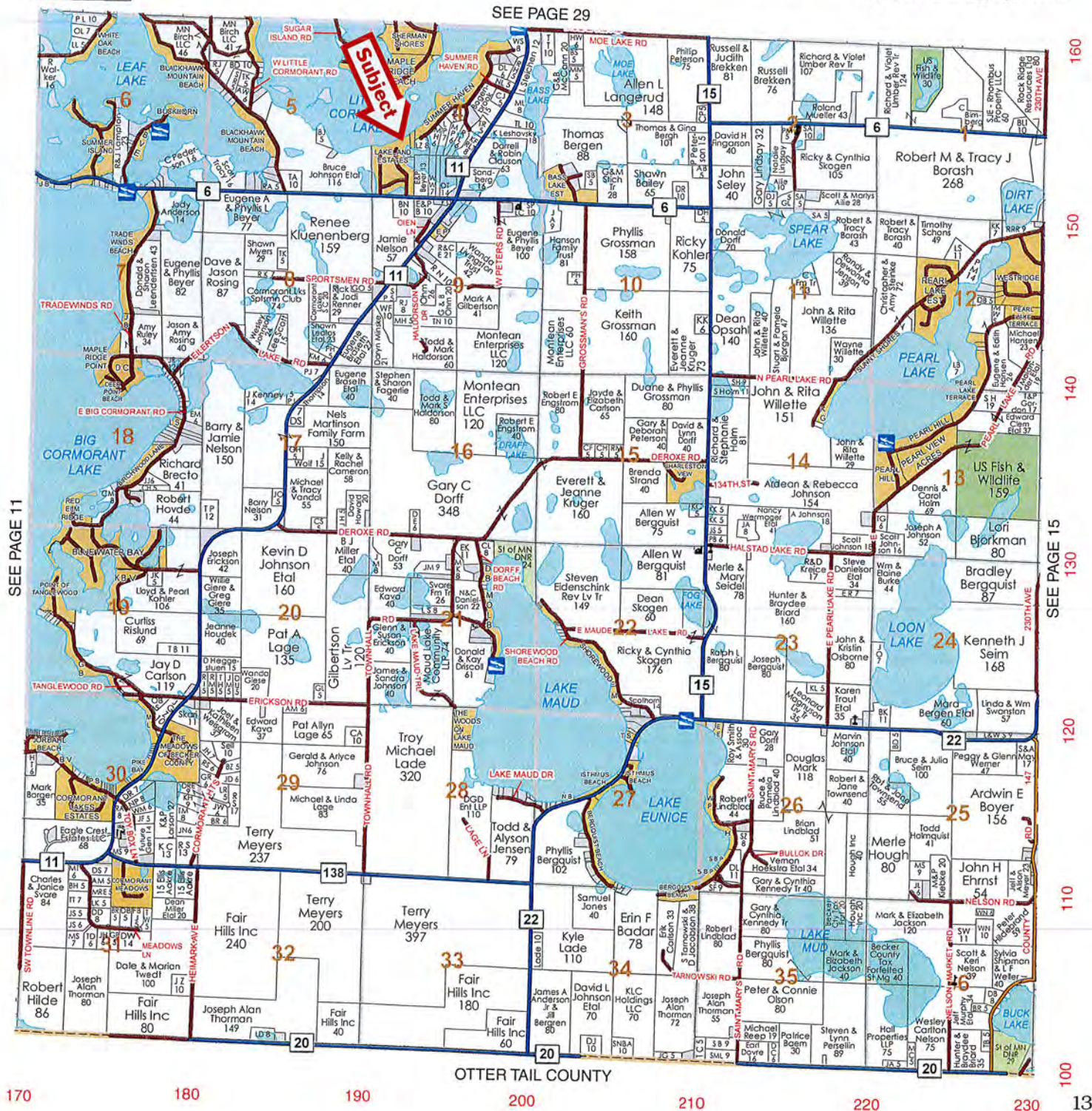


Lake Eunice

Township 138N - Range 42W

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SEE PAGE 29





COUNTY OF BECKER

Planning and Zoning

915 Lake Ave, Detroit Lakes, MN 56501

Phone: 218-846-7314 ~ Fax: 218-846-7266

BOARD OF ADJUSTMENT NOTICE OF PUBLIC HEARING

****HEARING DATE AND LOCATION****

Thursday, November 9, 2017 @ 7:00 P.M.

Commissioner's Room-Becker County Courthouse
Detroit Lakes, MN. 56501

APPLICANT: Dennis Martin
6338 13th St. N.
Fargo, ND 58102

Project Location: 14638 Tradewinds Rd., Audubon

APPLICATION AND DESCRIPTION OF PROJECT:

Request a variance to construct an 11x17 foot porch addition to a non-conforming dwelling, to be located at fifty-three (53) feet from the ordinary high water mark of the lake, due to setback issues.

LEGAL LAND DESCRIPTION: Tax ID number: 171292000 Cormorant Lake

TRADE WINDS BEACH; LOT 46; Section 07, TWP 138, Range 42, Lake Eunice Township.

Replies/Comments: Interested parties are invited to submit to the Becker County Department of Planning, Zoning, and Land Use, written facts, arguments or objectives before the scheduled date of the Hearing. These statements should bear upon the suitability of the location and the adequacy of the Project and should suggest any appropriate changes believed to be desirable. Replies may be addressed to:

PLANNING AND ZONING DEPARTMENT

915 Lake Avenue
Detroit Lakes, MN. 56501

FAX Number 218-846-7266

EMAIL: zoning@co.becker.mn.us

If you have questions about the Project, feel free to call 218-846-7314.

Jurisdiction: This Project comes under the Regulatory Jurisdiction of the Becker County Zoning Laws.

Regulatory Authority: This Application will be reviewed according to the provisions of the Becker County Zoning Ordinance. The decision whether to issue a Permit will be based on an evaluation of the probable impact including cumulative impacts, of the proposed activity. That decision will reflect the concern for both protection and utilization of important resources. All factors, which may be relevant to the proposal, will be considered including the cumulative effects: Land Use, Shoreline Protection, Water Supply and Conservation, Safety, Economics, in General, the Needs and Welfare of the People.

