

## ST. LOUIS COUNTY PLANNING COMMISSION STAFF REPORT

**INSPECTION DATE: 3-15-21** 

**REPORT DATE: 3-22-21** 

**MEETING DATE: 4-8-21** 

#### APPLICANT INFORMATION

**APPLICANT NAME:** Amo Enterprises LLC

**APPLICANT ADDRESS:** 3045 Vermilion Dr. Cook, MN 55723

**OWNER NAME:** Same as above

SITE ADDRESS: 2820 Vermilion Dr. Cook, MN 55723

**LEGAL DESCRIPTION:** Whitesand Beach Plat, Lots 16 and 17, S20, T63N, R18W (Beatty)

PARCEL IDENTIFICATION NUMBER (PIN): 250-0110-00210 and 250-0110-00200

NATURE OF REQUEST: A conditional use permit for a Short Term Rental as a Residential Use-Class II.

**PROPOSAL DETAILS:** The applicant is requesting approval to use the property as a short term rental. The property has been used as a short term rental prior to St. Louis County adopting short term rental standards in early 2020. The conditional use permit is required for this request because the property does not meet the minimum zoning requirements for the zone district. The zone district requires a minimum of 1 acre and 150 feet of width to be deemed conforming. The subject property is nonconforming because it contains approximately 0.84 acres.

#### PARCEL AND SITE INFORMATION

ROAD ACCESS NAME/NUMBER: Vermilion Drive ROAD FUNCTIONAL CLASS: Collector

LAKE NAME: Lake Vermilion LAKE CLASSIFICATION: GD

RIVER NAME: N/A RIVER CLASSIFICATION: N/A

**DESCRIPTION OF DEVELOPMENT ON PARCEL:** Development on the property consists of a dwelling, accessory

dwelling (bunkhouse), small garage, and a septic system.

**ZONE DISTRCT: RES** 9

PARCEL ACREAGE: 0.84 LOT WIDTH: 200 FEET

FEET OF ROAD FRONTAGE: 200 FEET FEET OF SHORELINE FRONTAGE: 214 FEET

#### PARCEL AND SITE INFORMATION

**VEGETATIVE COVER/SCREENING:** The property has good screening from neighboring parcels. There is some screening from the lake, but the structures are somewhat visible from the lake.

**TOPOGRAPHY:** The property has a fairly consistent slope from the road to the shoreline of approximately 13 percent.

**FLOODPLAIN ISSUES:** The existing structures on the property appear to be above the floodplain elevation. The basement of the dwelling may be near the floodplain elevation.

**WETLAND ISSUES:** It does not appear there are wetland issues on the property.

**ADDITIONAL COMMENTS ON PARCEL:** The applicant also owns the property across the road. This area can't be used to calculate the total area of the property, but this parcel could also be utilized for parking.

#### **FACTS AND FINDINGS**

#### A. Plans and Official Controls:

- 1. St. Louis County Zoning Ordinance 62, Article III, Section 3.2 states that the minimum lot dimensions for a RES-9 zone district is 1.0 acre and 150 feet of width.
  - a. The subject property meets the minimum width requirements, but does not meet the minimum acreage requirement.
- 2. St. Louis County Zoning Ordinance 62, Article VI, Section 6.32 A. 7. states that that a conditional use permit is required for a short term rental dwelling unit that is located in a residential zone district parcel that does not meet the minimum zoning requirements..
  - a. St. Louis County Short Term Rental standards require additional standards in residential zoned areas; if the residential standards cannot be met, a conditional use permit is required.
  - b. In this case, the subject property does not met the additional standard for residential zoned property that states the parcel must meet zoning minimum requirements.
- 3. Objective ED-2.1 of the St. Louis County Comprehensive Plan is to recognize and ensure regulatory fairness across a thriving lodging industry that includes hotels, bed and breakfasts, and vacation rentals.

#### **B.** Neighborhood Compatibility:

- 1. The subject parcel is zoned RES-9. The surrounding parcels are also zoned RES-9.
  - a. Short term rental is an allowed use in a residential zone district provided all standards are met or a conditional use permit is granted.
- 2. The majority of the surrounding parcels are used residentially including both parcels adjacent to the subject parcel.

#### **C.** Orderly Development:

- 1. The subject parcel is located on Lake Vermilion which has a wide variety of uses, including residential and resort type uses.
  - a. There are several resorts along Vermilion Drive in this general area.
- 2. The majority of the parcels along Vermilion Drive in this area are zoned residential.
  - a. Few of the parcels in this area meet both the minimum acreage and width requirements.
  - b. Due to the underlying zoning, future development is expected to consist of primarily residential use, which could include other short term rentals.

