

**MARION TOWNSHIP
ZONING BOARD OF APPEALS**

**The Township Zoning Board of Appeals will meet in person
February 3, 2025 at 7:30 pm**

However, there will be virtual access.

Instructions to participate in the meeting are posted on www.mariontownship.com

AGENDA

CALL TO ORDER

PLEDGE OF ALLEGIENCE

INTRODUCTION OF MEMBERS

APPROVAL OF AGENDA

February 3, 2025 Regular Meeting

APPROVAL OF MINUTES FOR:

December 02, 2024 Regular Meeting

CALL TO PUBLIC

NEW BUSINESS:

- 1) ZBA Case #01-25 Randall Metz 4124 Ulana Court is seeking a variance to Section 6.04E Pool in Front Yard & 6.07.3 accessory structure in front yard.
4710-25-201-028

UNFINISHED BUSINESS:

SPECIAL ORDERS:

CALL TO PUBLIC:

ADJOURNMENT:

Submitted by: S. Longstreet

Approved: _____

**MARION TOWNSHIP
ZONING BOARD OF APPEALS
REGULAR MEETING
DECEMBER 2, 2024**

MEMBERS PRESENT: Larry Fillinger, Linda Manson-Dempsey, Jim Witkowski, Larry Grunn, and Jean Root (alternate)

MEMBERS ABSENT: None

CALL TO ORDER

Larry Fillinger called the meeting to order at 7:30 pm. The meeting is also available to attend online.

PLEDGE OF ALLEGIANCE

MEMBERS PRESENT

The Zoning Board of Appeals members introduced themselves.

APPROVAL OF AGENDA

The agenda was amended to include 2025 officer election under Special Orders. Linda Manson-Dempsey motioned to approve the agenda as amended. Larry Fillinger seconded. **Motion carried.**

APPROVAL OF MINUTES

August 12, 2024 Regular Meeting: Linda Manson-Dempsey motioned to approve the minutes as presented. Larry Grunn seconded. **Motion carried.** (Root and Witkowski abstained.)

CALL TO THE PUBLIC

No response.

NEW BUSINESS

ZBA Case #03-24 Victor & Lynne Lewandowski, 4154 Rurik, Tax Code #4710-25-201-025, seeking variances to Section 6.04 E—pool in front yard and 8.04 E 3 a—front-yard setback

The applicants were present to request two variances for installation of an inground pool. They have young grandchildren and have concerns about them swimming in the lake due to weed control chemicals, snapping turtles, snakes, muck, etc.

Jean Root asked whether the pool will be chlorine or salt water; the applicant said salt water. She said they need to be cautious and have the proper equipment to drain the pool when necessary and would like them to submit details on how that will be handled if the variances are granted.

Larry Fillinger asked what type of fence would go around the pool; the applicants said a four foot decorative metal fence so there is no obstruction of the view.

These variances are granted for the plot plan depicting "pool position #2 and with the condition that the property owner will submit a site plan with details on the drainage system.

UNFINISHED BUSINESS

None.

SPECIAL ORDERS

Linda Manson-Dempsey motioned to nominate Larry Fillinger as 2025 ZBA chairman. Jean Root seconded. Roll call vote: Witkowski—no; Manson-Dempsey—yes; Grunn—yes; Fillinger—yes; Root—yes. **Motion carried 4-1.**

Larry Fillinger motioned to nominate Linda Manson-Dempsey as the 2025 ZBA vice chairman. Jean Root seconded. Roll call vote: Witkowski, Manson-Dempsey, Grunn, Fillinger, Root—all yes. **Motion carried 5-0.**

Larry Fillinger motioned to nominate Diane Bockhausen as the 2025 ZBA secretary. Jim Witkowski seconded. Roll call vote: Root, Fillinger, Grunn, Manson-Dempsey, Witkowski—all yes. **Motion carried 5-0.**

CALL TO THE PUBLIC

No response.

ADJOURNMENT

Larry Grunn motioned to adjourn at 8:17 pm. Jean Root seconded. **Motion carried.**

APPLICATION TO ZONING BOARD OF APPEALS

ZBA Case # 01-25
Tax Code 4710-25-201-028
Current Zoning ERS-1
Fee Paid \$400.00
Date Received 1-08-25
Received by DAVE

Applicant RANDALL METZ
Address 4124 VLANA COURT
Telephone 248-444-0474
(Home) (Work)

Applicant is (check one): Owner Purchaser Representative

Purchaser or Representative needs a letter of permission from owner

Nature of Request (check applicable one)

- Administrative Review (per Section 5.05 A)
- Interpretation of Ordinance (per Section 5.05 B 1, 2, 3 or 4)
- Variance Request (see below)

1. Zoning Ordinance Section

6.07.3
6.04E

- 2. Letter stating reason request should be granted (per Section 5.05 C)
- 3. Plot Plan—example and checklist attached (requirement per Section 4.03 D)
- 4. Required Livingston County Health Department evaluation

Refer to checklist on last page for additional instructions

By signing this application, permission is granted for official representative(s) of Marion Township to do onsite inspections.

[Signature]
Signature

1-08-25
Date

Office Use Only	
Meeting Date <u>2-3-2025</u>	Action Taken _____
Conditions (if applicable) _____	
Signed _____	

Application to Zoning Board of Appeals
Section 5.05C 1-5
Variance Request for Pool - Randall Metz

Request:

1. Variance be granted to place an inground pool on the front of the property (lakeside).
2. Applicable zoning sections 6.04E and 6.07.3.
 - a. The in-ground pool is 96' from the south property line (lakefront) and 108' from the permanent lake water edge.
 - b. Zoning ordinance requires 50' setback to permanent structures from (front) lakefront property line, the house is 122' from the closest point.
 - c. Proposed pool is 20' from side yard East property line (setback requirement is 10').
 - d. Proposed pool is 23' from side yard West property line (setback requirement is 10') however, West parcel is owned by the applicant and not applicable.
 - e. Pool surface is 28' above lake level - not visible from any point on the lake or adjacent neighbors.

Additional information requested for the Zoning Board:

1. **How the restrictions of the Township Zoning Ordinance would unreasonably prevent the owner from using the property for a permitted use.**

Pools are a permitted use in ERS-1 section 8.04C residential zoning. However, current restrictions do not allow a pool in the front yard. The lakeside is considered the front yard on a lake front lot and restricts the owner of installing a pool, a permitted use, in the only buildable location on the lot.

