

**DISCLOSURE STATEMENT:
SELLER'S DISCLOSURE ALTERNATIVES**

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- 1. Date April 12th 2024
- 2. Page 1 of 3 pages: RECORDS AND
- 3. REPORTS, IF ANY, ARE ATTACHED AND MADE A
- 4. PART OF THIS DISCLOSURE

5. Property located at 1411 59th St SW _____ ,
 6. City of Baudette _____ , County of Lake of the Woods _____ ,
 7. State of Minnesota, Zip Code 56623 _____ ("Property").

8. **NOTICE:** Sellers of residential property, with limited exceptions, are obligated to satisfy the requirements of MN Statutes
 9. 513.52 through 513.60. **To comply with the statute, Seller must provide either a written disclosure to the**
 10. **prospective Buyer (see Disclosure Statement: Seller's Property Disclosure Statement) or satisfy one of the**
 11. **following two options.** Disclosures made here, if any, are not a warranty or guarantee of any kind by Seller or
 12. licensee(s) representing or assisting any party in this transaction and are not a substitute for any inspections or
 13. warranties the party(ies) may wish to obtain.

14. **(Select one option only.)**

15. 1) **QUALIFIED THIRD-PARTY INSPECTION:** Seller shall provide to prospective Buyer a written report that
 16. discloses material information relating to the real Property that has been prepared by a qualified third party.
 17. "Qualified third party" means a federal, state, or local governmental agency, or any person whom Seller or
 18. prospective Buyer reasonably believes has the expertise necessary to meet the industry standards of practice
 19. for the type of inspection or investigation that has been conducted by the third party in order to prepare the
 20. written report.

21. **Seller shall disclose to prospective Buyer material facts known by Seller that contradict any information**
 22. **that is included in a written report, or material facts known by Seller that are not included in the**
 23. **report.**

24. The inspection report was prepared by _____
 25. _____ , and dated _____ .

26. Seller discloses to Buyer the following material facts known by Seller that contradict any information included
 27. in the above referenced inspection report.

28.
 29.
 30.
 31. Seller discloses to Buyer the following material facts known by Seller that are not included in the above
 32. referenced inspection report.

33.
 34.
 35.

36. 2) **WAIVER:** The written disclosure required may be waived if Seller and prospective Buyer agree in writing.
 37. Seller and Buyer hereby waive the written disclosure required under MN Statutes 513.52 through 513.60.

38. **NOTE:** If both Seller and prospective Buyer agree, in writing, to waive the written disclosure required under
 39. MN Statutes 513.52 through 513.60, Seller is not obligated to disclose ANY material facts of which Seller
 40. is aware that could adversely and significantly affect the Buyer's use or enjoyment of the Property or any
 41. intended use of the Property, other than those disclosure requirements created by any other law.
 42. Seller is not obligated to update Buyer on any changes made to material facts of which Seller is aware that could
 43. adversely and significantly affect the Buyer's use or enjoyment of the Property or any intended use of the
 44. Property that occur, other than those disclosure requirements created by any other law.

45. **Waiver of the disclosure required under MN Statutes 513.52 through 513.60 does not waive, limit, or**
 46. **abridge any obligation for Seller disclosure created by any other law.**

**DISCLOSURE STATEMENT:
SELLER'S DISCLOSURE ALTERNATIVES**

47. Page 2

48. Property located at 1411 59th St SW Baudette 56623

49. **OTHER REQUIRED DISCLOSURES:**

50. **NOTE:** In addition to electing one of the above alternatives to the material fact disclosure, Minnesota law also
51. requires sellers to provide other disclosures to prospective buyers, such as those disclosures listed below.
52. Additionally, there may be other required disclosures by federal, state, local, or other governmental entities
53. that are not listed below.

54. **A. SUBSURFACE SEWAGE TREATMENT SYSTEM DISCLOSURE:** (A subsurface sewage treatment system
55. disclosure is required by MN Statute 115.55.) *(Check appropriate box.)*

56. Seller **DOES** **DOES NOT** know of a subsurface sewage treatment system on or serving the above-described
57. real Property. (If answer is **DOES**, and the system does not require a state permit, see *Disclosure Statement:*
58. *Subsurface Sewage Treatment System.*)

59. There is a subsurface sewage treatment system on or serving the above-described real Property.
60. *(See Disclosure Statement: Subsurface Sewage Treatment System.)*

61. There is an abandoned subsurface sewage treatment system on the above-described real Property.
62. *(See Disclosure Statement: Subsurface Sewage Treatment System.)*

63. **B. PRIVATE WELL DISCLOSURE:** (A well disclosure and Certificate are required by MN Statute 1031.235.)
64. *(Check appropriate box(es).)*

65. Seller does not know of any wells on the above-described real Property.

66. There are one or more wells located on the above-described real Property. *(See Disclosure Statement: Well.)*

67. This Property is in a Special Well Construction Area.

68. There are wells serving the above-described Property that are not located on the Property.

69. Comments:

70.

71.

72. **C. FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA"):** Section 1445 of the Internal Revenue Code
73. provides that a transferee ("Buyer") of a United States real property interest must be notified in writing and must
74. withhold tax if the transferor ("Seller") is a foreign person and no exceptions from FIRPTA withholding apply.

75. Seller represents that Seller **IS** **IS NOT** a foreign person (i.e., a non-resident alien individual, foreign corporation,
76. foreign partnership, foreign trust, or foreign estate) for purposes of income taxation. This representation shall
77. survive the closing of any transaction involving the Property described here.

78. **NOTE:** If the above answer is "**IS**," Buyer may be subject to income tax withholding in connection with the
79. transaction (unless the transaction is covered by an applicable exception to FIRPTA withholding). In
80. non-exempt transactions, Buyer may be liable for the tax if Buyer fails to withhold.

81. If the above answer is "**IS NOT**," Buyer may wish to obtain specific documentation from Seller ensuring
82. Buyer is exempt from the withholding requirements as prescribed under Section 1445 of the Internal
83. Revenue Code.

84. Due to the complexity and potential risks of failing to comply with FIRPTA, including Buyer's responsibility
85. for withholding the applicable tax, Buyer and Seller should **seek appropriate legal and tax advice regarding**
86. **FIRPTA compliance, as the respective licensees representing or assisting either party will be unable to**
87. **assure either party whether the transaction is exempt from the FIRPTA withholding requirements.**

MN:DS:SDA-2 (8/23)

**DISCLOSURE STATEMENT:
SELLER'S DISCLOSURE ALTERNATIVES**

88. Page 3

89. Property located at 1411 59th St SW Baudette 56623

90. **D. METHAMPHETAMINE PRODUCTION DISCLOSURE:**

91. (A methamphetamine production disclosure is required by MN Statute 152.0275, Subd. 2 (m).)

92. Seller is not aware of any methamphetamine production that has occurred on the Property.

93. Seller is aware that methamphetamine production has occurred on the Property.

94. (See *Disclosure Statement: Methamphetamine Production.*)

95. **E. RADON DISCLOSURE:**

96. (The following Seller disclosure satisfies MN Statute 144.496.)

97. **RADON WARNING STATEMENT:** The Minnesota Department of Health strongly recommends that ALL
98. homebuyers have an indoor radon test performed prior to purchase or taking occupancy, and recommends
99. having the radon levels mitigated if elevated radon concentrations are found. Elevated radon concentrations can
100. easily be reduced by a qualified, certified, or licensed, if applicable, radon mitigator.