**** Weather conditions may change the Hearing date and time. If bad weather occurs, please listen to the local Detroit Lakes Radio Stations or contact the Zoning Office, by 4:30 PM on day of Hearing, for possible rescheduling of the Hearing.**



BECKER COUNTY PLANNING & ZONING

915 LAKE AVENUE, DETROIT LAKES, MN 56501

PHONE (218) 846-7314 - FAX (218) 846-7266

VARIANCE APPLICATION

PARCEL	
APP	Variance
YEAR	
SCANNED	

PROPERTY OWNER INFORMATION (as it appears on tax statement, purchase agreement or deed)

First name(s) Dennis Last Name Martin
Mailing Address 6338 13th St. N City, State, Zip Fargo, ND 58102
Phone Number 701-866-5485 Project Address: 14638 Tradewinds Rd, Audubon, MN
Parcel number(s) of property: 17.1292.000 Sect - Twp - Range: Sect. 7, Twp 138, Rg. 42
Township Name: Lake Eunice Legal Description: Lot 46 Tradewinds Beach

Why is the variance being requested? (Mark all sections that apply)

- ☒ Setback Issues ☐ Lot size not in compliance with minimum standards
☒ Alteration to non-conforming structure ☐ Topographical Issues (hills, slopes, bluffs, wetlands)
☐ Other

Please provide a brief description detailing the above variance request:

The existing cabin is in need of updating and remodeling to continue reasonable residential use. There is an ancient and large cotton wood tree at the southwest corner of the cabin that either will need to be removed at significant cost and negative effect to the property. It is proposed in order to save the tree that a part of the adjoining wall and roof of the cabin be moved in a foot, and that the area lost be replaced by squaring out the southeast corner where an existing shed is under the cabin roof.

What are you applying for less than the minimum distance (setback) from?

Setback must include decks and patios, current and proposed.

53 ☒ Ordinary High Water Mark (OHWM) Proposed Distance (setback) 53 feet
5'7" Lot Line Proposed Distance (setback) 5'7" feet
220' Road Right of Way (ROW) Proposed Distance (setback) 220' feet
Type of Road [] Township [] County [] State
n/a Crest of bluff Proposed Distance (setback) n/a feet
☐ Impervious Surface Coverage Proposed Impervious Lot Coverage 1,968 sq ft
10.25 %

Was the lot recorded prior to 1971?

☒ Yes ☐ No

Was the lot recorded between 1971 & 1992?

Yes ☒ No

Was the lot recorded after 1992?

Yes ☒ No

Will this be a new lot split?

Yes ☒ No

What is the current square footage of the structure? 1,160

What is the proposed addition square footage? 1,196

What is the current height of the structure? one story

What is the proposed height of the structure? no change

Is there a basement to the structure? no

Will the proposed addition have a basement? no

Will the roofline of the existing structure be changed? no

Will the main structural framework of the structure be altered? yes

What is the current percentage of lot coverage? 10.25

What is the proposed percentage of lot coverage? 10.37

OTHER INFORMATION NEEDED TO COMPLETE THE APPLICATION:

1. A copy of the deed from the Recorder's Office;
2. Completed Site Application with sketch showing all setbacks, platted or surveyed dimensions of the lot and all existing and proposed buildings;
3. Non-refundable filing fee of \$326.00. **Make check payable to Becker County Zoning.**
4. Is the variance request after the fact? [] Yes [X] No
If yes, after the fact application fee is an additional \$600.00.

Please answer the following questions as they relate to your specific variance request:

- 1) In your opinion, is the Variance in harmony with the purposes and intent of the ordinance?
Yes (X) No () Why or why not?
Cabins in the area have similar setbacks and we are not changing the setback from the lake
or side yards
- 2) In your opinion, is the Variance consistent with the Becker County Comprehensive Plan?
Yes (X) No () Why or why not?

- 3) In your opinion, does the proposal put property to use in a reasonable manner?
Yes (X) No () Why or why not?
It permits upgrades to the home to make it more livable while at the same time preserving
a significant tree and not disrupting the existing lakeshore.
- 4) In your opinion, are there circumstances unique to the property?
Yes (X) No () Why or why not?
The preservation of the tree is unique to this property as
well as the existing building location and development of the lot.
- 5) In your opinion, will the variance maintain the essential character of the locality?
Yes (X) No () Why or why not?
The variance will not change in any material way the
existing lot coverage or setbacks, but we will be able to preserve the trees at the corner of the
home which are important both asthetically as environmentally.

The Board of Adjustments must make an affirmative finding on all of the five criteria listed above in order to grant a variance. The applicant for a variance has the burden of proof to show that all of the criteria listed above have been satisfied.

The undersigned certifies that they are familiar with application fees and other associated costs, and also with the procedural requirements of the County and other applicable ordinances.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. Planning and Zoning Staff along with Board of Adjustment Members may visit my property to review submitted plan requests.

Applicant's Signature: P. J. McNamee, atty Date: 10-9-17
(Office Use)

Date Received October 9, 2017 Accepted [] Incomplete Application [] Date _____

Zoning Administrator



11x17 = 187x3

Characteristics of Proposed Dwelling/Dwelling Additions/Attached Garage/Decks		Cost of Project
() Dwelling _____ ft by _____ ft	() Attached Garage _____ ft x _____ ft	* \$ 100,000
Outside Dimension () Deck/Patio _____ ft x _____ ft	(X) Addition to existing 11 ft x 17 ft	10,000 for porch
* Setback to Side Lot Line 7' ft & Rear Lot Line 334 ft	* Setback to Road Right of Way 334 ft	
Setback to Bluff _____	* Type of road Gravel (3/4 Rock) / Township	
Setback to Wetland _____	Is wetland protected () Yes () No	
Setback to OHW (straight horizontal distance) 53	Elevation above OHW (Straight vertical distance) _____	
* Setback to septic tank 10	* Setback to drainfield 288	
Total No. Bedrooms _____	Maximum height proposed _____ # of Stories 1	
Roof Change () Yes () No	Basement () Yes () No Walkout Basement () Yes () No	

Characteristics of Proposed Non Dwelling/Non Dwelling Additions/Detached Garages/Storage Sheds		Cost of Project
() Garage _____ ft by _____ ft	() Storage Shed _____ ft x _____ ft	() Fence _____ ft long x _____ high () Other _____ ft x _____ ft
Outside Dimension () Addition to existing structure _____ ft x _____ ft	() Fence _____ ft x _____ ft	
Setback to Lot Line _____ ft & Rear Lot Line _____ ft	Setback to Road Right of Way _____ ft	\$ _____
Setback to Bluff _____	Type of road _____	
Setback to Wetland _____	Is wetland protected () Yes () No	
Setback to OHW (straight horizontal distance) _____	Elevation above OHW (Straight vertical distance) _____	
Setback to septic tank _____	Setback to drainfield _____	
Roof Change () Yes () No	Maximum height proposed _____ # of Stories _____	
Bathroom proposed () Yes () No	Sleeping Quarters proposed () Yes () No	
*Garages and storage sheds cannot contain amenities for independent human habitation		

Characteristics of Proposed Water Oriented Structure*	Cost of Project \$
() Stairway () Deck () Boathouse () Screen Porch () Gazebo () Storage Structure	
Outside Dimension _____ ft by _____ ft	Sq ft _____
Setback to Lot Line _____ ft & _____ ft	Setback to Bluff _____
Setback to OHW (straight horizontal distance) _____	Elevation above OHW (Straight vertical distance) _____
Setback to septic tank _____	Setback to drainfield _____
Maximum height proposed _____	
*Sleeping facilities or water supplies are not permitted in these structures	

THIS IS A SITE PERMIT ONLY AND DOES NOT CONSTITUTE A BUILDING PERMIT
AS SET FORTH IN MN STATE STATUTES.

