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## ATHENS TOWNSHIP SEPTIC PERMIT APPLICATION

THIS IS AN APPLICATION ONLY. PERMIT WILL BE ISSUED AFTER APPROVAL AND PAYMENT OF FEES. WORK IS NOT AUTHORIZED TO BEGIN PRIOR TO ISSUANCE.  
SUBMIT APPLICATION TO: RUM RIVER CONSTRUCTION CONSULTANTS AT EMAIL ADDRESS ABOVE.

SITE ADDRESS, CITY, STATE &amp; ZIP: \_\_\_\_\_

PROPERTY IDENTIFICATION NUMBER: \_\_\_\_\_

PROPERTY OWNER NAME: \_\_\_\_\_

ADDRESS, CITY, STATE, ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_

ADDRESS, CITY, STATE, ZIP: \_\_\_\_\_

MPCA CERTIFICATION #: \_\_\_\_\_ CONTRACTOR PHONE #: \_\_\_\_\_

CONTRACTOR EMAIL: \_\_\_\_\_

CONTACT: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONSTRUCTION TYPE:  NEW  ALTERATION/REPLACEMENTTYPE OF SEPTIC SYSTEM:  TYPE I  TYPE II  TYPE III  TYPE IV  TYPE VDRAIN FIELD:  STANDARD TRENCHES  MOUND  PRESSURE BED  OTHER: \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_ GPD: \_\_\_\_\_

THE UNDERSIGNED ACKNOWLEDGES THAT HE/SHE HAS READ THIS APPLICATION AND THE ABOVE INFORMATION IS CORRECT AND ACCURATE. APPLICANT ALSO UNDERSTANDS BY SIGNING THIS APPLICATION THAT HE/SHE COULD BE HELD RESPONSIBLE AS REPRESENTATIVE OF THIS PROJECT FOR ANY VIOLATION OF COMPLIANCE WITH ALL APPLICABLE LAWS AND ORDINANCES OF THIS JURISDICTION. ALL WORK SHALL BE DONE IN ACCORDANCE WITH APPLICABLE PORTIONS OF MN RULES CHAPTER 7080 THROUGH 7083.

\_\_\_\_\_  
SIGNATURE OF APPLICANT\_\_\_\_\_  
PRINT NAME OF SIGNATURE\_\_\_\_\_  
DATE

SIGNATURE &amp; DATE OF BUILDING OFFICIAL PROVIDING APPROVAL: \_\_\_\_\_

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DATE PAID \_\_\_\_\_ PAYMENT METHOD \_\_\_\_\_ RECEIVED BY \_\_\_\_\_

PERMIT FEE \$ \_\_\_\_\_