101. Every buyer of any interest in residential real property is notified that the property may present exposure to
102. dangerous levels of indoor radon gas that may place occupants at risk of developing radon-induced lung cancer.
103. Radon, a Class A human carcinogen, is the leading cause of lung cancer in nonsmokers and the second leading
104. cause overall. The seller of any interest in residential real property is required to provide the buyer with any
105. information on radon test results of the dwelling.

106. **RADON IN REAL ESTATE:** By signing this Statement, Buyer hereby acknowledges receipt of the Minnesota
107. Department of Health's publication entitled *Radon in Real Estate Transactions*, which is attached hereto and
108. can be found at www.health.state.mn.us/communities/environment/air/radon/radonre.html.

109. A seller who fails to disclose the information required under MN Statute 144.496, and is aware of material facts
110. pertaining to radon concentrations in the Property, is liable to the Buyer. A buyer who is injured by a violation of MN
111. Statute 144.496 may bring a civil action and recover damages and receive other equitable relief as determined by
112. the court. Any such action must be commenced within two years after the date on which the buyer closed the
113. purchase or transfer of the real Property.

114. **SELLER'S REPRESENTATIONS:** The following are representations made by Seller to the extent of Seller's actual
115. knowledge.

116. (a) Radon test(s) **HAVE** **HAVE NOT** occurred on the Property.
-----*(Check one.)*-----

117. (b) Describe any known radon concentrations, mitigation, or remediation. **NOTE:** Seller shall attach the most
118. current records and reports pertaining to radon concentration within the dwelling:

119.

120.

121.

122. (c) There **IS** **IS NOT** a radon mitigation system currently installed on the Property.
-----*(Check one.)*-----

123. If "IS," Seller shall disclose, if known, information regarding the radon mitigation system, including system
124. description and documentation.

125.

126.

127.

128. **F. CHRONIC WASTING DISEASE IN CERVIDAE** (The following Seller disclosure satisfies MN Statute 35.155, Subd. 11(d).)

129. Has Chronic Wasting Disease been detected on the Property?

YES **NO**

130. If Yes, see *Disclosure Statement: Chronic Wasting Disease.*

-----*(Check one.)*-----

**DISCLOSURE STATEMENT:
SELLER'S DISCLOSURE ALTERNATIVES**

131. Page 4

132. Property located at 1411 59th St SW Baudette 56623
133. **G. NOTICE REGARDING AIRPORT ZONING REGULATIONS:** The Property may be in or near an airport safety zone
 134. with zoning regulations adopted by the governing body that may affect the Property. Such zoning regulations are
 135. filed with the county recorder in each county where the zoned area is located. If you would like to determine if such
 136. zoning regulations affect the Property, you should contact the county recorder where the zoned area is located.
137. **H. NOTICE REGARDING CARBON MONOXIDE DETECTORS:**
 138. MN Statute 299F.51 requires Carbon Monoxide Detectors to be located within ten (10) feet from all sleeping
 139. rooms. Carbon Monoxide Detectors may or may not be personal property and may or may not be included in the
 140. sale of the home.
141. **I. WATER INTRUSION AND MOLD GROWTH:** Studies have shown that various forms of water intrusion affect many
 142. homes. Water intrusion may occur from exterior moisture entering the home and/or interior moisture leaving the
 143. home.
144. Examples of exterior moisture sources may be
 145. • improper flashing around windows and doors,
 146. • improper grading,
 147. • flooding,
 148. • roof leaks.
149. Examples of interior moisture sources may be
 150. • plumbing leaks,
 151. • condensation (caused by indoor humidity that is too high or surfaces that are too cold),
 152. • overflow from tubs, sinks, or toilets,
 153. • firewood stored indoors,
 154. • humidifier use,
 155. • inadequate venting of kitchen and bath humidity,
 156. • improper venting of clothes dryer exhaust outdoors (including electrical dryers),
 157. • line-drying laundry indoors,
 158. • houseplants—watering them can generate large amounts of moisture.
159. In addition to the possible structural damage water intrusion may do to the Property, water intrusion may also result
 160. in the growth of mold, mildew, and other fungi. Mold growth may also cause structural damage to the Property.
 161. Therefore, it is very important to detect and remediate water intrusion problems.
162. Fungi are present everywhere in our environment, both indoors and outdoors. Many molds are beneficial to humans.
 163. However, molds have the ability to produce mycotoxins that may have a potential to cause serious health problems,
 164. particularly in some immunocompromised individuals and people who have asthma or allergies to mold.
165. To complicate matters, mold growth is often difficult to detect, as it frequently grows within the wall structure. If you
 166. have a concern about water intrusion or the resulting mold/mildew/fungi growth, you may want to consider having
 167. the Property inspected for moisture problems before entering into a purchase agreement or as a condition of your
 168. purchase agreement. Such an analysis is particularly advisable if you observe staining or any musty odors on the
 169. Property.
170. **J. NOTICE REGARDING PREDATORY OFFENDER INFORMATION:** Information regarding the predatory
 171. offender registry and persons registered with the predatory offender registry under MN Statute 243.166
 172. may be obtained by contacting the local law enforcement offices in the community where the property is
 173. located or the Minnesota Department of Corrections at (651) 361-7200, or from the Department of Corrections
 174. web site at www.corr.state.mn.us.

**DISCLOSURE STATEMENT:
SELLER'S DISCLOSURE ALTERNATIVES**

175. Page 5

176. Property located at 1411 59th St SW Baudette 56623

177. K. SELLER'S STATEMENT:



178. (To be signed at time of listing.)

179. Seller(s) hereby authorizes any licensee(s) representing or assisting any party(ies) in this transaction to provide
180. a copy of this Disclosure Statement to any person or entity in connection with any actual or anticipated sale of the
181. Property. A seller may provide this Disclosure Statement to a real estate licensee representing or assisting a
182. prospective buyer. The Disclosure Statement provided to the real estate licensee representing or assisting a
183. prospective buyer is considered to have been provided to the prospective buyer. If this Disclosure Statement is
184. provided to the real estate licensee representing or assisting the prospective buyer, the real estate licensee must
185. provide a copy to the prospective buyer.

186. **QUALIFIED THIRD-PARTY INSPECTION:** If Seller has made a disclosure under the Qualified Third-Party
187. Inspection, Seller is obligated to disclose to Buyer in writing of any new or changed facts of which Seller is aware
188. that could adversely and significantly affect the Buyer's use or enjoyment of the Property or any intended use of
189. the Property that occur up to the time of closing. To disclose new or changed facts, please use the *Amendment*
190. *to Disclosure Statement* form.

191. **WAIVER:** If Seller and Buyer agree to waive the seller disclosure requirement, Seller is NOT obligated to disclose
192. and will NOT disclose any new or changed information regarding facts.

193. **OTHER REQUIRED DISCLOSURES (Sections A-F):** Whether Seller has elected a Qualified-Third Party Inspection
194. or Waiver, Seller is obligated to notify Buyer, in writing, of any new or changed facts regarding Other Required
195. Disclosures up to the time of closing. To disclose new or changed facts, please use the *Amendment to Seller's*
196. *Disclosure* form.