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge. I also understand that, once issued, a permit is valid for a period of one (1) year from the date of issuance and that Planning and Zoning Staff may visit my property to ensure compliance. If my property is located within the shoreland district, I understand that it is my responsibility to inform the Planning & Zoning Office once the building footings have been constructed. A Site Permit may be revoked at any time upon violation of said Ordinances and approved setbacks. Any changes to this site permit results in nullification of this permit and a new permit will have to be obtained.

* Deena Mauter
Signature

8-20-17
Date

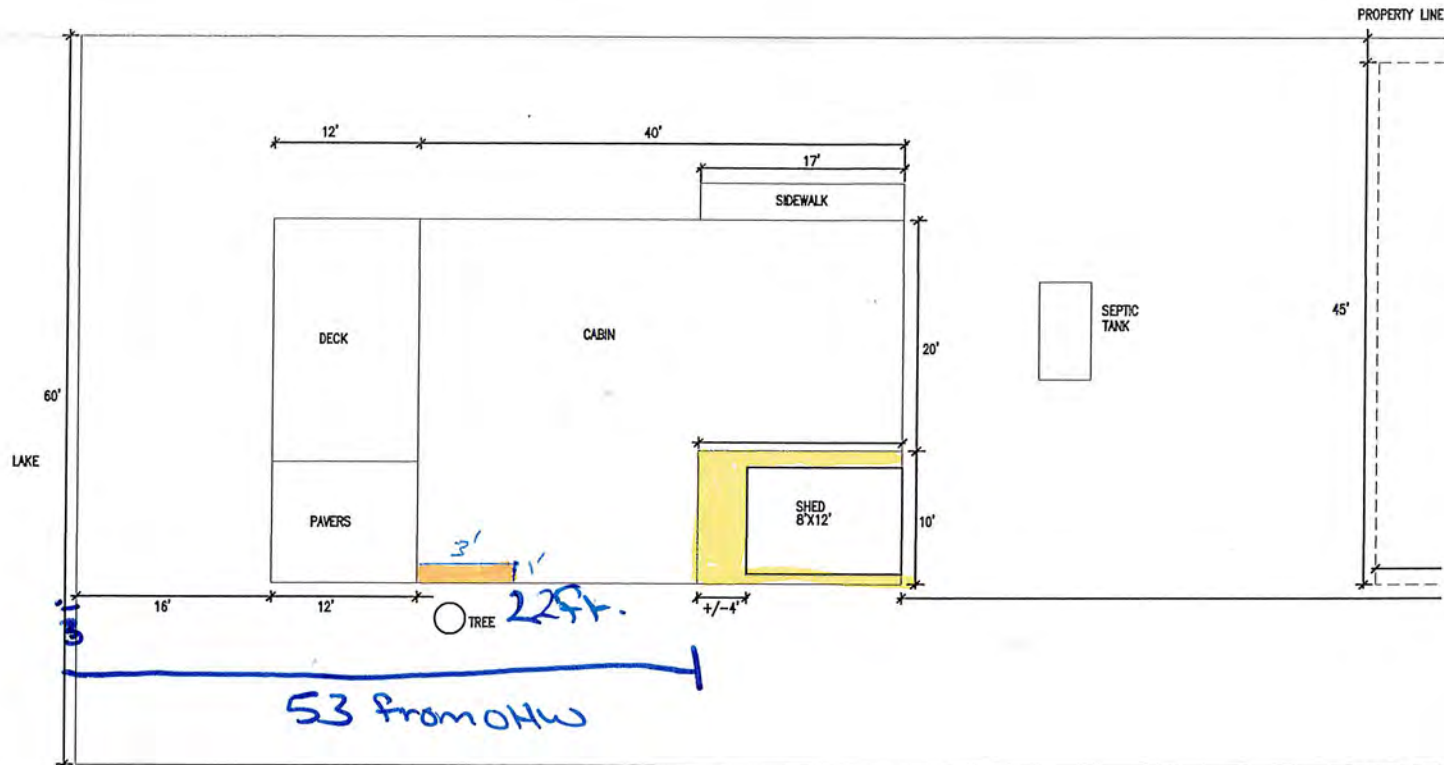
OHW to Riprap 3ft

Riprap to Pavers 16 ft

Pavers to House 12 ft

Pavers to Proposed 22 ft

53ft



PROPERTY LINE

PROPOSED PROPERTY

existing part
of cabin to be
removed to save
tree. 1ft x 3ft
approximately.
see Exhibit A₁ and
A₂

area to be added
existing cabin roof
extends over 8'x12' shed.
area to be added 4'x10'
See Exhibit B.