2. **How the variance would do substantial justice to the applicant and a lesser relaxation than that requested would not give substantial relief to the owner of the property**

A pool cannot be constructed anywhere else on the property due to existing conditions/restrictions i.e. septic field, driveway and very excessive slopes/topography. Under the circumstances only a full variance will allow the use.

3. **How the unique circumstances of the property create the need for a variance.**

Significant topography (30' elevation difference) along the entire lakefront side of the property is non-buildable (see attached photos). Also, required setbacks and other site conditions (ie septic field, driveway etc. further restrict buildable options. In addition the concern of the use of lake control chemical treatments to control weeds and invasive vegetation is a concern with respect to utilizing the lake vs a pool alleviates this issue.

In addition our home and property is a lot of record and existed before zoning ordinances being developed and considered grandfathered.

4. **How the alleged hardship was not created by the property owner.**


The hardship is a result of current zoning restrictions and physical characteristics of the property. The fact that the current ordinance establishes the "front yard" as the lake side vs the road side greatly restricts usability of permitted uses for all lakefront properties. Please note the proposed pool is located well within all the setbacks including the 50' front yard setback.

5. **The difficulty shall not be deemed solely economic.**

The is no intent for economic gain since the home/property will be handed down to our children and grandchildren.

Exhibits, attachments

- A. Proposed site plan overlaid on current property survey
- B. Enlarged Partial site plan
- C. Pool construction site plan and details.
- D. Site photos illustrating existing conditions and views.
 - D1 Proposed pool location.
 - D2 Existing topography.
 - D3. View from Coon Lake (showing pool location with respect to existing topography and illustrating the proposed pool is non-visible from lake or adjacent neighbors.
 - D4. Same view as D3 but closer.
- E. Letters from adjacent neighbors.
- F. Applicable zoning sections 6.04E and 6.07.3

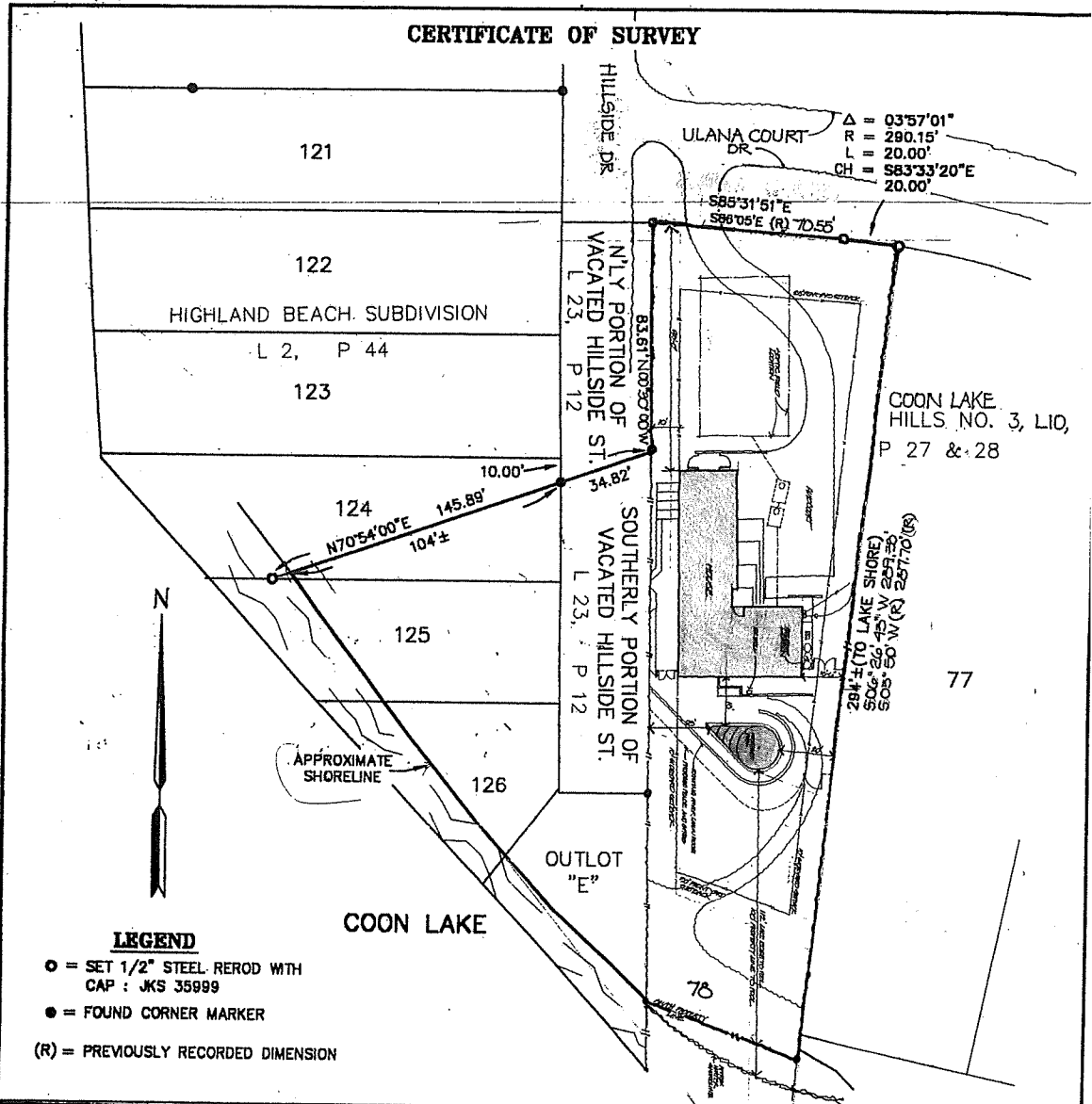


Signature



Date

CERTIFICATE OF SURVEY



LEGEND

- = SET 1/2" STEEL REROD WITH CAP : JKS 35999
- = FOUND CORNER MARKER
- (R) = PREVIOUSLY RECORDED DIMENSION

LEGAL DESCRIPTION (FURNISHED BY CLIENT)

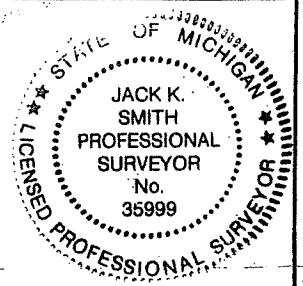
LOT 78 OF COON LAKE HILLS NO. 3, AS RECORDED IN LIBER 10 OF PLATS, PAGES 27 AND 28, LIVINGSTON COUNTY RECORDS.