197.  04/12/2024  04/12/2024
(Seller) (Date) (Seller) (Date)

198. L. BUYER'S ACKNOWLEDGEMENT:

199. (To be signed at time of purchase agreement.)

200. I/We, the Buyer(s) of the Property, acknowledge receipt of this *Seller's Disclosure Alternatives* form and agree to
201. the seller's disclosure option selected in this form. I/We further agree that no representations regarding facts have
202. been made, other than those made in this form. This Disclosure Statement is not a warranty or a guarantee of
203. any kind by Seller or licensee representing or assisting any party in the transaction and is not a suitable substitute
204. for any inspections or warranties the party(ies) may wish to obtain.

205. The information disclosed is given to the best of the Seller's knowledge.

206. _____
(Buyer) (Date) (Buyer) (Date)

207. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS HERE AND ARE**
208. **NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.**



Radon in Real Estate Transactions

All Minnesota homes can have dangerous levels of radon gas. Radon is a colorless and odorless gas that comes from the soil. The gas can accumulate in the home. When inhaled, its radioactive particles can damage the lungs. Long-term exposure to radon can lead to lung cancer. About 21,000 lung cancer deaths each year in the United States are caused by radon.

The only way to know how much radon gas has entered the home is to conduct a radon test. MDH estimates 2 in 5 homes exceed the 4.0 pCi/L (picocuries per liter) action level. Whether a home is old or new, any home can have high levels of radon.

The purpose of this publication is to educate and inform potential home buyers of the risks of radon exposure, and how to test for and reduce radon as part of real estate transactions.

Disclosure Requirements

Effective January 1, 2014, the Minnesota Radon Awareness Act requires specific disclosure and education be provided to potential home buyers during residential real estate transactions in Minnesota.

Before signing a purchase agreement to sell or transfer residential real property, the seller shall provide this publication and shall disclose in writing to the buyer:

1. whether a radon test or tests have occurred on the property
2. the most current records and reports pertaining to radon concentrations within the dwelling
3. a description of any radon levels, mitigation, or remediation
4. information on the radon mitigation system, if a system was installed
5. a radon warning statement

Radon Facts

How dangerous is radon? Radon is the number one cause of lung cancer in nonsmokers, and the second leading cause overall. Your risk for lung cancer increases with higher levels of radon, prolonged exposure, and whether or not you are a current smoker or former smoker.

Where is your greatest exposure to radon? For most Minnesotans, your greatest exposure is at home where radon can concentrate indoors.

What is the recommended action based on my results? If the average radon in the home is at or above 4.0 pCi/L, the home's radon level should be reduced. Also, consider mitigating if radon levels are between 2.0 pCi/L and 3.9 pCi/L. Any amount of radon, even below the recommended action level, carries some risk. A home's radon levels may change in the future, so test every 2–5 years, or sooner if there is major remodeling or changes to the foundation, heating, cooling, or ventilation.

Radon Warning Statement

“The Minnesota Department of Health strongly recommends that ALL home buyers have an indoor radon test performed prior to purchase or taking occupancy, and recommends having the radon levels mitigated if elevated radon concentrations are found. Elevated radon concentrations can easily be reduced by a qualified, certified, or licensed, if applicable, radon mitigator.

Every buyer of any interest in residential real property is notified that the property may present exposure to dangerous levels of indoor radon gas that may place the occupants at risk of developing radon-induced lung cancer. Radon, a Class A human carcinogen, is the leading cause of lung cancer in nonsmokers and the second leading cause overall. The seller of any interest in residential real property is required to provide the buyer with any information on radon test results of the dwelling.”

Radon Testing

Any test lasting less than three months requires **closed-house conditions**. Closed-house conditions include keeping all windows and doors closed, except for normal entry and exit, and temperature set to 65 – 80 °F. For a full list of closed-house conditions please visit mn.gov/radon/notice.

Before testing: Begin closed-house conditions at least 12 hours before the start of the radon test.

During testing: Maintain closed-house conditions during the entire duration of the short-term test. Operate home heating or cooling systems normally during the test.

Where should the test be conducted? Any radon test conducted for a real estate transaction needs to be placed in the lowest livable area of the home suitable for occupancy. This is typically in the basement, whether finished or unfinished. If other foundations are present, such as a crawl space or slab on grade, also test the rooms above these foundations.

Place the test kit:

- 20 inches to 6 feet above the floor
- 3 feet from exterior doors and windows
- 1 foot from exterior walls
- away from heat sources and drafts caused by vents and fans
- not in enclosed areas or areas of high heat/humidity

How are radon tests conducted in real estate transactions?

There are special protocols for radon testing in real estate transactions. Because these tests are time-sensitive there are two testing options. For both tests, test for a minimum of 2 days.

Continuous Radon Monitor (CRM)

MDH recommends CRMs in real estate testing. CRMs are calibrated, provide more data, and may detect tampering. The average of the results are used to make a decision to mitigate.

Simultaneous Short-Term Testing

Two short-term test kits are placed side by side, 4" – 8" apart. The results of the two tests are averaged and used to make a decision to mitigate.

Radon Mitigation

When elevated levels of radon are found, they can be easily reduced by a licensed professional.

Radon mitigation is the process or system used to reduce radon concentrations in the breathing zones of occupied buildings. The goal of a radon mitigation system is to reduce the indoor radon levels to below the action level. This is done by drawing soil gas from under the house and venting it above the roof. A quality mitigation system is often able to reduce the annual average radon level to below 2.0 pCi/L. The cost of a radon mitigation system averages \$1,500 to \$3,000.

After a radon mitigation system is installed perform an independent short-term test to ensure the reduction system is effective. Operate the radon system during the entire test. This short-term test will confirm low levels in the home. Be sure to retest the house every two years to confirm continued radon reduction.

All radon testing and mitigation should be conducted by licensed radon professionals. Radon service providers, such as home inspectors, must be licensed. A list of these licensed radon professionals can be found at MDH's radon web site. MDH conducts free inspections, upon request, of recently installed radon mitigation systems, to check that they meet requirements.

More Radon Information

www.mn.gov/radon

Last Updated 4/2023

MDH Indoor Air Unit

PO Box 64975
St Paul, MN 55164-0975

Contact Information

651-201-4601
800-798-9050
health.indoorair@state.mn.us

DISCLOSURE STATEMENT: SUBSURFACE SEWAGE TREATMENT SYSTEM

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1. Date April 12th, 2024
2. Page 1 of 12 pages:
3. THE REQUIRED MAP IS ATTACHED AND MADE A
4. PART OF THIS DISCLOSURE

5. Property located at 1411 59th St SW,
6. City of Baudette, County of Lake of the Woods,
7. State of Minnesota, Zip Code 56623, legally described as follows or on attached sheet:
8. Conforming to PID: 43-1612-000 located in Sec 16/TWP 158/R 31-NW4NE4 less the W 1/2 ("Property").
9. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any party(ies) in
10. this transaction, and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.
11. **BUYER(S) AND SELLER(S) MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND/OR INSPECTIONS OF THE**
12. **SUBSURFACE SEWAGE TREATMENT SYSTEM AND TO PROVIDE FOR APPROPRIATE PROVISIONS IN A**
13. **CONTRACT BETWEEN BUYER(S) AND SELLER(S) WITH RESPECT TO ANY ADVICE/INSPECTION/**
14. **DEFECTS.**

15. **SELLER'S INFORMATION:** The following Seller disclosure satisfies MN Statutes Chapter 115.55. Seller discloses
16. the following information with the knowledge that even though this is not a warranty, prospective Buyers may rely on
17. this information in deciding whether and on what terms to purchase the Property. The Seller(s) authorizes any
18. licensee(s) representing or assisting any party(ies) in this transaction to provide a copy of this statement to any person
19. or entity in connection with any actual or anticipated sale of the Property.