Date application received 8/25/17 Received By: Vivian Assigned To: Kyle

Pre-inspection required ☒ Yes ☐ No Date _____

Footing Inspection Required: ☒ Yes ☐ No Date _____

Mitigation Required: ☐ Yes ☒ No Worksheet c _____

Date mitigation document sent to owner _____

Year of septic installation _____

New certificate of compliance required: ☐ _____

Comments from septic contractor: _____

Impervious calculations:

Impervious Surface Dimensions Sq. Footage
On property: _____

DRIVEWAY

Total Impervious area on site _____ ÷ To
100 = _____ % of proposed lot coverage

Additional notes:

Existing Footprint was smaller than the proposed
Project, unable to set back average or use one time
addition because of the Shore Impact Zone

Application Fees 90 + Cormorant Surcharge _____ + Fines _____ = Total Fees 90

Application is hereby GRANTED in accordance with the application and supporting information by order of: _____ as of this date _____

Application is hereby DENIED based on the fact that Unable to meet setbacks
by order of Ngh Javulmy as of this date 9-6-2017

Receipt Number _____ Date Paid _____

Additional Receipt Number _____ Date of Additional Receipt _____

Revised permit for added amount _____ OR Voided first receipt and given new receipt number _____

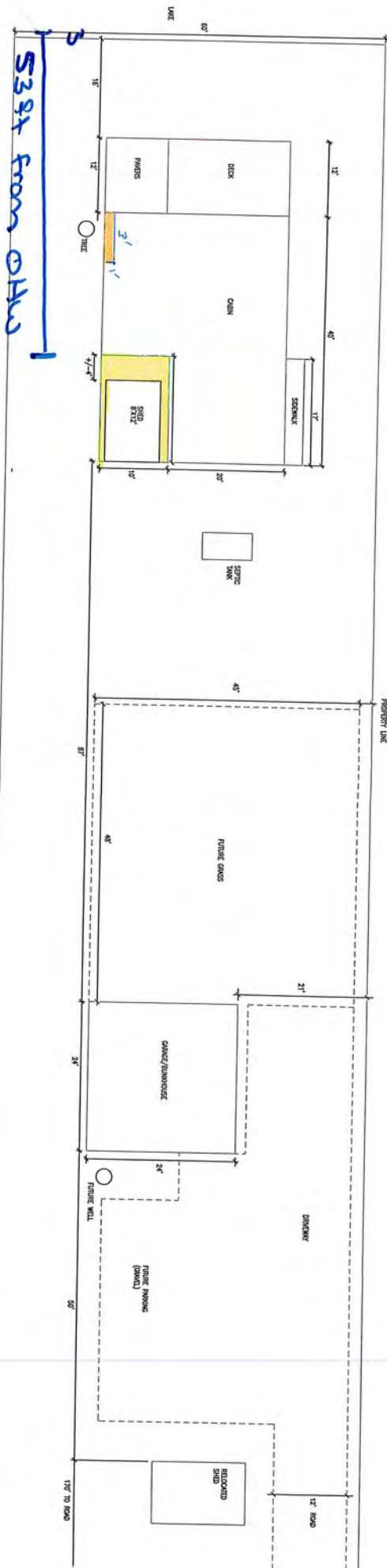
Date owner notified of application outcome: _____

Unable to meet setbacks
averaging plus 20

Unable to do one time
addition (orig structure
is in the shore impact
zone)

Unable to do building in
foot print (foot print is
smaller than proposed)

Mail permit



PROPOSED PROPERTY

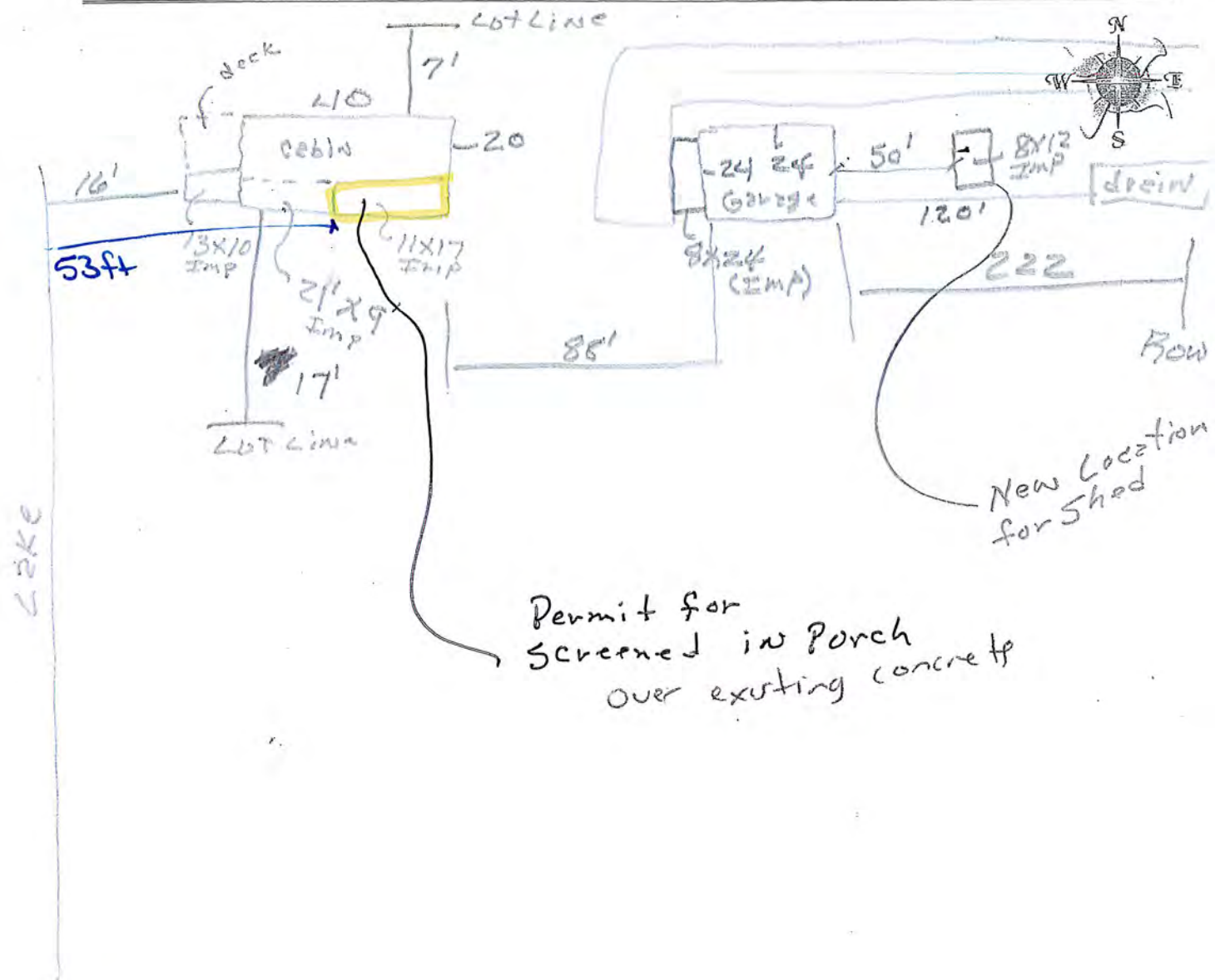
existing part
of cabin to be
removed to save
tree. 11ft x 3ft
approximately.
see Exhibit A, and
Exhibit B.

area to be added
existing cabin roof
extend over 8'x12' shed.
area to be added 4'x10'
see Exhibit B.