3. A short term rental use can benefit the County with supplying additional lodging options for tourists/residents as well as contributing to the County lodging tax base.

#### **D. Desired Pattern of Development:**

- 1. Development in the surrounding area is primarily residential use.
- 2. The underlying zoning of residential limits certain uses and is intended for areas in the county with extensive residential development or potential for extensive residential development.
- 3. Development patterns in this area are expected to primarily be residential.
  - a. Proposed short term rental uses are expected to be part of development patterns.
- 4. The conditional use permit process allows other landowners in the area to provide feedback on the proposed short term rental.
- 5. The proposed intended days for rental as a short term rental does not constitute a commercial use.

#### **E.** Other Factor(s):

- 1. The property has been used as a short term rental prior to St. Louis County adopting standards.
  - a. The applicant is applying for a conditional use permit in order to fulfill new St. Louis County requirements.

#### PLANNING COMMISSION CRITERIA FOR APPROVAL OF A CONDITIONAL USE PERMIT

- 1. Does the use conform to the land use plan?
- 2. Is the use compatible with the existing neighborhood?
- 3. Will the use impede the normal and orderly development and improvement of the surrounding area?
- 4. Is the location and character of the proposed use considered consistent with a desirable pattern of development?
- 5. What, if any, other factors should be taken into consideration on this case?

#### RECOMMENDED CONDITIONS, IF APPROVED

In the event that the Planning Commission determines that the proposal meets the criteria for granting a conditional use permit to allow conditional use permit for a Short Term Rental as a Residential Use-Class II, the following conditions shall apply:

- 1. All other short term rental standards shall be met.
- 2. All SSTS requirements shall be met.
- 3. All other local, state, and federal standards shall be met.

#### ST. LOUIS COUNTY, MN PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT

Duluth Virginia

Government Services Center Government Services

Center

320 West 2nd Street, Suite 301

Duluth, MN 55802 (218) 725-5000

201 South 3rd Avenue West Virginia, MN 55792 (218) 749-7103

#### **CONDITIONAL USE PERMIT APPLICATION**

**General** - This application is used to apply for a Conditional Use Permit. Applicants will need to attach the appropriate worksheet(s) in order to process. Incomplete applications will be returned. Note that the 'clock' does not begin until after payment has been processed for the application. For more information, see our website at: <a href="https://www.stlouiscountymn.gov/BuildingStructures">www.stlouiscountymn.gov/BuildingStructures</a>

Enter the Primary PIN and Associated PIN (if applicable) of the property to be reviewed.

PIN is found on your Property Tax Statement. For example, 123-1234-12345. Primary PIN: Parcel where Structure/SSTS are located. Associated PIN: Additional and/or adjacent property that you own or that is related to the project.

County Land Explorer: https://www.stlouiscountymn.gov/explorer

Property Lookup: <a href="http://apps.stlouiscountymn.gov/auditor/parcelInfo2005Iframe">http://apps.stlouiscountymn.gov/auditor/parcelInfo2005Iframe</a>

Primary PIN **250-0110-00210** 

Associated PINs

#### Type of Application

#### Does this application apply to a Short Term Rental?

#### Yes

#### Is this application being submitted for a Rehearing?

If this application is being submitted because a previous Conditional Use Permit application was denied or disapproved, please select Yes.

#### No

**Enter Applicant Information** 

I am a: Landowner
Applicant Name: Amo ent. LLC

Address Line 1: **3045 Vermilion Drive** 

 Address Line 2:
 - 

 City:
 Cook

 State:
 MN

 Zip:
 55723

Primary Phone: (218)666-5607

Cell Phone: --

Email: info@springbayresort.com

Contact Person Name: **Joe Amundsen**Contact Person Phone: **(218)780-4100** 

Mailing Address Information.

This address can default from the address you selected. If the values defaulted are not correct, please enter the correct information.

Same as Applicant

address?

Name: Amo ent. LLC

**3045 Vermilion Drive** Address:

City: Cook State/Province: MN 55723 Zip:

Primary Phone: Cell Phone: Fax:

Email: info@springbayresort.com

Yes

Site Information

Site Address:

If there is no site address, the application will be forwarded to 911/Communications to assign one.

Is there a site address

for this property?

Is this leased property? No Leased From?