20. Unless Buyer and Seller agree to the contrary in writing before the closing of the sale, a Seller who fails to disclose
21. the existence or known status of a subsurface sewage treatment system at the time of sale, and who knew or had
22. reason to know of the existence or known status of the system, is liable to Buyer for costs relating to bringing the
23. system into compliance with subsurface sewage treatment system rules and for reasonable attorney fees for collection
24. of costs from Seller. An action under this subdivision must be commenced within two years after the date on which
25. Buyer closed the purchase of the real property where the system is located.

26. Legal requirements exist relating to various aspects of location and status of subsurface sewage treatment systems.
27. Buyer is advised to contact the local unit(s) of government, state agency, or qualified professional which regulates
28. subsurface sewage treatment systems for further information about these issues.

29. The following are representations made by Seller(s) to the extent of Seller(s) actual knowledge. This information is a
30. disclosure and is not intended to be part of any contract between Buyer and Seller.

31. **SUBSURFACE SEWAGE TREATMENT SYSTEM DISCLOSURE: (Check the appropriate boxes.)**
32. Seller certifies that the following subsurface sewage treatment system is on or serving the above-described Property.
33. TYPE: (Check appropriate box(es) and indicate location on attached Disclosure Statement: Location Map.)
34. Septic Tank: with drain field with mound system seepage tank with open end
35. Is this system a straight-pipe system? Yes No Unknown
36. Sealed System (holding tank)
37. Other (Describe.): _____
38. Is the subsurface sewage treatment system(s) currently in use? Yes No
39. Is the above-described Property served by a subsurface sewage treatment system
40. located entirely within the Property boundary lines, including setback requirements? Yes No
41. If "No," please explain:
42. **System was permitted by the county in 2003. Neighbor to the East had a survey done and says part of the drain field appears to be on his property.**
43. Comments:
44. **See attached sketch (s)**

DISCLOSURE STATEMENT: SUBSURFACE SEWAGE TREATMENT SYSTEM

45. Page 2

46. Property located at 1411 59th St SW Baudette 56623

47. Is the subsurface sewage treatment system(s) a shared system? Yes No

48. If "Yes,"

49. (1) How many properties or residences does the subsurface sewage treatment system serve?

50. 1

51. (2) Is there a maintenance agreement for the shared subsurface sewage treatment system? Yes No

52. If "Yes," what is the annual maintenance fee? \$ _____

53. **NOTE: If any water use appliance, bedroom, or bathroom has been added to the Property, the system may**
54. **no longer comply with applicable sewage treatment system laws and rules.**

55. Seller or transferor shall disclose to Buyer or transferee what Seller or transferor has knowledge of relative to the
56. compliance status of the subsurface sewage treatment system. _____

57.

58.

59. Any previous inspection report in Seller's possession must be attached to this Disclosure Statement.

60. When was the subsurface sewage treatment system installed? See attachments

61. Installer Name/Phone Per attachments

62. Where is tank located? " _____ "

63. What is tank size? " _____ "

64. When was tank last pumped? Never

65. How often is tank pumped? None scheduled-low use-used only for short recreational periods

66. Where is the drain field located? " _____ "

67. What is the drain field size? " _____ "

68. Describe work performed to the subsurface sewage treatment system since you have owned the Property.

69. New system done in 2003.

70.

71. Date work performed/by whom: " _____ "

72. _____

73. Approximate number of:

74. people using the subsurface sewage treatment system N/A

75. showers/baths taken per week _____

76. wash loads per week _____

77. **NOTE: Changes in the number of people using the subsurface sewage treatment system or volume of water**
78. **used may affect the subsurface sewage treatment system performance.**

79. Distance between well and subsurface sewage treatment system? _____

80. Have you received any notices from any government agencies relating to the subsurface sewage treatment system?

81. (If "Yes," see attached notice.) Yes No

82. Are there any known defects in the subsurface sewage treatment system? Yes No

83. If "Yes," please explain:

84.

85.

**DISCLOSURE STATEMENT: SUBSURFACE
SEWAGE TREATMENT SYSTEM**



86. Page 3

87. Property located at 1411 59th St SW Baudette 56623

88. **SELLER'S STATEMENT:** *(To be signed at time of listing.)*

89. Seller(s) hereby states the facts as stated above are true and accurate and authorizes any licensee(s) representing or
90. assisting any party(ies) in this transaction to provide a copy of this Disclosure Statement to any person or entity in
91. connection with any actual or anticipated sale of the Property. A seller may provide this Disclosure Statement to a
92. real estate licensee representing or assisting a prospective buyer. The Disclosure Statement provided to the real
93. estate licensee representing or assisting a prospective buyer is considered to have been provided to the prospective
94. buyer. If this Disclosure Statement is provided to the real estate licensee representing or assisting the prospective
95. buyer, the real estate licensee must provide a copy to the prospective buyer.

96. **Seller is obligated to continue to notify Buyer in writing of any facts that differ from the facts disclosed here**
97. **(new or changed) of which Seller is aware that could adversely and significantly affect the Buyer's use or**
98. **enjoyment of the Property or any intended use of the Property that occur up to the time of closing.** To disclose
99. new or changed facts, please use the *Amendment to Disclosure Statement* form.

100.  04/12/2024  04/12/2024
(Seller) (Date) (Seller) (Date)

101. **BUYER'S ACKNOWLEDGEMENT:** *(To be signed at time of purchase agreement.)*

102. I/We, the Buyer(s) of the Property, acknowledge receipt of this *Disclosure Statement: Subsurface Sewage Treatment*
103. *System and Disclosure Statement: Location Map* and agree that no representations regarding facts have been made
104. other than those made above.

105. _____
(Buyer) (Date) (Buyer) (Date)

106. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS HERE AND ARE**
107. **NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.**

MN-DS:SSTS-3 (8/21)

DISCLOSURE STATEMENT: WELL

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- 1. Date April 12th 2024
- 2. Page 1 of 5 pages: THE REQUIRED MAP
- 3. IS ATTACHED HERE AND MADE A PART OF THIS
- 4. DISCLOSURE

5. Minnesota Statute 103I.235 requires that, before signing an agreement to sell or transfer real property, Seller must disclose information in writing to Buyer about the status and location of all known wells on the property. This requirement is satisfied by delivering to Buyer either a statement by Seller that Seller does not know of any wells on the property, or a disclosure statement indicating the legal description and county, and a map showing the location of each well. In the disclosure statement Seller must indicate, for each well, whether the well is in use, not in use or sealed.

10. Unless Buyer and Seller agree to the contrary in writing, before the closing of the sale, a Seller who fails to disclose the existence or known status of a well at the time of sale, and knew or had reason to know of the existence or known status of the well, is liable to Buyer for costs relating to sealing of the well and reasonable attorneys' fees for collection of costs from Seller, if the action is commenced within six years after the date Buyer closed the purchase of the real property where the well is located.