LOTS 126, 125, OUTLOT E AND A PART OF LOT 124 DESCRIBED AS: BEGINNING AT A POINT ON THE EAST LINE OF LOT 124, 10 FEET SOUTH OF THE NORTHEAST CORNER THEREOF; THENCE S70°54'W TO INTERSECT THE SOUTHERN BOUNDARY OF LOT 124; THENCE EASTERLY ALONG SAID SOUTHERN BOUNDARY TO THE SOUTHEAST CORNER OF LOT 124; THENCE NORTH ALONG SAID EAST LINE OF LOT 124 TO THE POINT OF BEGINNING, ALL IN HIGHLAND BEACH SUBDIVISION, AS RECORDED IN LIBER 2 OF PLATS, PAGE 44, LIVINGSTON COUNTY RECORDS.

THE SOUTHERLY PORTION OF VACATED HILLSIDE STREET AS SHOWN ON THE AMENDED PLAT OF HILLSIDE STREET, HIGHLAND BEACH SUBDIVISION AS RECORDED IN LIBER 22, PAGE 43 AND IN LIBER 23 OF PLATS, PAGE 12, LIVINGSTON COUNTY RECORDS

I HEREBY CERTIFY THAT I HAVE SURVEYED AND MAPPED THE LAND HEREIN PLATTED AND/OR DESCRIBED ON 01/21/1998, AND THAT THE RATIO OF CLOSURE ON THE UNADJUSTED FIELD OBSERVATIONS OF SUCH SURVEY WAS 1/7,500 OR BETTER.

CLIENT: RANDY METZ		SCALE: 1" = 20'
SECTION: 25 TOWN: 2 NORTH RANGE: 4 EAST		<i>Jack K. Smith</i>
MARION TOWNSHIP LIVINGSTON COUNTY, MICHIGAN		
DATE: 01-22-1998	CREW: JKS/TG	JACK K. SMITH PROFESSIONAL SURVEYOR No. 35999
BOOK NO. 178 PG 19	COMP: JKS	GARLOCK-SMITH PROFESSIONAL SURVEYORS 705 NORTH MICHIGAN HOWELL, MICHIGAN 48843 (517) 546 - 3340 FAX: (517) 546 - 2941
SHEET 1 OF 1	DRAWN: JKS	
	REV:	



A
PROPOSED
SITE PLAN



PROPOSED
POOL LOCATION

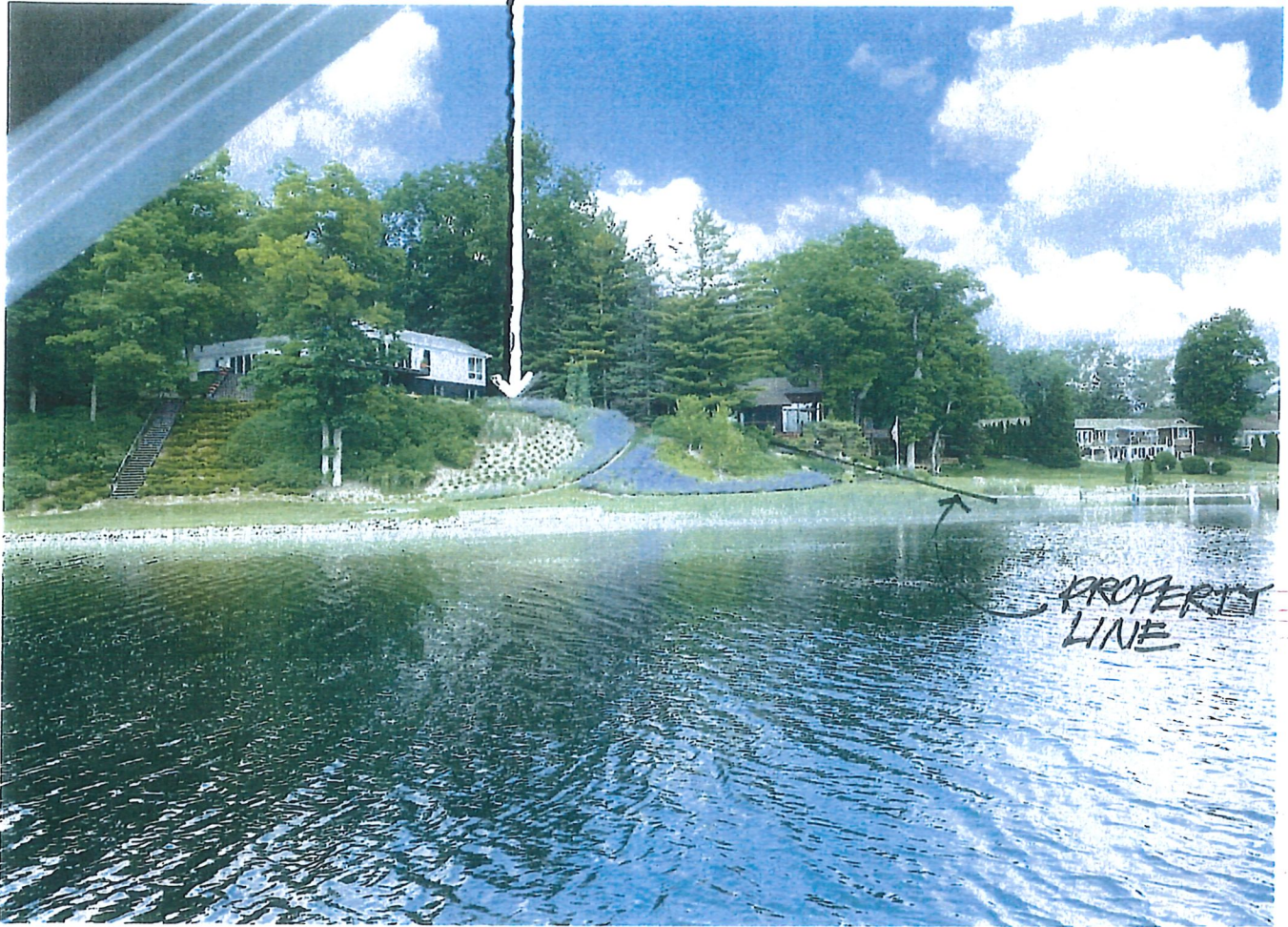
D1



EXISTING
TOPOGRAPHY

D2

PROPOSED POOL LOCATION
(26' ABOVE LAKE LEVEL)