**US Forest Service US Forest Service** 

2820 Vermilion Drive

Superior National Forest 8901 Grand Avenue Place

Duluth, MN 55808

**MN Power** MN Power

> Shore Land Traditions 30 West Superior Street Duluth, MN 55802

MN DNR, Area Hydrologist MN DNR, Area Hydrologist

> 7979 Highway 37 Eveleth, MN 55734

MN DNR Land and Minerals MN DNR Land and Minerals

> 1201 East Highway 2 Grand Rapids, MN 55744

St. Louis County - Duluth St. Louis County - Duluth

> Government Services Center 320 West 2nd Street, Suite 301

Duluth, MN 55802 (218) 725-5000

St. Louis County - Virginia St. Louis County - Virginia

> Land and Minerals 7820 Highway 135 Virginia, MN 55792 (218) 749-7103

Do you have written authorization from the leased property owner?

If Yes, you must attach written authorization form.

How is the property accessed?

**Public Road** 

No

No

No

No

Enter Project Information.

If you answered 'Yes' to any of the questions below, it is required that you submit a copy of a septic permit to construct or certificate of compliance approval or municipal/sanitary district approval when applying for a land use permit.

Is this project on a parcel less than 2.5 acres?

No

Is this project within 300 feet of a stream/river or 1,000 feet of a lake?

Yes

Is this project adding a bedroom?

Include home, garage, and accessory dwelling.

No

Total # of bedrooms on property after project completion.

4

Does this project include plumbing or pressurized water in proposed structure?

No

If Yes, please explain:

--

Is this project connected to a municipal or sanitary district system?

No

#### TRAFFIC, PARKING, AND/OR DOCKAGE

Will the proposal generate an increase in traffic? Boat, snowmobile, truck, bus, car, etc.

No

If Yes, what is the estimated increase

--

Does the proposal require parking?

Please include employees, visitors, and other parking.

No

How many parking spaces are available on the property?

--

#### **SIGNAGE AND LIGHTING**

Does your proposal include signage? Include any off-site signs.

No

Please list number of signs, size, location, and illumination of each sign

--

Will there be lighting (including security lighting) that may be visible from roads, waterways, and adjacent properties?

No

If Yes, please explain

--

#### **WASTEWATER TREATMENT**

Will wastewater be generated?

Yes

If Yes, what type of system will be used to handle wastewater treatment?

Private Septic System **Yes**Municipal **No** 

#### **SOLID WASTE**

Check all types of waste generated and describe how you will collect and store waste generated from the business below. Additional information may be required based on the scope of the project.

Household Garbage Yes
Oil and Grease No
Other Automotive Fluids No

Animal Waste No
Chemicals No
Medical No

Hazardous No
Demolition Waste No
Wood and Sawdust No

Radioactive No
Other No
If Other, please explain --

Please describe •••

We will collect daily & bring to to sanitary landfill daily

collection and disposal:

#### SHORT TERM RENTAL WORKSHEET

Please complete the following questions required for Short Term Rentals.

#### Short Term Rental Use Information

Is the property located in one of the following zone districts: Commercial or Sensitive?

No

#### Is the property located in a Residential zone district?

If yes, additional standards apply. (See fact sheet for additional standards)

Yes

Is there more than one rental dwelling unit on the same parcel or single units on contiguous parcels under common ownership?

No

Do you currently reside at this property?

No

#### Is the property used primarily for rental purposes?

If yes, shall be deemed a Commercial Use-Class II and subject to ordinance requirements regarding commercial use.

No

#### Current Use of Property

How is the property currently being used? Describe the proposed use. (List all structures included) 4 months weekly, 8 months personal

4 months weekly, 8 months personal

#### Occupancy Information

Total # of Bedrroms on

Property?

Total # of Allowed

Guests?

10

#### Description of Yearly Use

(Total number of days must equal 365)

Intended # of days for

185

personal use:

Intended # of days for

120

rental use:

Intended # of days

60

unused:

\*Primary use of the property for short term rental purposes may affect your property tax classification. Please contact your County Assessor for more information. <a href="https://www.stlouiscountymn.gov/departments-a-z/assessor">https://www.stlouiscountymn.gov/departments-a-z/assessor</a>

#### Required Postings

Have applicable licenses, rules and regulations and emergency contact information for police, fire, hospital, septic tank pumper, and permittee/owner/operator been posted in a prominent location within the rental unit?

Yes

Have Aquatic Invasive Species (AIS) prevention guidelines been posted for watercraft use?