15. Legal requirements exist relating to various aspects of location and status of wells. Buyer is advised to contact the local unit(s) of government, state agency, or qualified professional which regulates wells for further information about these issues. For additional information on wells, please visit the Minnesota Department of Health's website at www.health.state.mn.us.

19. **Instructions for completion of this form are on page three (3).**

20. **PROPERTY DESCRIPTION:** Street Address: 1411 59th St SW,

21. City of Baudette, County of Lake of the Woods,

22. State of Minnesota, Zip Code 56623.

23. **LEGAL DESCRIPTION:** Conforming to PID: 43-1612-000-Sec 16/TWP 158/R 31-NW4NE4 less the W 1/2.

24. _____

25. _____ ("Property").

26. **WELL DISCLOSURE STATEMENT: (Check appropriate boxes.)**

27. Seller certifies that the following wells are located on the above-described real Property.

| | MN Unique Well No. | Well Depth | Year of Const. | Well Type | IN USE | NOT IN USE | SHARED | SEALED |
|------------|--------------------|------------|----------------|-----------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 30. Well 1 | _____ | _____ | _____ | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Well 2 | _____ | _____ | _____ | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Well 3 | _____ | _____ | _____ | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

33. Is this property served by a well not located on the Property? Yes No

34. If "Yes," please explain: _____

35. _____

36. **NOTE: See definition of terms "IN USE," "NOT IN USE," and "SEALED" on lines 87-97. If a well is not in use, it must be sealed by a licensed well contractor or a well owner must obtain a maintenance permit from the Minnesota Department of Health and pay an annual maintenance fee. Maintenance permits are not transferable. If a well is operable and properly maintained, a maintenance permit is not required.**

40. If the well is, "Shared":

41. (1) How many properties or residences does the shared well serve? _____

42. (2) Who manages the shared well? _____

43. (3) Is there a maintenance agreement for the shared well? Yes No

44. If "Yes," what is the annual maintenance fee? \$ _____

DISCLOSURE STATEMENT: WELL

46. Property located at 1411 59th St SW Baudette 56623

47. **OTHER WELL INFORMATION:**

48. Date well water last tested for contaminants: N/A Test results attached? Yes No

49. Contaminated Well: Is there a well on the Property containing contaminated water? Yes No

50. Comments:

51. **There are no well records available either at the local county government center, nor the state of Minnesota. See attached well disclosure records.**

52.

53.

54.

55.

56.

57. **SEALED WELL INFORMATION:** For each well designated as sealed above, complete this section.

58. When was the well sealed? _____

59. Who sealed the well? _____

60. Was a Sealed Well Report filed with the Minnesota Department of Health? Yes No

61. **MAP: Complete the attached Disclosure Statement: Location Map showing the location of each well on the real Property.**

63. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any part(ies) in this transaction and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.

65. **INSTRUCTIONS FOR COMPLETING THE WELL DISCLOSURE STATEMENT**

66. **DEFINITION:** A "well" means an excavation that is drilled, cored, bored, washed, driven, dug, jetted, or otherwise constructed if the excavation is intended for the location, diversion, artificial recharge, or acquisition of groundwater.

68. **MINNESOTA UNIQUE WELL NUMBER:** All new wells constructed AFTER January 1, 1975, should have been assigned a Minnesota unique well number by the person constructing the well. If the well was constructed after this date, you should have the unique well number in your property records. If you are unable to locate your unique well number and the well was constructed AFTER January 1, 1975, contact your well contractor. If no unique well number is available, please indicate the depth and year of construction for each well.

73. **WELL TYPE:** Use one of the following terms to describe the well type.

74. **WATER WELL:** A water well is any type of well used to extract groundwater for private or public use.
75. Examples of water wells are: domestic wells, drive-point wells, dug wells, remedial wells, and municipal wells.
76.

77. **IRRIGATION WELL:** An irrigation well is a well used to irrigate agricultural lands. These are typically large-diameter wells connected to a large pressure distribution system.
78.

79. **MONITORING WELL:** A monitoring well is a well used to monitor groundwater contamination. The well is typically used to access groundwater for the extraction of samples.
80.

81. **DEWATERING WELL:** A dewatering well is a well used to lower groundwater levels to allow for construction or use of underground spaces.
82.

83. **INDUSTRIAL/COMMERCIAL WELL:** An industrial/commercial well is a nonpotable well used to extract groundwater for any nonpotable use, including groundwater thermal exchange wells (heat pumps and heat loops).
84.
85.

DISCLOSURE STATEMENT: WELL

87. **WELL USE STATUS:** Indicate the use status of each well. CHECK ONLY ONE (1) BOX PER WELL.

88. **IN USE:** A well is "in use" if the well is operated on a daily, regular, or seasonal basis. A well in use includes
89. a well that operates for the purpose of irrigation, fire protection, or emergency pumping.

90. **NOT IN USE:** A well is "not in use" if the well does not meet the definition of "in use" above and has not
91. been sealed by a licensed well contractor.

92. **SEALED:** A well is "sealed" if a licensed contractor has completely filled a well by pumping grout material
93. throughout the entire bore hole after removal of any obstructions from the well. A well is "capped" if it has
94. a metal or plastic cap or cover which is threaded, bolted or welded into the top of the well to prevent entry
95. into the well. A "capped" well is not a "sealed" well.

96. If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing
97. contractor, check the well status as "not in use."

98. If you have any questions, please contact the Minnesota Department of Health, Well Management Section,
99. at (651) 201-4587 (metropolitan Minneapolis–St. Paul) or 1-800-383-9808 (greater Minnesota).

100. **SELLER'S STATEMENT:** *(To be signed at time of listing.)*

101. Seller(s) hereby states that the facts as stated above are true and accurate and authorizes any licensee(s) representing
102. or assisting any party(ies) in this transaction to provide a copy of this Disclosure Statement to any person or entity
103. in connection with any actual or anticipated sale of the Property. A seller may provide this Disclosure Statement to
104. a real estate licensee representing or assisting a prospective buyer. The Disclosure Statement provided to the real
105. estate licensee representing or assisting a prospective buyer is considered to have been provided to the prospective
106. buyer. If this Disclosure Statement is provided to the real estate licensee representing or assisting the prospective
107. buyer, the real estate licensee must provide a copy to the prospective buyer.

108. **Seller is obligated to continue to notify Buyer in writing of any facts that differ from the facts disclosed here
109. (new or changed) of which Seller is aware that could adversely and significantly affect the Buyer's use or
110. enjoyment of the Property or any intended use of the Property that occur up to the time of closing.** To disclose
111. new or changed facts, please use the *Amendment to Disclosure Statement* form.

112.  Donald Scroggs 04/12/2024  Joyce Mansell 04/12/2024
(Seller) (Date) (Seller) (Date)

113. **BUYER'S ACKNOWLEDGEMENT:** *(To be signed at time of purchase agreement.)*

114. I/We, the Buyer(s) of the Property, acknowledge receipt of this *Disclosure Statement: Well* and *Disclosure Statement:
115. Location Map* and agree that no representations regarding facts have been made other than those made above.

116. _____
(Buyer) (Date) (Buyer) (Date)

117. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS HERE AND ARE
118. NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.**

DISCLOSURE STATEMENT: LOCATION MAP

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1. Page 1 of 1 pages

2. Please use the space below to sketch the real property being sold and, to Seller's knowledge, the approximate location of any of the following on the property.

