



CITY OF HAM LAKE

15544 Central Ave NE
 Ham Lake, MN 55304
 Phone: 763-434-9555

bldgdept@ci.ham-lake.mn.us

SEPTIC PERMIT APPLICATION

<u>Permit Number</u>

Contacted by: _____

Installer Name:		License #	Phone Number:
Job Site Address:		Legal Description:	
Name of Property Owner(s):		Phone Number:	
Use of Building: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> New System <input type="checkbox"/> Replace or Alter Existing	
Installing New Tanks <input type="checkbox"/>		Using Existing Tanks <input type="checkbox"/>	
Number of Tanks _____		Size of Tank 1 _____	Size of Tank 2 _____
		Size of Tank 3 _____	
Type of System:	At-Grade	Mound	Trench
	Pressure Bed	Seepage Bed	Gravity
	Other	Fee(s)	
Residential - Type I			\$150.00
Residential - Type III	Liability Waiver Required		\$200.00
Commercial			\$200.00
System Abandonment			\$50.00
Tank Replacement Only			\$100.00
System Repair			\$60.00
Connect to Existing System			\$60.00
Tank Installation			\$100.00
Tank Removal			\$50.00
Miscellaneous			
Minnesota State Surcharge <input checked="" type="checkbox"/>			\$1.00

Total \$

 Signature of Applicant

 Date

 Signature of Building Official

 Date