

CITY OF EAST GULL LAKE
ISTS APPLICATION

APPLICATION:

- A. Applicant shall complete the ISTS Application and submit to the City Clerk.
- B. Applicant shall attach proposed ISTS design to completed application. Design shall be done by a licensed designer, shall be complete and shall be legible.
- C. If the City does not have a current license of the designer on file, a copy shall be submitted at the time of application.
- D. All applications must be submitted **14 days prior** to the proposed installation date.
- E. The ISTS fee shall be paid by the applicant at the time of application.

REVIEW:

- A. The City Clerk shall review the application for completeness and assign a reference number to application, plans, and any other attachments.
- B. Applicant will be notified, in writing, where additional information is needed.

ACTION:

In order to obtain an ISTS permit, the following must happen:

- A. The Wastewater Superintendent must review and approve the completed application.
- B. The City Clerk must ensure that the permit fee has been collected.
- C. Based on the date indicated on the application, the Wastewater Superintendent will coordinate a field inspection of the installation.

Note 1: The City Fee Schedule is based on the average processing and review costs for land use applications. When costs exceed the original application fees, the applicant shall reimburse the City for any additional costs. Such expenses may include, but are not limited to, payroll, mailing costs, consultant fees and other professional services the City may need to obtain in reviewing permits. **Applicants will be charged an inspection fee for each on-site inspection visit.** The City may withhold final action on a land use application and/or hold the release of a construction permit until all fees are paid.

Note 2: The City strives to process all applications as soon as they are received. To avoid delays, applicants should allow themselves as much time as possible between the time they submit their application and the time they wish to begin construction. Close coordination with the City during the project design phase and submittals that are complete and accurate will help applicants avoid delays.

Note 3: All ISTS installations must be inspected by a City appointed inspector unless written permission is given by the Zoning Administrator prior to installation. There shall be no exceptions. ISTS's that are not inspected shall be considered illegal and in violation of the Ordinance subject to enforcement action under the City Code.

APP # _____

Date: _____

(for office use only)

CITY OF EAST GULL LAKE
ISTS PERMIT APPLICATION

Name of Applicant _____ Phone _____

Mailing Address _____ Email _____

City, State, Zip _____

Applicant is:

Title Holder of Property:

Legal Owner () _____

(Name)

Contract Buyer () _____

(Address)

Option Holder () _____

Agent () _____

Other _____

(City, State, Zip)

Signature of Owner, authorizing application: _____

(By signing the owner is certifying that they have read and understood the instructions accompanying this application.)

Signature of Applicant (if different than owner): _____

(By signing the applicant is certifying that they have read and understood the instructions accompanying this application.)

Driving directions from City Hall to the property involved in this request:

Parcel ID No. _____

Proposed Installation Date _____

Note: Applicant must provide a proposed installation date. Installer may vary from stated installation date, with cause, as long as the City is notified 48 hours in advance. Applicant will be charged the full inspection fee for each site visit made by the City to inspect the installation.

Approved by the Wastewater Superintendent: _____ Date: _____

CHECKLIST

_____ Completed application

_____ Design

_____ Designer's License

_____ Fee

_____ Installation Date

CITY OF EAST GULL LAKE CONTACT INFORMATION

City of East Gull Lake:

10790 Squaw Point Road
East Gull Lake, MN 56401

Phone: 218-828-9279

Fax: 218-825-8422

Email: ctyegull@scicable.com

Planning and Zoning Administrator:

Community Growth Institute
14084 Baxter Drive, Suite #7
Baxter, MN 56425

Phone: 218-828-3064

Toll Free: 866-900-3064

Fax: 218-828-3069