4. SUBSURFACE SEWAGE TREATMENT SYSTEM WELL METHAMPHETAMINE PRODUCTION AREA
(Check all that apply.)

5. Include approximate distances from fixed reference points such as streets, buildings and landmarks.

6. Property located at 1411 59th St SW Baudette,

7. ***See attached sketches previously done***

8. ATTACH ADDITIONAL SHEETS AS NEEDED.

9. Seller and Buyer initial: DS 04/12/2024 _____
(Seller) (Date) (Buyer) (Date)

10. JM 04/12/2024 _____
(Seller) (Date) (Buyer) (Date)

11. ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER
MN-IM (8/21)

COUNTY USE ONLY

MDH USE ONLY

MINNESOTA DEPARTMENT OF HEALTH
 Well Management Section, 1000 Park Avenue, St. Paul, Minnesota 55164-0975
 (612) 296-8800 or (800) 657-8808
WELL DISCLOSURE CERTIFICATE
PLEASE TYPE OR PRINT ALL INFORMATION
 Person filing deed must attach a \$30 fee payable to the county recorder.

COPY

A. PROPERTY DESCRIPTION

Attach a legal description of the property.

| | | | |
|-----------------------|------------|--------------|---------------|
| COUNTY <i>LOTW</i> | LOT NUMBER | BLOCK NUMBER | ADDITION NAME |
|-----------------------|------------|--------------|---------------|

STREET ADDRESS
1411 59th ST. SW

| | | | |
|-------------------------|--------------------|--------------------------|-------------------|
| CITY <i>Baudette</i> | STATE <i>MN</i> | ZIP CODE <i>56623</i> | P.I.N. (OPTIONAL) |
|-------------------------|--------------------|--------------------------|-------------------|

B. PROPERTY BUYER MAILING ADDRESS AFTER CLOSING

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| FIRST NAME <i>DONALD</i> | MIDDLE INITIAL <i>L.</i> | LAST NAME <i>SCROBBS</i> |
|-----------------------------|-----------------------------|-----------------------------|

COMPANY NAME (IF APPLICABLE)

ADDRESS

ADDRESS
3184 WEST BLACK HILLS COURT

| | | | |
|-------------------------|--------------------|--------------------------|---|
| CITY <i>WESTLAKE</i> | STATE <i>CA</i> | ZIP CODE <i>91362</i> | TELEPHONE NUMBER <i>(805) 497-7413</i> |
|-------------------------|--------------------|--------------------------|---|

C. CERTIFICATION BY SELLER

I certify that the information provided on this certificate is accurate and complete to the best of my knowledge.



| | | |
|-------------------------------|--|------|
| Name of Seller (Please Print) | Signature of Seller or Designated Representative of Seller | Date |
|-------------------------------|--|------|

D. CERTIFICATION BY BUYER

The buyer or person authorized to act on behalf of the buyer, must sign a Well Disclosure Certificate for all deeds given in fulfillment of a contract for deed if there is a well on the property.

In the absence of a seller's signature, the buyer, or person authorized to act on behalf of the buyer may sign this well disclosure certificate. No signature is required by the buyer if the seller has signed above.

Based on disclosure information provided to me by the seller or other available information, I certify that the information on this certificate is accurate and complete to the best of my knowledge.

| | | | |
|--|-----------------------|---|---|
| Signature of Buyer or Designated Representative of Buyer <i>[Signature]</i> | Date <i>3-7-08</i> |  |  |
|--|-----------------------|---|---|

IMPORTANT NOTE: The Minnesota Department of Health (MDH) will follow-up with the property buyer regarding any wells disclosed as not in use. If a well is not in use, the property owner must either return the well to use, have the well sealed by a licensed well contractor, or obtain an annual maintenance permit from the MDH for \$125. A copy of this well disclosure certificate should be provided to the property buyer.



**MINNESOTA DEPARTMENT OF HEALTH
WELL DISCLOSURE CERTIFICATE**
PLEASE TYPE OR PRINT ALL INFORMATION

* Fill out a separate well information page if more than **three** wells are located on the property.

| WELL #1 | | | | |
|---|-----------------------------|----------------|--|--------------|
| COUNTY | QUARTER (OR GOVERNMENT LOT) | SECTION NUMBER | TOWNSHIP NUMBER | RANGE NUMBER |
| LOTW | E 1/2 NW 1/4 NE 1/4 | 16 | 158 | 31 |
| WELL STATUS (Check only one box) WELL IS: <input checked="" type="checkbox"/> IN USE (1) <input type="checkbox"/> NOT IN USE (2) <input type="checkbox"/> SEALED BY LICENSED WELL CONTRACTOR (3) (Call MDH to verify sealing record is on file.) | | | YEAR WELL WAS SEALED OR SEALING RECORD NUMBER (IF KNOWN) | |
| If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing contractor, check the well status as not in use. | | | NAME OF LICENSED WELL CONTRACTOR | |

| WELL #2 | | | | |
|--|-----------------------------|----------------|--|--------------|
| COUNTY | QUARTER (OR GOVERNMENT LOT) | SECTION NUMBER | TOWNSHIP NUMBER | RANGE NUMBER |
| | | | | |
| WELL STATUS (Check only one box) WELL IS: <input type="checkbox"/> IN USE (1) <input type="checkbox"/> NOT IN USE (2) <input type="checkbox"/> SEALED BY LICENSED WELL CONTRACTOR (3) (Call MDH to verify sealing record is on file.) | | | YEAR WELL WAS SEALED OR SEALING RECORD NUMBER (IF KNOWN) | |
| If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing contractor, check the well status as not in use. | | | NAME OF LICENSED WELL CONTRACTOR | |

| WELL #3 | | | | |
|--|-----------------------------|----------------|--|--------------|
| COUNTY | QUARTER (OR GOVERNMENT LOT) | SECTION NUMBER | TOWNSHIP NUMBER | RANGE NUMBER |
| | | | | |
| WELL STATUS (Check only one box) WELL IS: <input type="checkbox"/> IN USE (1) <input type="checkbox"/> NOT IN USE (2) <input type="checkbox"/> SEALED BY LICENSED WELL CONTRACTOR (3) (Call MDH to verify sealing record is on file.) | | | YEAR WELL WAS SEALED OR SEALING RECORD NUMBER (IF KNOWN) | |
| If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing contractor, check the well status as not in use. | | | NAME OF LICENSED WELL CONTRACTOR | |

SKETCH MAP - Sketch the location of the well(s) and include estimated distances from roads, streets, and buildings. IF MORE THAN ONE WELL ON PROPERTY, USE THE WELL LOCATION NUMBER ABOVE TO IDENTIFY EACH WELL. The location of the well(s) must be provided. If the location of a well is not known, have the well located by a person qualified to locate well, such as a licensed well contractor.

