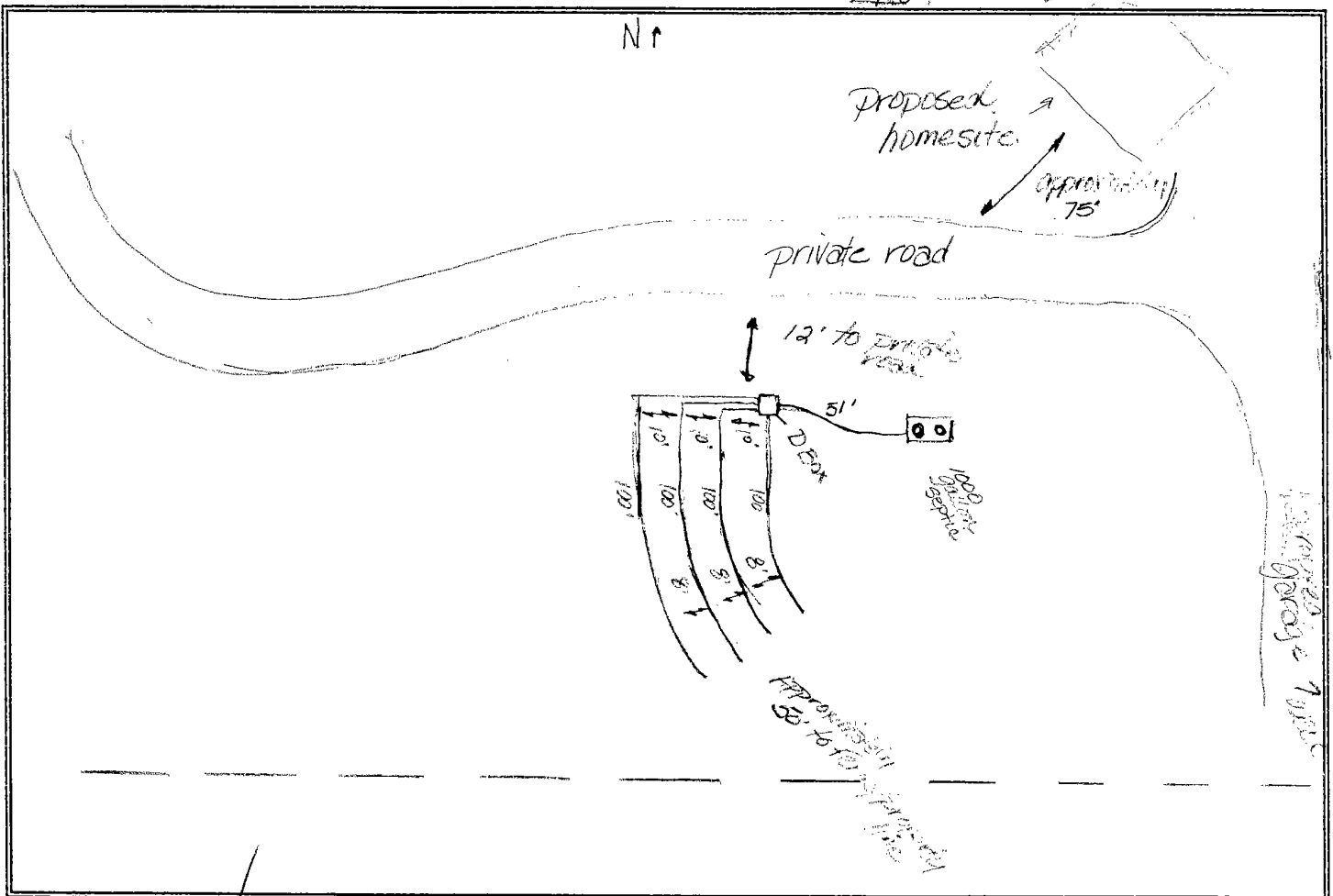


PROPERTY OWNER Walton, Ernest & Karen
PHYSICAL ADDRESS 22434 East Shore Rd., Bigfork MT 59911
LEGAL DESCRIPTION S 1/2 SW 1/4 SE 1/4 SECTION 04, TWP 25 N, RNG 19
GEOCODE 3584-04-1-01-05-0000 SUBDIVISION _____ LOT _____ BLK _____
TR 1 003-3757 6-61 ac.
PERMIT NO. SP-73 3531 CONTRACTOR Jim Bolton

No presentation



SIGNATURE OF APPLICANT OR AUTHORIZED AGENT _____

APPLICATION FOR LAKE COUNTY SEWAGE DISPOSAL SYSTEM INSTALLATION PERMIT

Section A: To be completed and signed by property owner or their representative and returned to Land Services with \$50.00 application fee.

Property Owner Ernest S. Walton & Karen Walton Phone # 982-3221
Mailing Address 22434 E Shore Rd City Big Lake State/Zip MN 55499
Property Address (if known) same as above
Legal Description: Section 4 Township 25 N Range 19 W SW 1/4 SW 1/4 _____
Subdivision Name (if applicable) Walton short plat Lot _____ Block _____
Size of Parcel 6.61 ac[±] Water system: Proposed _____ Existing X Type well
Dwelling: Single family X Multi-family _____ Mobilehome _____ #Bedrms 3
Is the property zoned? Yes X No _____ Zoning District East Shore

Zoning Conformance Permit # _____ If building notification permit has not been issued, contact Lake County Planning Dept. to obtain a building notification permit prior to Septic Permit being issued.)

I hereby declare that the information submitted herein is true and complete to the best of my knowledge. I understand that a final inspection of the approved system must be conducted by Lake County Land Services prior to backfilling.

Karen Walton Date 7/7/95
Signature of Applicant or Authorized Agent
Section B: To be completed by Lake County Sanitarian.

GEO Code _____ Tax Statement # _____

System is a replacement _____ new ✓ holding tank _____ sewage disposal system. J-no. _____

Property Type: Agricultural _____ Lakeshore _____ Residential ✓ Commercial _____ Floodhazard _____

State Septic Approval: Required _____ Completed ✓ Not Required _____ Reference Date 11-15-93

Name Walton Minor Subdivision State ES # 24-94-824-313

Does property require a building notification permit? Yes X No _____ Permit # ES 95-7

Soil Type in area of proposed drainfield _____

Percolation test results _____ Absorption area proposed 275 ~~430~~ ft²/per bedroom

Contractor Jim Battee Required septic tank size: 1000 gallons.

Drainfield sizing reference: # of bedrooms 3 other 2 Compartment Concrete

Type of absorption area proposed: 4-100' trenches with 18"-24"

Washed gravel under the laterals -
The presketch of the proposed layout will be drawn on the back of this application by the sanitarian. The sketch will include property lines, direction of slope, distance to wells, streams, irrigation ditches, lake, and any other bodies of water.

Mary Murphy 3531 2337
Signature of Registered Sanitarian Permit Number Check Number
APPROVED PERMIT IS INVALID IF SYSTEM IS NOT INSTALLED WITHIN SIX (6) MONTHS OF ISSUANCE.