SKETCH OF PROPERTY

PARCEL	
APP	SITE
YEAR	

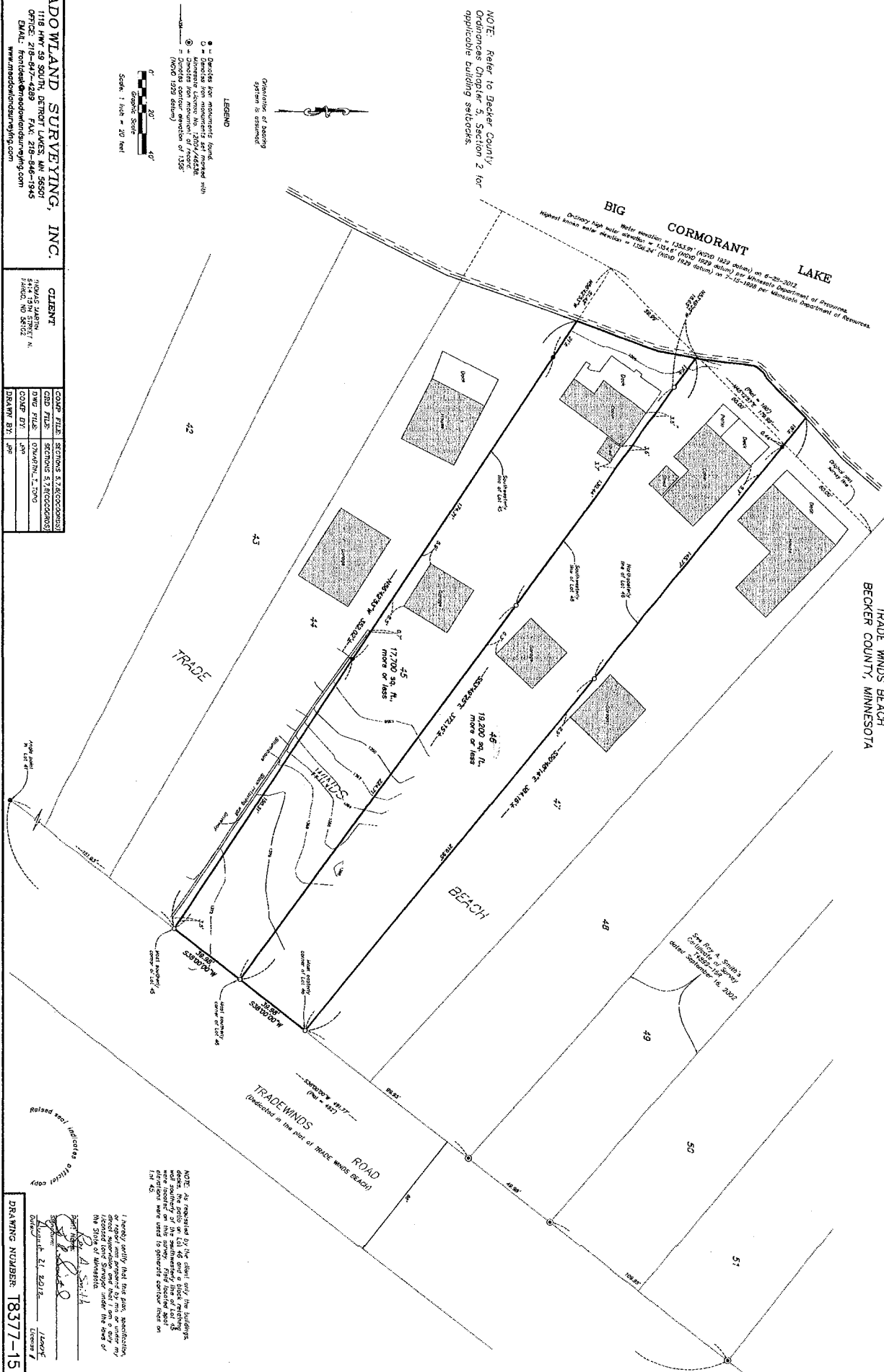
1. Please sketch all impervious coverage on your property; include dimensions.
2. Sketch roadways adjacent to property - Include driveway location.
3. Indicate setback distances, including distance to: Side Lot Line, Rear Lot Line, ROW/Centerline, Septic Tank and Drainfield.
4. If you will be exceeding 15% impervious surface coverage, include a copy of your stormwater management plan. This applies to ANY lot that exceeds 15% coverage.
5. If proposed project is a detached garage/storage shed that will exceed 1 story, include detailed design.
6. Indicate where erosion control measures will be implemented and indicate storm water drainage pattern and how it will be maintained on the property.