Information provided on this form is classified as public information under Minnesota Statutes, Chapter 13. To request this document in another format call (651) 215-0811 or TDD (651) 215-0707 or greater Minnesota through Minnesota Relay Service at 1-800-627-3529 and ask for (651) 215-0811. Visit our web site at: www.health.state.mn.us/divs/eh/wells/disclosures

PRIVATE SEWER SYSTEM DISCLOSURE STATEMENT

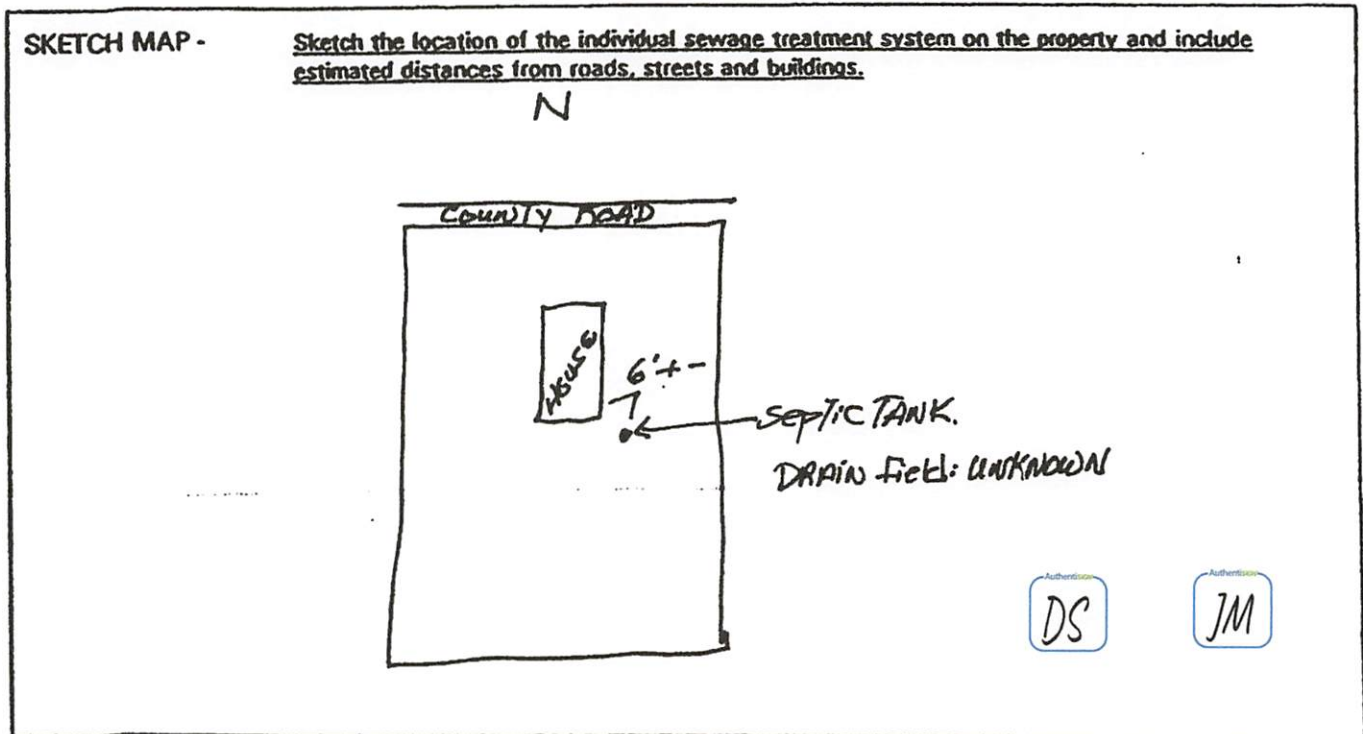
Made in compliance with Minnesota Statutes Section 115.55, Subd. 6

Date: 8-7-08

Property located at E $\frac{1}{2}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$, Section 16, Township 158 North, Range 31 West.

The following are representations made by the Seller(s) to the extent of the Seller(s) actual knowledge. This information is a disclosure and is not intended to be part of any contract between the Buyer and Seller.

1. The Seller states that the individual sewage treatment system located upon the herein described property IS - ~~IS NOT~~ in use.
2. The Seller states to the best of Seller's knowledge that the individual sewage treatment system ~~IS~~ IS NOT in compliance with applicable sewage treatment laws and rules.



Patricia A. Jones
Patricia Jones

Kelly R. Sheridan
Kelly R. Sheridan

Donald L. Scroggs
Donald L. Scroggs
Lorraine E. Scroggs
Lorraine E. Scroggs

03-116
158N 31W
Septic System



APPLICATION FOR A LAND USE PERMIT

Please carefully complete this application according to the instructions. Failure to fill in all the required information may result in a delay of processing your application. A fee of \$ 75.00 payable to the Lake of the Woods County Treasurer must accompany this application.

Name of Applicant: Donald Scroggs

Mailing Address: 1411 59th ST SW
Baudette MN 56623

Phone Number: Work _____ Home _____

Site Address: 1411 59th ST SW

PROPERTY DATA

Legal Description: NW 1/4 of the NE 1/4 less the W 1/2

Parcel Number: R43.16.12.000 Section # 16 Township # 158N Range # 31W

Shoreland Frontage: YES NO Name of Lake/River/Stream: Rapid River

What is your lot width at the shoreline? 660 ft.

Property size: Width at building site 660 ft. Depth _____ ft. 20 Acres

List all existing Structures and their dimensions: House Garage

Have you ever applied for any land use permits on the property? YES NO If yes, list _____

STRUCTURAL DATA

Proposed structure and/or use: Septic System

Total number of bedrooms after construction: 3 Height (ground level to roof peak): _____

Please explain plans for walkouts, decks, accessory structures, etc.: _____

Proposed structure:
 Dimensions (Exterior Footprint): Width _____ Length _____ Square ft. _____

Structural Setbacks: Side Yard Near _____ Side Yard Far _____
 (horizontal distance) Road Right of Way _____ Road Centerline _____
 Shoreline Setback _____

Have there been any Variances or Conditional Uses applied for on this property? YES NO

Is there or will there be any commercial use of this property? YES NO If yes, explain: _____

Contractor Name: Dave Olson License Number: # 2016

SHORELAND DATA

Elevation of unaltered building site above lake/river/stream: _____ ft.

Elevation of lowest floor or basement above lake/river/stream: _____ ft.

Are you planning to remove any vegetation? YES NO If yes, explain: _____

Are you planning to do any grading or filling? YES NO If yes, explain: _____

DS

JM

ENVIRONMENTAL DATA

List the type of existing water supply system (see instructions): _____

For private water wells please give the depth and age of all wells: _____

If a new well is to be installed, please list the well driller's name: _____

Are there any abandoned or unused wells on the property: *YES NO* If yes, explain: _____

List the type of existing septic systems on the property (see instructions): _____

For an existing system, please give the installer's name and age of the system: _____

For an existing system, please identify the type of septic tank (concrete, plastic, steel) and the capacity: _____

For a new septic system, please identify the licensed designer and installer of the system: _____

Dave Olson

Does your property contain low areas, wetlands, or areas with occasional standing water? *YES NO* If yes, explain: _____

NOTE: SEE WETLAND DATA INSTRUCTIONS. IF ANY QUESTIONS, CALL SWCD 634-1842

ALL APPLICANTS MUST SIGN BELOW

I hereby certify that I am the owner or authorized agent of the owner of the above property and that all uses will conform to the provisions of the Lake of the Woods County official controls. I further certify that I will comply with all conditions placed upon this permit should this application be approved. Intentional or unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid. I also authorize County staff to inspect the property during a review of the application during a reasonable time of day.

