



SEPTIC AS-BUILT FORM

Planning and Zoning | 13880 Business Center Drive Elk River MN 55330

Office: 763-765-4450 | zoning@co.sherburne.mn.us

Permit # _____ Date of Install: _____ PID #: _____

Property Address: _____

Installer: _____ MPCA License #: _____

Construction Type: New Construction Replacement

Number of Bedrooms System is Constructed For: _____ Flow Rate: _____

Septic System Type: Type I Type II Type III Type IV Type V

Soil Treatment Area: Trench Pressure Bed At-Grade Mound Other _____

Septic Tank

Manufacturer: _____

Capacity: Septic Tank #1: _____ Septic Tank #2: _____ Pump Tank: _____

Pump HP: _____ GPM: _____ TDH: _____ Floats set per Design: Yes No

Alarm Type: Audible Visual Indoor Outdoor Event Counter #: _____

Soil Treatment Area

Elevation of Limiting Layer: _____ Elevation to Bottom of Distribution Media: _____

Media Type: _____ Distribution Method: Gravity Pressure

Trenches

Width: _____ Length: _____ Depth of Media Below Pipe: 6" 9" 12" Other: _____

Pressure Bed

Width: _____ Length: _____ Depth of Media Below Pipe: 6" 9" 12" Other: _____

At-Grade Absorption

Width: _____ Length: _____ Depth of Media Below Pipe: 6" 9" 12" Other: _____

Mound Absorption

Width: _____ Length: _____ Depth of Media Below Pipe: 6" 9" 12" Other: _____

Depth of Sand Lift Below Distribution Media: _____

SEPTIC SYSTEM AS-BUILT DRAWING FORM



Elevations:

Benchmark Elevation: _____

Bottom of Distribution Media: _____

Periodically Saturated Soil: _____

System Separation: _____

Required Compliance Separation: _____

Items to be Identified:

- Septic, holding, pump tanks and piping
- Label in ground system width and length
- Label above ground system absorption width, length and final dimensions
- Setbacks from tank and drain field (Property lines, structures, wells, lakes, and road right-of-way)
- Abandoned systems (if any)
- Benchmark location

I hereby certify, as the installer, that this system has been installed in accordance with all applicable ordinances, rules, and laws.

Installer: _____

License #: _____

Signature: _____

Date: _____