VIEW FROM COON LAKE LOOKING EAST

D3

PROPOSED POOL LOCATION
(26' ABOVE LAKE LEVEL)



VIEW FROM COON LAKE LOOKING EAST

D4

January 8, 2025


Bill Brancheau & Nina Cambron
4130 Rurik Dr.
Howell, MI 48843

To: Marion Township Zoning Board of Appeals

RE: ZBA Case #01-25, requested variance for inground pool in front yard (lakeside)
Applicant: Randall Metz, 4124 Ulana Ct.

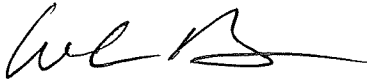
We have reviewed the proposed variance request to install an inground pool within the property front yard (lakeside), per the submitted documents dated January 8, 2025, and grant our approval.

Sincerely,



Signature

1/8/2025
Date



Signature

1/8/25
Date

E

January 8, 2025

Roy Schwarz & Joann Schmidt
4114 Hillside
Howell, MI 48843

To: Marion Township Zoning Board of Appeals

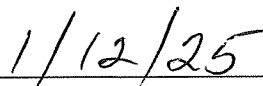
RE: ZBA Case #01-25, requested variance for inground pool in front yard (lakeside)
Applicant: Randall Metz, 4124 Ulana Ct.

We have reviewed the proposed variance request to install an inground pool within the property front yard (lakeside), per the submitted documents dated January 8, 2025, and grant our approval.

Sincerely,



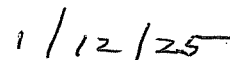
Signature



Date



Signature



Date

E

Section 6.04 Swimming Pools

- A. **Classification:** A swimming pool shall be considered as an accessory building for the purposes of determining required yard spaces. If the swimming pool is enclosed by a roof, the enclosure area shall be included in the calculation of lot coverage.
- B. **Application:** The application for a land use permit to erect a swimming pool shall include the name of the owner, the manner of supervision of the pool, a plot plan, and location of adjacent buildings, fencing, gates, and other detailed information affecting construction and safety measures deemed necessary by the Zoning Administrator.
- C. **Fencing:** Yard areas with pools are to be fenced to discourage unsupervised access.
 - 1. Such fencing is to be a minimum of four (4) feet high, and equipped with a self-closing and self-latching gate.
 - 2. Latching devices are to be located at a minimum height of three (3) feet above the ground.
 - 3. Such fencing may be omitted where building walls without doorways abut the pool area, provided that the entire perimeter of the pool area is secured.
 - 4. Above ground swimming pools with slides four (4) feet or more above grade, do not require fencing but do require a removable access ladder that lifts for safety.
- D. **Placement:** No swimming pool shall be located in any easement.
- E. **Setbacks:** No swimming pool shall be located in any front yard.
- F. **Lighting:** No lights shall be erected, operated or maintained in connection with a swimming pool in such a manner as to create an annoyance to surrounding properties.
- G. **Overhead Wiring:** Service drop conductors and any other open overhead wiring shall not be above a swimming pool.

Section 6.05 Moving Buildings

No existing building or other structure within or outside of the Township shall be relocated upon any parcel or lot within the Township unless the building design and construction are compatible with the general architectural character, design and construction of other structures located in the immediate area of the proposed site; the building and all materials therein are in conformity with the Building Code enforced in the Township; and the building or structure can be located upon the parcel and conform to all other requirements of the respective zoning district.

Section 6.06 Temporary Uses and Buildings

All temporary uses and buildings are permitted in all districts unless otherwise provided or otherwise limited herein. Temporary buildings not greater than three hundred (300) square feet in area and not to be used for dwelling purposes may be placed on a lot or parcel of record and occupied only under the following conditions as authorized by a temporary land use permit issued by the Zoning Administrator.

F

with the requirements of this Section, any conditions imposed by the Zoning Administrator or the permit issued thereunder.

8. Permits which are renewable shall have an application filed for renewal at least fifteen (15) days prior to the expiration date of the current permit, except that applications for renewal or extension of a permit for less than fifteen (15) days may be applied for no later than three (3) days prior to the expiration date of the current permit.

N. **Revocation:** Upon expiration or revocation of a temporary land use permit, the temporary use shall cease and all temporary buildings shall be removed from the parcel of land. A temporary land use permit may be revoked or modified by the Zoning Administrator upon a finding of any one of the following:

1. That circumstances have changed.
2. That the temporary land use permit was obtained by misrepresentation or fraud.
3. That one (1) or more of the conditions of the temporary land use permit have not been met; or,
4. That the use is in violation of any statute, Ordinance, law, or regulation.

O. **Appeal:** An appeal of a decision by the Zoning Administrator relative to denial of a temporary land use permit for a temporary use or renewal thereof may be taken to the Zoning Board of Appeals pursuant to Section 5.05 of this Ordinance.

Section 6.07 Accessory Uses and Structures

Accessory buildings, structures and uses are permitted only in connection with and on the same lot with a principal building, structure or use, provided such buildings, structures and uses are incidental to the principal building or use and does not include any activity conducted as a living quarters, except for farms or other uses otherwise permitted in this Ordinance that may be permitted on a separate lot in conjunction with the permitted activity, and shall be subject to the following regulations:

1.

Zoning districts	Lot Size Based on Gross Lot Area	Maximum Square Footage of all Accessory Structures
All single family residential districts	All parcels equal to or less than 1 acre in size	1,300 square feet
All single family residential districts	All parcels that are greater than 1 acre	These sizes are based on a .030 x parcel size calculation

2. An accessory structure, including carports which are attached to the principal building, shall comply in all respects with the requirements of this ordinance applicable to the principal building. Any covered or roofed structure, as an attachment between the accessory structure or carport and the main building, shall be considered a part of the main building, but shall not be considered habitable floor area.