(Please	attach	copy)
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Yes

#### **Screening**

What type of visual screening will be used?

From Roads:

Vegetative

No

No

**From Adjacent Properties** 

No

No

No

**From Lakeshore** 

Vegetative

No

No

No

Please describe:

--

#### **Authorizing Agencies**

Have you received a Lodging License from the Minnesota Department of Health for this Short Term Rental? (Please attach copy)

If No, your application will be returned.

No

Have you received a Minnesota Tax Identification Number from the Minnesota Department of Revenue for this Short Term Rental? (Please attach copy)

If No, your application will be returned.

Yes

#### **ADDITIONAL REQUIRED INFORMATION & ATTACHMENTS**

#### 1. Electronic Map or Sketch:

- Boundary lines with parcel dimensions.
- Existing Buildings. (see site sketch form for required information)

If located in a RES zone district, property lines shall be located by a licensed land surveyor OR a written agreement between the adjoining property owners and the short term rental permittee/owner/operator may be submitted and filed with the Department.

#### 2. Documents:

- Copy of a septic permit to construct or certificate of compliance approval or municipal/sanitary district approval.
  - Copy of current Minnesota Department of Health Lodging License and other applicable licenses.
    - Minnesota tax identification number and other applicable identification numbers.
      - Proof of appropriate liability insurance.
        - On-site parking plan.
    - Current contact information for person(s) responsible for property management.
      - Photo documentation of visual demarcation of the property lines.
        - Evidence of ownership.
        - Other information as deemed necessary by the Director.

By submitting this application, I certify and agree that I am the owner or the authorized agent of the owner of the above property, and that all uses will conform to the provisions of St. Louis County. I further certify and agree that I will comply with all conditions imposed in connection with the approval of the application. Applicants may be required to submit additional property descriptions, property surveys, site plans, building plans, and other information before the application is accepted or approved. **Intentional or unintentional falsification of this application or any attachments thereto will make the application, any approval of the application and any result invalid.** I authorize St. Louis County staff to inspect the property to review the application and for compliance inspections. Furthermore, by submitting this application, I release St. Louis County and its employees from any and all liability and claims for damages to person or property in any manner or form that may arise from the approval of the application or any related plans, the issuance of any resulting permit or the subsequent location, construction, alteration, repair, extension, operation or maintenance of the subject matter of the application.

If your name, contact information or email address have changed, you should update your contact information in the portal by selecting 'Maintain Contact Information' at the top of this page.

Submitted By: -Address: -City: -State: -Postal Code: -Email Address: --

I have read and agree to the statement above.

No

				- W. W. W. W. C. C.	
Condition	onal Use	Permit	(CUF	<b>D)</b>	
ZAT	Use Class II - S			Permit #	
APPLICATIO	N St. Louis Co	unty, Minne	esota	Permit #	
<b>About</b> : This application is used to app and attachments in order to process.	oly for a Short Term Renta	Permit. Applicants	will need to attac		
PROPERTY IDENTIFICATION					
Primary PIN	NOMBER (PIN) PIN	Associated	erty Tax Statement		
Structure/SSTS 2 5 0 - 0	10-0031	O PIN	•		
Associated PIN -	-	Associated PIN			-
E.g. 123-1234-12345. Primary PIN: Parcel where County Land Explorer: https://gis.stlouiscountym					
APPLICANT					
Applicant Name (Last, First)	am a ☐ Permittee/Operator ☐	Homeowner Other	Daytime #		Date
Amo Ent. LLC		.1.	218-666-	5607	2-26-21
Applicant Address			City	State	ZIP 55723
3045 Vermilien brise Applicant Email			Cock	MU	33 12)
info@sprinsbayresor	t.com				
Contact Person		Contact Person #			
Jee Amindson		218-7	80-4100		
Mailing Address (Where to Send Permit)	V 2		80-4100 City Cook	State	ZIP
3045 Vermilian Email Address (Where to Email Permit)	Dri-e		Cook	11/10	55773
infa@springba					
SITE INFORMATION	yr sort, com		<b>恢复的 \$</b>		
			<b>以</b> 加州公共,中国共和党		
	ress for this property? (If n		be forwarded to 91	1/Communication	s to assign one.)
If yes above, please list site address:	2820 Vermili	en Drive			
Yes No Is this leased prop	erty? If yes, leased from: [	☐ MN Power ☐ MN DNR	US Forest Servi	ice St Louis Cou	unty Other
Yes No Do you have writte	en authorization from the le	eased property owne	er? If yes, you m	ust attach writte	en authorization form.
How is the property accessed? Public	Road Private Road Ease	ement   Water   Ot	ther		
(If accessed by easement, easement docur	mentation must be attached.)				
TYPE OF APPLICATION		PLEA	SE MAKE CHEC	KS TO: ST. LOU	IS COUNTY AUDITOR
Conditional Use Permit: Short 1	Term Rental - <b>\$630</b>	☐ Conditiona	l Use Permit Re	hearing: Short	Term Rental - \$200
AGREEMENT					
By submitting this application, I certify and agree that I an and agree that I will comply with all conditions imposed in plans and other information before the application is accept approval of the application and any resulting permit application, I release St. Louis County and its employees for related plans, the issuance of any resulting permit or the strength of the application.	connection with the approval of the appl sted or approved. <b>Intentional or unint</b> tinvalid. I authorize St. Louis County st from any and all liability and claims for dail	lication. Applicants may be req tentional falsification of this aff to inspect the property to re mages to person or property in	uired to submit additionals application or any attention or any attention and any manner or form that	al property descriptions, partachments thereto wind for compliance inspection t may arise from the app	property surveys, site plans, building III make the application, any ons. Furthermore, by submitting this proval of the application or any
CONTACT: Planning and Commi	unity Development De	partment			
Technical Assistance Duluth		rginia		ice Use Only	
		vernment Services Cent 1 South 3 <sup>rd</sup> Avenue Wes	KH	eipt #	× New York Control of the Control of
www.stlouiscountymn.gov/landuse Duluth, MN 55802 Vi		ginia, MN 55792 18) 749 7103	Rec	eipt Date	