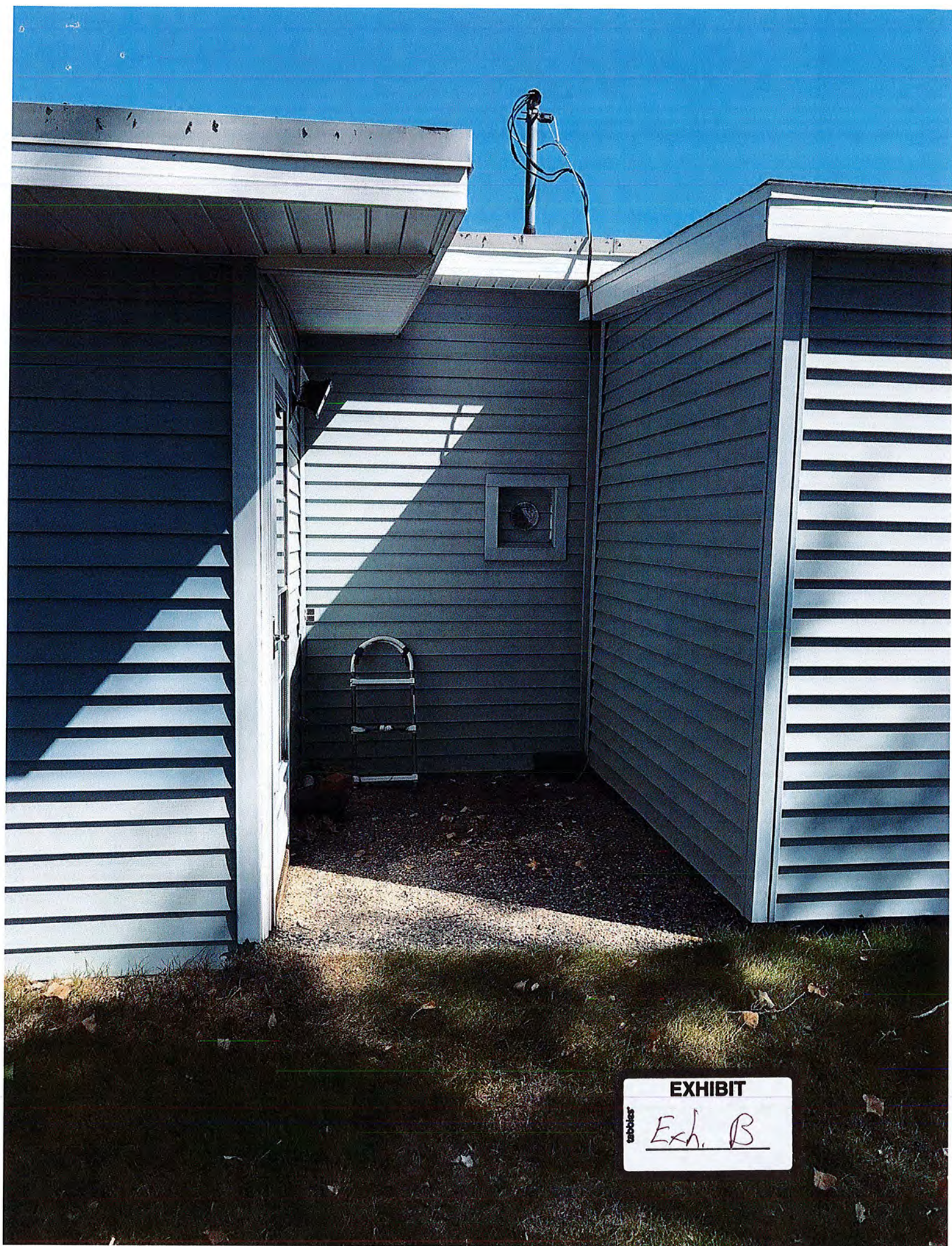


Remember EROSION CONTROL!

Please use best management practices and/or silt fence to control erosion on all projects.

LOT 45 AND LOT 46 OF
TRADE WINDS BEACH
BECKER COUNTY, MINNESOTA





EXHIBIT

tabbies

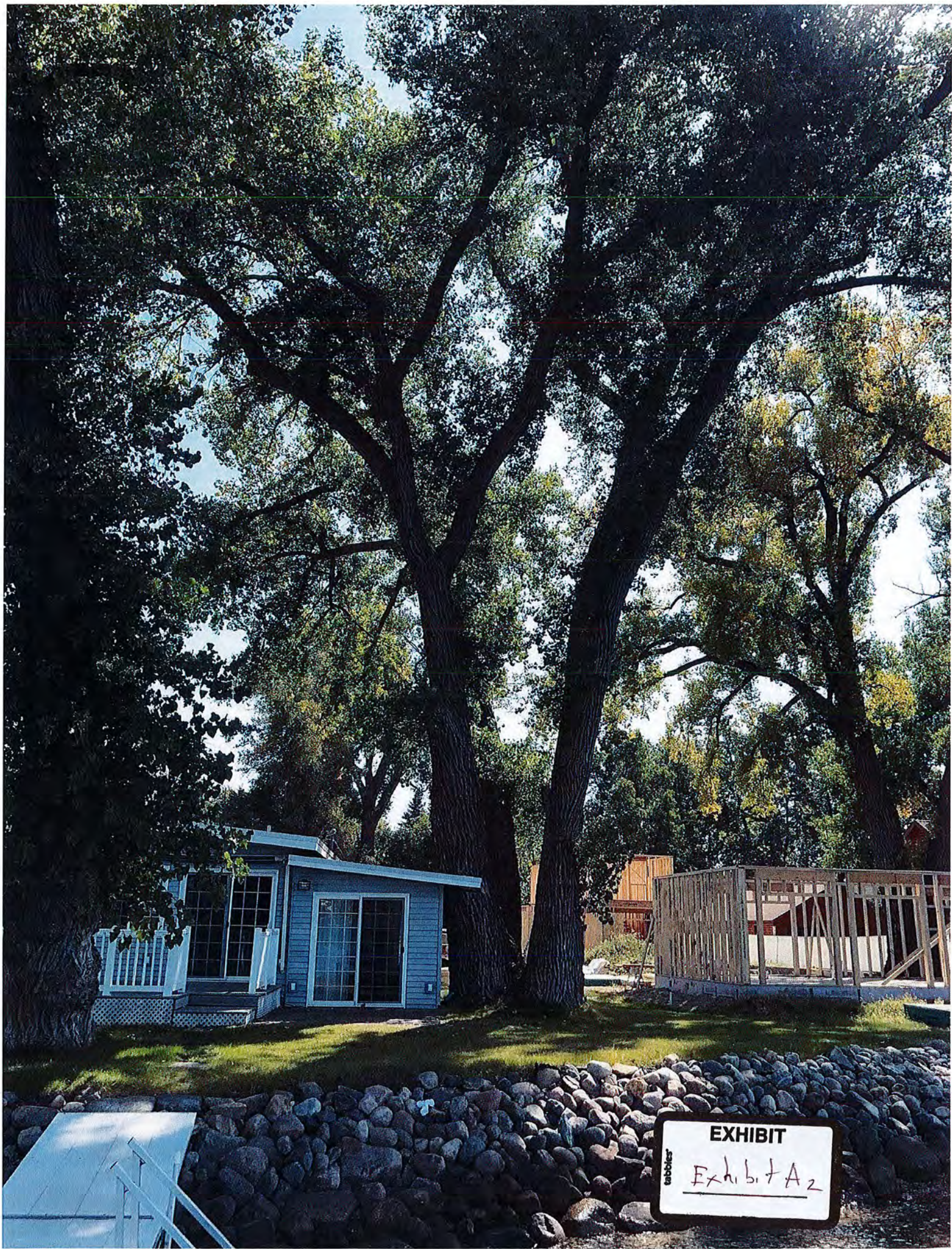
Exh. B



EXHIBIT

tabbles

Exh A₁



EXHIBIT

tabbles
Exhibit A2



**Minnesota Pollution
Control Agency**

520 Lafayette Road North
St. Paul, MN 55155-4194

Compliance Inspection Form

Existing Subsurface Sewage Treatment Systems (SSTS)

Doc Type: Compliance and Enforcement

Inspection results based on Minnesota Pollution Control Agency (MPCA) requirements and attached forms – additional local requirements may also apply.