F

3. Accessory buildings shall not be erected or allowed in any front yard, except for parcels larger than five acres providing no accessory building or structure is located closer than one hundred feet to the front property line or closer to the front property line than a principal building on any adjacent parcel of land or lot, whichever is greater.
4. Accessory buildings may be allowed in side yards providing they meet the minimum setbacks for the district in which it is located.
5. The maximum height for accessory buildings located on any parcels of land containing one acre of land or less or on any platted subdivision lot or site condominium building site shall not exceed thirty-five feet.
6. Accessory structures shall meet the minimum setbacks for the district in which it is located.
7. No accessory structure shall receive a certificate of zoning compliance prior to the principal structure receiving a certificate of zoning compliance.
8. No accessory structure shall be constructed prior to the approval of land use permit and the issuance of a building permit.
9. Accessory structures under two-hundred (200) square feet do not require a land use permit or building permit and are limited to two per parcel and must be behind the primary structure and screened from the public right-of-way. Accessory structures under 200 square feet and with a height no more than ten (10) feet above grade shall maintain a minimum five (5) foot side yard setback & five (5) foot rear yard setback. Accessory structures two-hundred (200) square feet and over and/or more than ten (10) feet above grade must meet the setback requirements of the zoning district in which they are located.
10. In no instance shall any accessory building be located within a dedicated easement right-of-way.
11. An accessory building shall not project within the front yard when it is located on a corner lot except as provided in item 3 above.
12. Accessory structures greater than two-hundred (200) square feet shall have a minimum 4:12 roof pitch, except engineered steel structures may have minimum 3:12.
13. The use of cargo containers for storage shall only be permitted in HS and LI districts, subject to the following:
 - a) Containers shall be restricted to a location behind the front face of the building.
 - b) Containers shall not be stacked above the height of a single container.
 - c) Container storage areas that are visible from the public right-of-way or abut residentially zoned or used properties shall be screened in accordance with the standards set forth in this ordinance.



Livingston County Health Department

Environmental Health Division • Fax (517) 546-9853 • Phone (517) 546-9858

2300 East Grand River Ave • Howell, Michigan 48843-7579

MARION

SEWAGE DISPOSAL PERMIT

PERMIT NUMBER: 02-0262 RS
TOWNSHIP: MARION
PROPERTY ADDRESS: 4124 ULANA
HOWELL, MI 48843

TAX ID#: _____
SECTION #: 25

LOCATED BETWEEN:
SUBDIVISION:
CREAGE:
OF BEDROOMS: 3

LOT #:
PARCEL #:
SCALED PLOT INCLUDED:

OWNER: METZ, RANDY & MARY
ADDRESS: 4124 ULANA
CITY, STATE, ZIP: HOWELL, MI 48843
PHONE: 517/548-1796

CONTRACTOR:
ADDRESS:
CITY, STATE, ZIP:
PHONE: / -

25

ENVIRONMENTAL SANITARIAN: Amy Adams DATE: 3-18-02
-----THIS PERMIT EXPIRES TWO YEARS FROM DATE OF ISSUANCE-----

MUNICIPAL WELL: _____
RESIDENTIAL OR COMMERCIAL PROPERTY: R

PRIVATE WELL: _____

INFO DESCRIPTION COMMENTS

- 0 - SOIL ID # S34,630
- 0 - TANK SIZE EXISTING
- 0 - ABSORP BED 1000 SQ.FT.
- 0 - %CUTDOWN REQ SEE DIAGRAM
- 0 - DEPTH/CUTDOWN +/- 12 FT.
- 0 - FILL REQUIRED YES
- 0 - FILL/DEPTH AS NEEDED

CONDITIONAL APPROVAL

REFER TO PERMIT APPENDIX

4124 ULANA

SPECIAL REQMS: LOCATE SYSTEM IN THE AREA OF ORIGINAL SYSTEM. 100% REMOVAL OF EXISTING SYSTEM AND ALL CONTAMINATED SOILS, THEN 50% CUT TO SAND AT +/- 12' (REFER TO ATTACHED SLANT CUT DIAGRAM). BACKFILL WITH ZNS SAND AS NEEDED. LAY STONE AND TILE. 24" MAX. COVER

**INSTALL TANK FILTER
**REQUIRED INSPECTIONS: 1)CUTDOWN 2)FINAL

MAINTAIN 50' TO ALL WELLS

- 1) All 3-19-02
- Verified tank filter 10/ complete
- 2-750 Gallon tank as per install 11' off prop. line
- 27x38
- 55' to neighbor's well

OK to cover
3-21-02ZF

FINAL APPROVAL: [Signature] ENVIRONMENTAL SANITARIAN DATE: 3-21-02

02-0262 RS



LIVINGSTON COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2300 E Grand River • Howell, Michigan 48843-7579
(517) 546-9858 • FAX (517) 546-9853

Application to install Sewage Disposal and/or Water Supply Facilities
For Single or Two Family Dwellings Only

Please Print or Type

[] New Construction [x] Replacement

Septic Permit # 02-0262RS
Well Permit #

I. LOCATION OF BUILDING

Address 4124 ULANA Phone () 548-1796
City/Village HOWELL Zip Code 48843 Township MARION Section# 25

Between and
Subdivision Lot(s)#
Acreage Parcel#
No of Bedrooms 3 Tax Code#
Den/Office room proposed [] yes [x] no
Will the pumping elevation be lower than the septic tank making it necessary to install a sewage lift pump
[] yes [x] no

A. OWNER

Name RANDY & MARY METZ Phone () 548-1796
Address 4124 ULANA
City/State HOWELL Zip Code

B. CONTRACTOR for Sewage Disposal System

Name HARTLAND SEPTIC SEPTIC Phone () 548 2487
Address 7230 FAUSSETT RD
City/State FENTON MICH Zip Code 48430

C. CONTRACTOR for Water Supply

Name Phone ()
Address
City/State Zip Code

D. BUILDER

Name Phone ()
Address
City/State Zip Code

I hereby apply for this permit and have authorization to do so I understand this is a construction permit only and the
sewage disposal system and/or well is not to be put into service until final written approval has been granted I further
state the information given herein is accurate and complete