APPLICANT Robert Olson for Don Scarpis DATE 9/11/03

THIS PAGE TO BE COMPLETED BY ZONING OFFICE

PERMIT FEES:

Permit Type(s) Septic
Amount Paid 75.00
Amount Due - 0 -

CHECK# #1040 (Robert Hupwood)
RECEIPT# 5489 for Don Scroggs

APPLICABLE ZONING DISTRICTS

SOILS DATA

- RESIDENTIAL DEVELOPMENT
- COMMERCIAL-RECREATION
- NATURAL ENVIRONMENT
- GENERAL USE
- SHORELAND
- FLOODPLAIN
- OTHER _____

SOILTYPE _____
 PERCOLATION RATE _____
 DEPTH TO WATER TABLE _____
 DEPTH TO MOTTLED SOIL _____
 DATE OF SOIL TESTING _____
 ELEVATION AT BUILDING SITE _____

SHORELAND MANGAGEMENT DATA

LAKESTREAM NAME _____
 CLASSIFICATION: GD, F, A, TR, JU
 OTHER _____

SUMMARY OF SUPPORTING DOCUMENTS

- SKETCH PLAN
- ELEVATION
- TOPO SURVEY
- LOT PROFILE
- HOUSE PLAN VIEW
- LOT SURVEY
- PERCOLATION DATA SHEETS
- OTHER _____
- WORKSHEETS
- SOIL BORINGS

LAND USE PERMIT

APPLICATION IS HEREBY DENIED
 PERMISSION IS HEREBY GRANTED TO: Donald Scroggs FOR THE

PURPOSE Septic System IN _____ METES OR BOUNDS OR LOT, BLOCK AND SUBDIVISION

IN THE NW 14 OF THE NE 14 SECTION 16 TOWNSHIP 15N RANGE 3W ON Rapid River BODY OF WATER

AND 59th ST SW IN LAKE OF THE WOODS COUNTY, IN ACCORDANCE WITH THE APPLICATION, AND ANY PUBLIC ROAD #

ADDENDUM FORM, PLANS, SPECIFICATIONS AND ALL OTHER SUPPORTING DATA, UNLESS SPECIFIED 9-11-03 DATE

BY ORDER OF: _____ THIS PERMIT TERMINATES ON 3-10-04

LAKE OF THE WOODS COUNTY ZONING ADMINISTRATOR

PERMIT # 03-116

Conditions/Comments:

Individual Sewage Treatment System Worksheet Lake of the Woods County

Property Owner Don Schroger Date 8-27-07

FLOW

A. Estimated 218 gpd
Measured _____ x 1.5 = _____ gpd

Septic Tank Volume

B. 1000 gallons

Soils (Site evaluation data)

C. Depth to restricting layer = _____ feet
D. Maximum depth of system C-3 ft = 3 feet
E. Percolation rate 6 MPI
F. SSF 1.27 sq ft/gpd (See SSF chart lower right)

Sq. Footage of House _____ No. of Bedrooms _____
Sq. ft per bedroom _____ No. of water use appliances _____
Type of Dwelling I II III IV (circle one)
Type of Establishment _____
(If other than single family residence - restaurant, resort cabin, etc.)

Estimated Sewage Flows in gpd

| Number of Bedrooms | Type I | Type II | Type III | Type IV |
|--------------------|--------|---------|------------|--|
| 2 | 300 | 225 | 180 | 60% of the values in Type I, or III, columns |
| 3 | 450 | 300 | <u>218</u> | |
| 4 | 600 | 375 | 236 | |
| 5 | 750 | 450 | 294 | |
| 6 | 900 | 525 | 332 | |
| 7 | 1050 | 600 | 370 | |
| 8 | 1200 | 675 | 408 | |

Trench Bottom Area

H. For trenches with 6 inches of rock below the pipe:
 $A \times F \times 1.5 = 218 \times 1.5 = 327$ sq ft of bottom area
I. For trenches with 12 inches of rock below the pipe:
 $A \times F \times 0.8 = ____ \times ____ \times 0.8 = ____ \text{ sq ft of bottom area}$
J. For trenches with 18 inches of rock below the pipe:
 $A \times F \times 0.66 = ____ \times ____ \times 0.66 = ____ \text{ sq ft of bottom area}$
K. For trenches with 24 inches of rock below the pipe:
 $A \times F \times 0.6 = ____ \times ____ = ____ \text{ sq ft of bottom area}$

Bed Bottom Area

L. For seepage beds with 6 or 12 inches of rock below the pipe:
 $A \times F \times 1.5 = ____ \times ____ \times 1.5 = ____ \text{ sq. ft. of bottom area}$

Type I: Total floor area + by number of bedrooms is more than 800 sq ft per bedroom, or more than two water use appliances.
Type II: Total floor area + by number of bedrooms is more than 500 sq ft per bedroom, or more than two water appliances.
Type III: Total floor area + by number of bedrooms is less than 500 sq ft per bedroom and no more than two water use appliances.
Type IV: No toilet waste into sewage system.

Rock Volume in Cubic Yards

M. Rock depth below distribution pipe plus 0.5 foot times bottom area: $M = \text{Rock depth} + 6 \text{ inches} \times \text{Area (H,I,J,K,L)} \div 27 = \text{cubic yards.}$
 $M = (6" + 0.5 \text{ ft}) \times 327 = 376 \text{ cu. ft} \div 27 = 10 \text{ cu. yds.}$

Water use appliances are: clothes washing machine, dishwasher, water softener, garbage disposal, or self cleaning humidifier in furnace.

Distribution

(Check one based on slope)
 Bed (less than 6% slope)
 Trenches (Drop boxes any slope)
 Distribution box (level to slightly sloping)

SSF-Soil Sizing Factor

| Percolation Rate in Min. per inch. | Soil Texture | Sq feet per gallon per day |
|------------------------------------|--------------|----------------------------|
| Faster than 0.1 | Coarse Sand | |
| 0.1 to 5 | Sand | 0.83 |
| 0.1 to 5 | Fine sand | 1.67 |
| 6 to 15 | Sandy Loam | <u>1.27</u> |
| 16 to 30 | Loam | 1.67 |
| 31 to 45 | Silt Loam | 2.00 |
| 46 to 60 | Clay Loam | 2.20 |
| Slower than 60 | Clay | |

Trench Length

N. Select trench width = 3 ft
O. Divide bottom area by trench width: $(H,I,J \text{ or } K) \div O = \text{lineal feet}$
 $327 \div 3 \text{ lineal feet} = 92 \text{ lineal feet}$

Septic Tank Capacities

| Number of Bedrooms | Minimum Liquid Capacity | Capacity with garbage disposal |
|--------------------|-------------------------|--------------------------------|
| 2 or less | 750 | 1125 |
| 3 or 4 | 1000 | 1500 |
| 5 or 6 | 1500 | 2250 |
| 7, 8 or 9 | 2000 | 3000 |

Gravel-less Drain tile

P. For Trenches with 8" gravel-less drain tile
 $A \times F \div 2 = ____ \times ____ \div 2 = ____ \text{ lineal feet of gravel-less}$
Q. For Trenches with 10" gravel-less drain tile.
 $A \times F \div 3 = ____ \times ____ \div 3 = ____ \text{ lineal feet of gravel-less}$

System Designer: DAVE OLSON

Permitting Number # (2016)

DS JM