Submit completed form to Local Unit of Government (LUG) and system owner within 15 days

For local tracking purposes:

System Status

System status on date (mm/dd/yyyy): 8-9-16

☒ **Compliant – Certificate of Compliance**
(Valid for 3 years from report date, unless shorter time frame outlined in Local Ordinance.)

☐ **Noncompliant – Notice of Noncompliance**
(See Upgrade Requirements on page 3.)

Reason(s) for noncompliance (check all applicable)

- ☐ Impact on Public Health (Compliance Component #1) – Imminent threat to public health and safety
- ☐ Other Compliance Conditions (Compliance Component #3) – Imminent threat to public health and safety
- ☐ Tank Integrity (Compliance Component #2) – Failing to protect groundwater
- ☐ Other Compliance Conditions (Compliance Component #3) – Failing to protect groundwater
- ☐ Soil Separation (Compliance Component #4) – Failing to protect groundwater
- ☐ Operating permit/monitoring plan requirements (Compliance Component #5) – Noncompliant

Property Information

Property address: 14638 Trade Winds Rd

Parcel ID# or Sec/Twp/Range: 17129 2000

Property owner: Dennis Martin

Reason for inspection: County

or

Owner's phone: 201-238-8192

Owner's representative: _____

Representative phone: _____

Local regulatory authority: _____

Regulatory authority phone: _____

Brief system description: Concrete septic tank to a lift station to a D.S. At back of lot

Comments or recommendations: _____

RECEIVED

AUG 24 2016

ZONING

Certification

I hereby certify that all the necessary information has been gathered to determine the compliance status of this system. No determination of future system performance has been nor can be made due to unknown conditions during system construction, possible abuse of the system, inadequate maintenance, or future water usage.

Inspector name: David Oh

Certification number: 2228

Business name: Ohm Excavation

License number: 932

Inspector signature: [Signature]

Phone number: 218-234-1256

Necessary or Locally Required Attachments

☒ Soil boring logs

☒ System/As-built drawing

☐ Forms per local ordinance

☐ Other information (list): _____

Property address: _____

Inspector Initials/Date: 20 8-9-16

(mm/dd/yyyy)

1. Impact on Public Health – Compliance component #1 of 5**Compliance criteria:**

System discharges sewage to the ground surface.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System discharges sewage to drain tile or surface waters.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
System causes sewage backup into dwelling or establishment.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Any "yes" answer above indicates the system is an imminent threat to public health and safety.

Comments/Explanation: _____

Verification method(s):

- ☒ Searched for surface outlet
- ☒ Searched for seeping in yard/backup in home
- ☐ Excessive ponding in soil system/D-boxes
- ☒ Homeowner testimony (See Comments/Explanation)
- ☐ "Black soil" above soil dispersal system
- ☐ System requires "emergency" pumping
- ☐ Performed dye test
- ☐ Unable to verify (See Comments/Explanation)
- ☐ Other methods not listed (See Comments/Explanation)

2. Tank Integrity – Compliance component #2 of 5**Compliance criteria:**

System consists of a seepage pit, cesspool, drywell, or leaching pit. <i>Seepage pits meeting 7080.2550 may be compliant if allowed in local ordinance.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sewage tank(s) leak below their designed operating depth. If yes, which sewage tank(s) leaks:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Any "yes" answer above indicates the system is failing to protect groundwater.

Comments/Explanation: _____

Verification method(s):

- ☒ Probed tank(s) bottom
- ☐ Examined construction records
- ☐ Examined Tank Integrity Form (Attach)
- ☐ Observed liquid level below operating depth
- ☐ Examined empty (pumped) tanks(s)
- ☒ Probed outside tank(s) for "black soil"
- ☐ Unable to verify (See Comments/Explanation)
- ☐ Other methods not listed (See Comments/Explanation)

3. Other Compliance Conditions – Compliance component #3 of 5

- a. Maintenance hole covers are damaged, cracked, unsecured, or appear to be structurally unsound. ☐ Yes* ☒ No ☐ Unknown
- b. Other issues (electrical hazards, etc.) to immediately and adversely impact public health or safety. ☐ Yes* ☒ No ☐ Unknown
- *System is an imminent threat to public health and safety.**

Explain: _____

- c. System is non-protective of ground water for other conditions as determined by inspector. ☐ Yes* ☒ No
- *System is failing to protect groundwater.**

Explain: _____

Property address: _____

Inspector initials/Date: JD 8-9-16
(mm/dd/yyyy)**4. Soil Separation – Compliance component #4 of 5**Date of installation: 80
(mm/dd/yyyy)☐ Unknown

Shoreland/Wellhead protection/Food beverage lodging?

☒ Yes ☐ No**Compliance criteria:**

For systems built prior to April 1, 1996, and not located in Shoreland or Wellhead Protection Area or not serving a food, beverage or lodging establishment:

☐ Yes ☐ No

Drainfield has at least a two-foot vertical separation distance from periodically saturated soil or bedrock.

Non-performance systems built April 1, 1996, or later or for non-performance systems located in Shoreland or Wellhead Protection Areas or serving a food, beverage, or lodging establishment:

☒ Yes ☐ No

Drainfield has a three-foot vertical separation distance from periodically saturated soil or bedrock.*

"Experimental", "Other", or "Performance" systems built under pre-2008 Rules; Type IV or V systems built under 2008 Rules (7080.2350 or 7080.2400 (Advanced Inspector License required))

☐ Yes ☐ No

Drainfield meets the designed vertical separation distance from periodically saturated soil or bedrock.

Any "no" answer above indicates the system is failing to protect groundwater.**Verification method(s):**

Soil observation does not expire. Previous soil observations by two independent parties are sufficient, unless site conditions have been altered or local requirements differ.

- ☒ Conducted soil observation(s) (Attach boring logs)
- ☐ Two previous verifications (Attach boring logs)
- ☐ Not applicable (Holding tank(s), no drainfield)
- ☐ Unable to verify (See Comments/Explanation)
- ☐ Other (See Comments/Explanation)

Comments/Explanation:

0-9 Coan 1042 3/3 Black

9-50 Coan 1042 5/4 Brown

51-84 Clay Coan 1042 6/4 Tan

Indicate depths or elevations

A. Bottom of distribution media	2'
B. Periodically saturated soil/bedrock	7'
C. System separation	5'
D. Required compliance separation*	

*May be reduced up to 15 percent if allowed by Local Ordinance.