Applicant's Signature Date 3-18-02

*****For Office Use Only*****

Receipt# 165715 Amount\$ 150- Payer HARTLAND SEPT

CK# 11593 501pm W & S APPLICATION 5-01 P65

Livingston County Health Department-Environmental Health Division

2300 E Grand River, Howell, Michigan 48843-7579

Fax (517) 546-9853 • Phone (517) 546-9858

HOMEOWNER INFORMATION SHEET FOR WATER SUPPLY AND/OR SEWAGE DISPOSAL FACILITIES

The following sketch represents the location of the on-site sewage disposal system and/or water well supply for the dwelling located at

Address 4124 Umana Township Marion Section No 25
City Howell State MI Zip 48843

Septic Tank Size 2-750 Gallon Dimensions of System 27'X38'
Absorption Bed/Trench 1000 Sq Ft. No of Lines 5 Lines
House, Deck, Garage 10', 5 Lines, 27', 38', 55', Neighbors Well, Driveway, Double Encased under drive, Umana, Well Driller, Sewage Disposal Contractor Hartland Septic, Water Supply Approved, Sewage Disposal Facilities Approved Jan Fahren 3-21-02, Inspecting Sanitarian

Please read the attached information regarding maintenance and care of the on-site sewage disposal facilities. The on-site sewage disposal system was inspected and approved in accordance with the Livingston County Sanitary Code. The water supply system was approved after reviewing the well log submitted by the well driller and receiving acceptable water quality analysis.

Since many interrelating factors contribute to the failure of a sewage disposal system and/or changes in water quality, approval cannot be considered as a guarantee by the Environmental Health Division that successful operation or quality of drinking water is assured.

CONDITIONAL PERMIT APPENDIX

Request to install a replacement sewage disposal system

OWNER _____

ADDRESS _____

CITY _____ ZIP _____

PROPERTY ADDRESS 4124 OLANA

TOWNSHIP MARION SECTION # 25

PHONE NO. BETWEEN 8 AM - 5 PM _____

A request was made to conduct a site investigation for the purpose of determining conditions and requirements for a replacement sewage system at the above referenced address

The Environmental Health Division of the Livingston County Health Department has the authority to grant construction permits for the installation of onsite sewage disposal systems. In cases where the permit application is for a replacement system designed to serve an existing structure, more allowance is granted to approve systems under marginal site conditions. Section 301.22 of the Livingston County Sanitary Code states "At the discretion of the Health Officer, modifications of the required distances, materials or size as stated in this Code may be applied if the local conditions warrant and in cases where dimensions or features of the premises create a physical impossibility for compliance." In such event, if the Health Officer finds that public health would not be jeopardized, he may approve a modified or better treatment than the existing system."

A site investigation conducted on Feb. 6, 2002, by John A. Wilson II, Sanitarian revealed the following.

The septic tank is one or all of the following A) is inadequately sized, B) inaccessible for cleaning; C) inaccessible for inspection.

The disposal system may be and/or is inadequately sized for the structure(s) served.

The disposal system will be located within the required isolation distance to water well supplies (50 feet).

The disposal system will be encroaching on required isolation distances to property lines, buildings, roadways, storm drains, etc

X The soil structure and/or soil conditions on the site are not suitable for the use of onsite wastewater disposal.

REFER 12 FT.

 A high water table or zone of saturation exists on the site, resulting in lack of proper treatment of the sewage effluent before discharging to the groundwater.

X An area for a replacement onsite system does not exist.

Other _____

More specifically 1) 100% REMOVAL OF ORIGINAL FIELD, NO SEPARATE RESERVE AREA.
2) 50% CUT TO 12 FT. / SLANT CUT

Therefore, due to the above, proper operation of an onsite sewage system may be difficult. Every attempt should be made to keep the sewage subsurface by way of drastically reducing the wastewater being generated on a daily basis. Reduction in wastewater flows can be accomplished in many ways, such as: the installation of low water fixture devices e.g. one gallon or less flush toilets, reduced flow shower fixtures, the elimination of laundry facilities, garbage disposals and water softener backwash from entering the system. In addition, the septic tank should be pumped out more frequently to prevent solids from being carried over to the disposal area. It should be noted that following these recommendations to significantly reduce the daily wastewater flows could possibly increase the life of the existing system, eliminating the need to install a replacement system. Irregardless, if the homeowner chooses to replace the existing system, because of the site conditions, these recommendations to reduce the daily flows should still be implemented.

If all attempts fail to keep the sewage subsurface and a replacement onsite sewage disposal system is needed, the following shall be required.

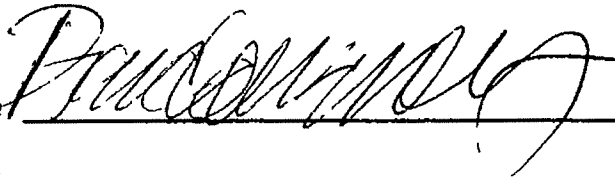
- A) (construction design requirements) Refer to the attached Soil ID # 534, 630

A permit must be obtained prior to construction beginning. Please be advised that the owner has the right to consult with a professional engineer for alternative design considerations. However, engineering plans must be approved by LCHD prior to construction permits being obtained.

A permit to construct an onsite sewage disposal system is in no way a guarantee that this system will provide indefinite trouble-free service. Since many inter-relating factors contribute to a failure of a sewage disposal system, approval can not be considered as a guarantee by the Health Department that successful operation is assured. Even with proper installation, as outlined for proposed construction, there remains many uncertainties and difficulties that can still arise in the operation of an onsite sewage disposal system.

Prior to construction permits being issued, the owners signature is required. This signifies that he/she has read this document and acknowledges that the site conditions are not favorable for the use of an onsite sewage disposal system; the onsite sewage disposal system is being installed entirely at the applicants risk; and that the Livingston County Health Department is not responsible for the successful operation of the sewage disposal system.

Owner Signature



Date 2 4 02

DMC/pm
1-0791PM
APPENDIX.PER

N/C
Receipt No

Livingston County Health Department
Environmental Health Division
2300 E Grand River, Howell, Michigan 48843-7579
Fax (517) 546-9853 • Phone (517) 546-9858

534,630
ID No

Prop Description No

SOILS EVALUATION FOR SUB-SURFACE SEWAGE DISPOSAL SYSTEMS

Location and Directions South of Green Rd. West of Burk, South Side

MAR Metz
Requestor

EMME
Owner

4124
Ulan
Mason
Township
Section No 25
Subdivision/Acreage
Lot, Parcel

SOIL DESCRIPTION				SKETCH	
Ft	(1)	(2)	(3)	Ft	
1	TOP SOIL fill	TOP SOIL sand loam		1	
2				2	
3	ORIGINAL SYSTEM			3	
4	SATURATED w/CONCRETE TILE			4	
5				5	
6		CLAY LOAM TO 12 FT		6	
7				7	
8				8	
9				9	
10				10	
11				11	
12				12	
		LOAM SAND 12 TO 15 FT			

Comments LOCATE the System in the AREA of the ORIGINAL System.

