

## Crow Wing County Holding Tank Design

Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_  
Site Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Driving directions if no address issued: \_\_\_\_\_  
\_\_\_\_\_  
Legal Description: \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Range: \_\_\_\_\_ Twp Name: \_\_\_\_\_  
Parcel Number: \_\_\_\_\_  
Lake/ River: \_\_\_\_\_ Lake/River Classification: \_\_\_\_\_

### Reason for Holding Tank

Unsuitable Site: ☐  
Limited Use (<150 gpd): ☐  
Failing System: ☐  
Commercial Facility: ☐  
Vaulted Privy: ☐

### Tank Information

Number of Tanks: \_\_\_\_\_  
Tank Sizes: \_\_\_\_\_  
Alarm Type: \_\_\_\_\_

Designer Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Designer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**\*\*A SITE PLAN IS REQUIRED WITH THIS DESIGN\*\***

**\*\*A PUMPING MAINTENANCE AGREEMENT IS REQUIRED WITH THIS DESIGN\*\***

**\*\*A MANAGEMENT PLAN IS REQUIRED WITH THIS DESIGN\*\***

*Minnesota Pollution Control Agency Administrative Rules Section 7082.0100 Subpart3. J and G and Sections 7082.0600 Subp. 1. A and B*

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Please Draw to Scale with North Arrow to top or Left Side of Page



*Click in the sketch area below to import an existing sketch (PDF or JPG format).  
Drawing tools are also available in the Comments Toolbar of Adobe Reader.*

**Please show all that apply (Existing or Proposed):**

Wells within 100 ft. of a Drainfield	Disturbed/Compacted Areas	Access Route for Tank Maintenance
Water lines within 10 ft. of a Drainfield	Component Location	Property Lines
Drainfield Areas	OHW	Structures
Boring Locations	Lot Easements	Setbacks and Slope

**Elevations:**

Benchmark Elevation: _____	Pump Elevation: _____
Elevation of Sewer Line at House: _____	Pump Discharge Elevation: _____
Tank Inlet Elevation: _____	Operating permit signed: _____
Water meter location: _____	

Designer Signature: \_\_\_\_\_ Date: \_\_\_\_\_ License Number: \_\_\_\_\_