5. Operating Permit and Nitrogen BMP* – Compliance component #5 of 5☒ Not applicable

Is the system operated under an Operating Permit?

☐ Yes ☐ No If "yes", A below is required

Is the system required to employ a Nitrogen BMP?

☐ Yes ☐ No If "yes", B below is required

BMP = Best Management Practice(s) specified in the system design

If the answer to both questions is "no", this section does not need to be completed.**Compliance criteria**

a. Operating Permit number: _____

Have the Operating Permit requirements been met?

☐ Yes ☐ No

b. Is the required nitrogen BMP in place and properly functioning?

☐ Yes ☐ No**Any "no" answer indicates Noncompliance.**

Upgrade Requirements (Minn. Stat. § 115.55) An imminent threat to public health and safety (ITPHS) must be upgraded, replaced, or its use discontinued within ten months of receipt of this notice or within a shorter period if required by local ordinance. If the system is failing to protect ground water, the system must be upgraded, replaced, or its use discontinued within the time required by local ordinance. If an existing system is not failing as defined in law, and has at least two feet of design soil separation, then the system need not be upgraded, repaired, replaced, or its use discontinued, notwithstanding any local ordinance that is more strict. This provision does not apply to systems in shoreland areas, Wellhead Protection Areas, or those used in connection with food, beverage, and lodging establishments as defined in law.

SKETCH OF PROPERTY

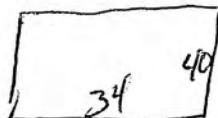
Please sketch all structures and septic systems on the property;
Include setbacks and wells within 100 feet of the property.

PARCEL	
APP	SEPTIC INSPECTION
YEAR	"



LAKE

Dennis MARTIN
14638 Tradewinds R.
By David Ohm
2228
8-9-16

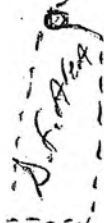
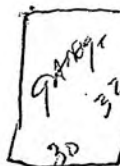


10

Shared
parking

Shared parking

LEA station



Road

WATER CORMORANT LAKE

Subject



These data are provided on an "AS-IS" basis, without warranty of any type, expressed or implied, including but not limited to any warranty as to their performance, merchantability, or fitness for any particular purpose.

1:749	
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This map is not a substitute for accurate field surveys or for locating actual property lines and any adjacent features.

Date: 10/12/2017

A Marketing Company

*"Serve, Connect and Celebrate
Our Community"*

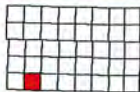
1340 Richwood Rd.
 Detroit Lakes, MN 56501
 Phone: 218-847-5624



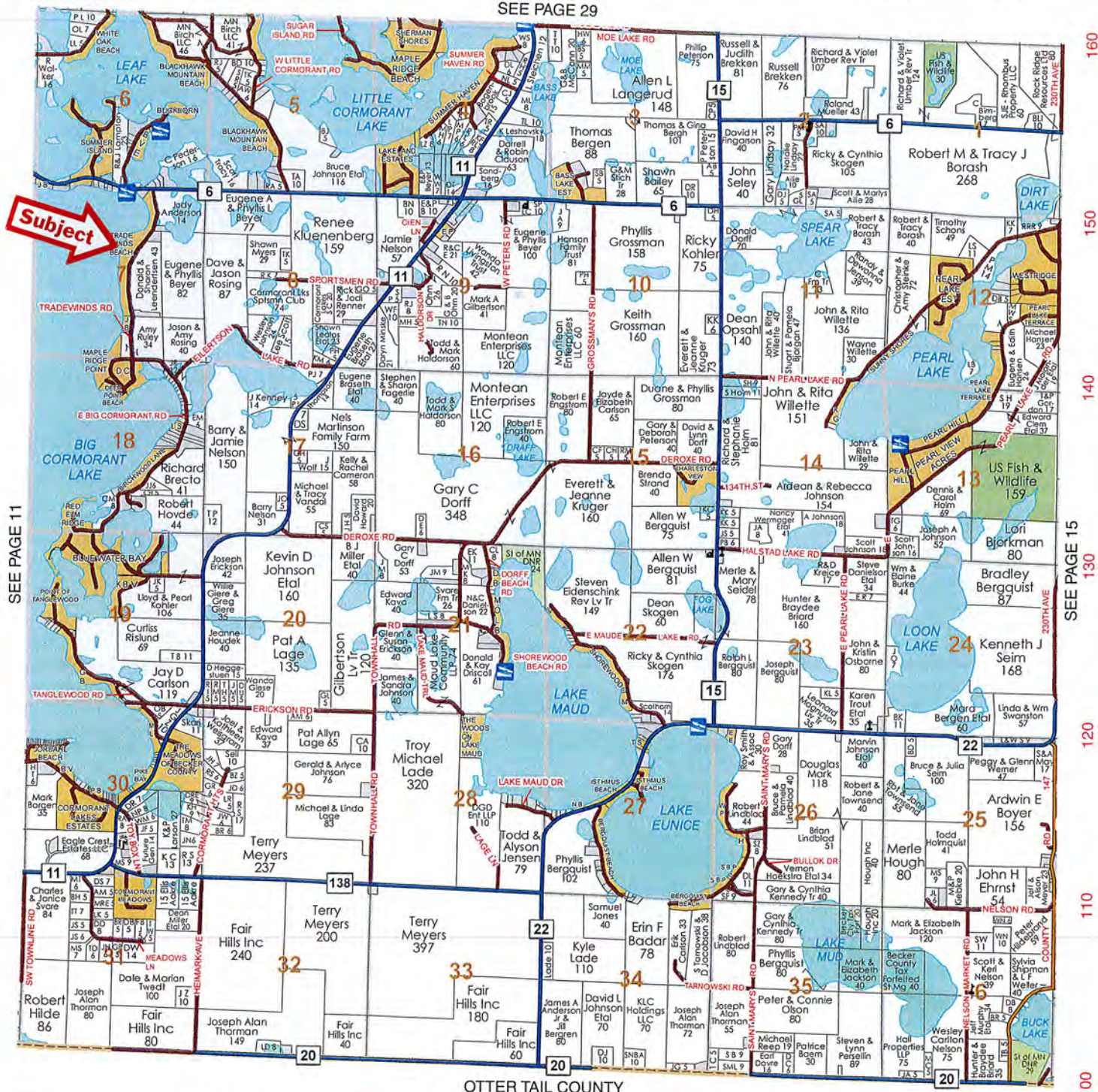
Lake Eunice

Township 138N - Range 42W

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SEE PAGE 29



OTTER TAIL COUNTY