100% REMOVAL of the ORIGINAL SYSTEM ENCUMBERED AND SOIL CUT TO SAND AT 4-12 FT (REFER to the ATTACHED SKETCH DIAGRAM) THEN BACK FILL WITH A CLEAN SHARP SAND THEN LAY SAND AND TILE 24" MAX. COVER. MAINTAIN SOFT TO ALL WELLS! INSTALL A 50 GPM TANK FILTER!

26-02
Environmental Health Representative Date

Soils evaluation based on criteria stated in Livingston County Sanitary Code, effective January 4, 1993

This is NOT a permit A suitable soils rating is NOT a guarantee that a permit to construct an on-site subsurface sewage disposal system will be granted Changing conditions that might result in permit denial are explained in more detail on the reverse side

Livingston County Health Department
2300 E Grand River, Howell, Michigan 48843-7579
(517) 546-9858

*copy of
file attached*

**REQUEST FOR SOILS EVALUATION-
SUBSURFACE SEWAGE DISPOSAL SYSTEMS**

Please print or type—See reverse side for directions and explanation

Applicant

Name Same
Address _____
City _____ State _____ Zip _____
Telephone No _____

Property Owner

Name MARY Metz
Address 4124 Uland
City Howell State MI Zip 48843
Telephone No (517) 548-1796

Location of Property

Road 4124 Uland Township MARION Sect No. 25

Directions _____

Subdivision/Acreage _____

Parcel No _____ Lot No _____

Nature of Intended Use

- Single Family Multi-Family Residence Commercial
 Two-Family Dwelling Other (Specify)

Person or firm conducting excavation _____

Telephone No _____

Attachments

Certificate of Survey _____ or Legal Description and Preliminary Sketch _____

The undersigned being duly authorized certifies the statements herein contained are true and correct and further acknowledges he is the property owner or is acting as an authorized representative on behalf of the property owner

Signature Telephone Date 1/28/02

If mailing, allow adequate time before calling for an appointment

WED. FEB 6TH @ 10:30 FOR LIVINGSTON COUNTY HEALTH DEPARTMENT ONLY		
Appointment (date and time)	<u>FRI, FEB 7 @ 10:30 w/John</u>	
Soil Evaluation I D No	<u>334650</u>	Receipt No <u>N/C</u> Property Description No _____
Comments	<u>Repair</u>	



Livingston County Health Department

www.lchd.org

Environmental Health Division

2300 East Grand River Howell, MI 48843
Phone (517) 546-9858 Fax (517) 546-9853

INSPECTION REPORT FOR ONSITE SEWAGE TREATMENT SYSTEMS

Name (if available): Metz Tax ID No. (if available): _____

Address: 4124 OLGA Township: Marion Section: 25
(Please include full street name - i.e. E Allen Dr)

Property type: Commercial _____ Residential X

Permit No. for existing system (if available): # 3967

Date of Final Approval: 5-21-68 No. of Bedrooms: 3

Purpose of Inspection: Replacement Residential X FIA _____
Replacement Commercial _____ Addition Request _____ Commercial _____

Age of Existing System (if available): 33 yrs

Existing System Type: Bed X Trench _____ Other _____ Unknown _____

Existing System Size: 2000 FT Existing Septic Tank Size: 2-1000 OR 2-750

Soil Type in Area of Existing System: CLAY LOAM

Time of Installation (Season): Spring

Other (Sources of Excess Water or Factors Influencing System Performance):

Notes/Comments: _____

Is There Any Evidence of System Failure? Yes No
If Yes, Explain. Surfactant

This inspection report is for Livingston County Health Department use only and is not intended nor shall it be used for any other purpose. Inspection by Livingston County Health Department staff is not a guarantee that the above referenced sewage treatment system is functioning properly nor is it a guarantee that the above referenced sewage treatment system will continue to function properly for any period of time.

Environmental Sanitarian: [Signature] Date: 2-6-02

MARION

4124 ULANA

CT.

501 18

5101

APPROVED	
CONDITIONAL	
Rec'd By	

LIVINGSTON COUNTY HEALTH DEPARTMENT
COURT HOUSE ANNEX — HOWELL, MICHIGAN

APPLICATION

No 3967

For Permit to Install or Construct Sewage Disposal System

Marion Corn Lake Hills #3 28
(Township, Village, City) (Subdivision) (Lot No)

Ulana Ct
(Number) (Street) (Nearest Known Location)

Type soil to 6-feet _____ Ground water table _____ ft. Percolation test _____ time.

Number of bedrooms 3 No of bath facilities 2 Well location 25'

Garbage Grinder Automatic Washer Commercial Establishment _____

INSTALL SEPTIC TANK 1000 gals TILE FIELD 250 ft OTHER _____

Applicant Roy D. Rathbun Address Howell, Mich Phone _____

Owner Roy D. Seely Address " " Phone _____

Signed Roy D. Rathbun Address _____ Phone _____

Date Signed 9-7-67

The issuance of this permit in no way relieves you from obtaining all other necessary permits from the local building department

DO NOT FILL IN — The following data is to be provided by the Livingston County Health Department
PERMIT TO INSTALL OR CONSTRUCT SEWAGE DISPOSAL SYSTEM

Permission is hereby granted to install the following:

Septic Tank 1000 gals

Tile Drain Field 250 ft

Other D. A. Heudt 9-8-67
(Sanitarian) (Date)

Installation Approved:

D. A. Heudt 5-21-68
(Signature) (Date)

KEEP POSTED UNTIL INSPECTED

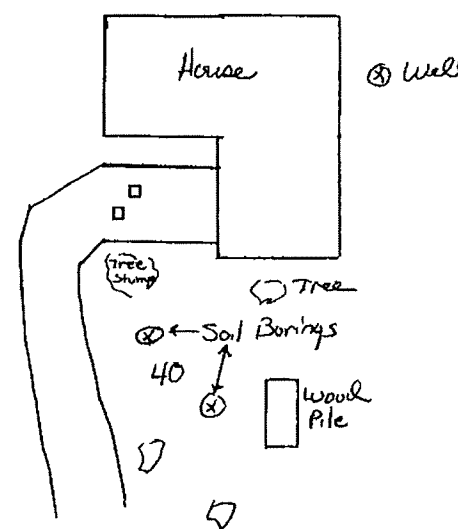
**HOMEOWNER INFORMATION SHEET FOR WATER SUPPLY
AND/OR SEWAGE DISPOSAL FACILITIES**

The following sketch represents the location of the on-site sewage disposal system and/or water well supply for the dwelling located at

4124 Ulana

Mercon 25

Mortgage Evaluation #134

Septic Tank Size _____	Dimensions of System _____
Absorption Bed/Trench _____	No of Lines _____
 <p>The sketch shows a rectangular house with a well (marked with a circled 'X') to its right. A line representing a pipe or trench runs from the house to a series of soil borings (marked with circled 'X's). One boring is labeled '40'. To the left of the borings is a 'Tree Stump' and to the right is a 'Tree'. A 'Wood Pile' is shown as a rectangle to the right of the borings.</p>	
Well Driller _____	Sewage Disposal Contractor _____
Water Supply Approved _____ Date _____	Sewage Disposal Facilities Approved _____ Date _____

Please read the attached information regarding maintenance and care of the on-site sewage disposal facilities. The on-site sewage disposal system was inspected and approved in accordance with the Livingston County Sanitary Code. The water supply system was approved after reviewing the well log submitted by the well driller and receiving acceptable water quality analysis. If you did not receive a copy of your well log from the driller, please contact the Environmental Health Division of the Livingston County Health Department.

Since many interrelating factors contribute to the failure of a sewage disposal system and/or changes in water quality, approval cannot be considered as a guarantee by the Environmental Health Division that successful operation or quality of drinking water is assured. On-site sewage disposal systems under the best of installation conditions and practices are in no way the equivalent of municipal sewer collection and treatment facilities.

Water Supply—Sewage Disposal Evaluation Report Application

(Please print or type See reverse side for directions and explanation)

4124 Ulana Ct. Marion 25

Coon Lake Hills #3 Township 10-25-201-028 Section No

Site Address Lot 78

Anneliese Gries Tax Code No

Subdivision Parcel or Lot No

Tess Mee/Real Estate One Purchaser

Present Owner James T. & Barbara J. Antonucci

117 W. Grand River Phone 313 227-5005

Address Brighton MI 48116

City State Zip

Report Evaluation To (Name) Same Phone ()

Address City State Zip

Dwelling Occupied Yes No Date Last Occupied

SPACE BELOW FOR LIVINGSTON COUNTY HEALTH DEPARTMENT USE ONLY

Appointment Wed March 18 at 11:30 MIS No 134 Receipt No 55349 Amount 80

Date & Time

Private Lab ML **REPORT**

WATER SUPPLY:

Community Yes No Private Yes No

Water Samples under custody of Health Department during transportation Yes No ① Water Sample transported to Private Lab by Realtor, Sealed

Water Quality at Time of Sampling Date Sampled 3/18/91 By Lemhart

Bacteriological Analysis Safe Unsafe ②

Nitrate Analysis 20.1 Mg/L as N Above Limits Below Limits ③ MDPH High Limit is 10.0 mg/L

Other Analysis (Refer to Sample Analysis Report)

Well Log Available Yes No (If yes, attached) Date of Installation

Well replacement area available Yes No Unable to Determine

Well construction complies with requirements of Part 127 Act 368 P A 1978 Yes No

If not, why? It is not required that softener discharge line be run into septic system

SEWAGE DISPOSAL:

Public Wastewater System Yes No Individual On-Site System Yes No

Permit Available Yes No (If yes, attached) Soil Evaluation Yes No (If yes, attached)

Construction Septic Tank Size Type of Absorption System Nature and Extent of System Unknown

Evidence of System Malfunction Yes No Unable to Determine

Replacement Area Available Yes No Unable to Determine

General Comments _____

Environmental Sanitarian Michelle Lemhart Date 3/21/91

Since many interrelating factors contribute to the failure of a water well system or sewage disposal system, this report does not imply approval and cannot be considered as a guarantee by the Health Department that successful operation is assured

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL			Fraction		Section No.	Town	Range	
County Liv.	Twp. Marion		1/4	1/4	25	N/S.	E/W.	
Distance And Direction from Road Intersections 4124 Ulana Court Howell, Michigan			OWNER No. _____		3 OWNER OF WELL: Address Sealy, Bill 4124 Ulana Court Howell, Michigan			
2 FORMATION			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	4 WELL DEPTH: (completed) Date of Completion 157' April 1968			
Sand			4	4	5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> _____			
Gray clay			15	19	6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test Well <input type="checkbox"/> _____			
Brown clay and silt			18	37	7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below surface _____ ft. Diam. 4 in. to 152 1/2 ft. Depth Weight 11 lbs/ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Silt			23	60	8 SCREEN: Type: wire wound Dia.: 3 3/4" iron Slot/Gauze 15 slot Length 4 1/2' Set between 152 1/2 ft. and 157 ft. Fittings: standard			
Clay			9	69	9 STATIC WATER LEVEL 45 ft. below land surface			
Silt			23	92	10 PUMPING LEVEL below land surface 57 ft. after 1 hrs. pumping 18 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.			
Clay			48	140	11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____			
Gravel and clay			11	151	12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade			
Sand			6	157	13 GROUTING: Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Material: <input type="checkbox"/> Neat Cement <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.			
10-25-201-028						14 SANITARY: Nearest Source of possible contamination 75 feet Direction septic tank Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
						15 PUMP: Manufacturer's Name Red Jacket Model Number 7BB HP 1/2 Length of Drop Pipe 73 ft. capacity 12 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
						16 Remarks, elevation, source of data, etc.		
			17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Brown Drilling Co. 26 REGISTERED BUSINESS NAME REGISTRATION NO. Address Howell, Michigan Signed Harry R Brown Date May 68 AUTHORIZED REPRESENTATIVE					