### Residential Use Class II - Short Term Rental

WORKSHEET St. Louis County, Minnesota

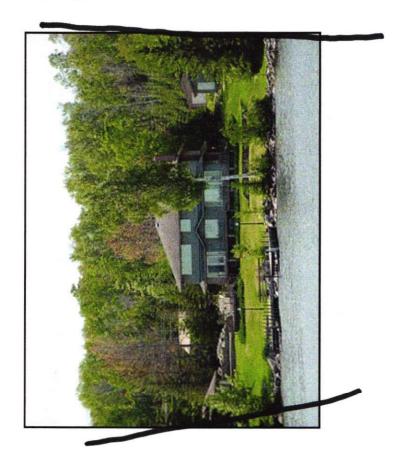
PERMIT TYPE					
<b>X</b>		Short Term Rental Permit (Requires Conditional Use Approval)			
SHORT TERM RENTAL					
☐ Yes	Ď(No	Is the property located in one of the following zone districts: <b>Commercial or Sensitive</b> ?  If yes, a Conditional Use Permit Application is required.			
Yes No Is the property located in a <b>Residential</b> zone district?  If yes, additional standards apply. (See fact sheet for additional standards)					
☐ Yes	[X]No	Is there more than one rental dwelling unit on the same parcel or single units on contiguous parcels under common ownership?  If yes, is subject to ordinance requirements for proposed use and a Conditional Use Permit Application may be required.			
☐ Yes	ЖNo	Do you currently reside at this property?			
☐ Yes	□No	Is the property used primarily for rental purposes? Ranted weekly 4 months  If yes, shall be deemed a Commercial Use-Class II and subject to ordinance requirements regarding commercial use.			
How is the	he proper	rty currently being used?			
Menths weekly  8 menths Personal  Please describe the proposed use. (List all structures included with the proposed use)  Y menths weekly 8 menths Pasaral					
OCCUP	ANCY I	NFORMATION			
t	4	Total # of bedrooms on the property			
t	0	Total # of allowed guests			
DESCR	IPTION	I OF YEARLY USE* (Total number of days must equal 365)			
(+	Intended # of days for personal use				
1.	10	Intended # of days for rental use			
60 Intended # of days unused					
*Primary use of the property for short term rental purposes may affect your property tax classification. Please contact your County Assessor for more information. <a href="https://www.stlouiscountymn.gov/departments-a-z/assessor">https://www.stlouiscountymn.gov/departments-a-z/assessor</a>					
TRAFFIC, PARKING, AND/OR DOCKAGE					
☐ Yes	₩ No	Will the proposal generate an increase in traffic? (Boat, snowmobile, truck, bus, car, etc.)			
If Yes, how many parking spaces are available on the property? (Please attach on-site parking plan)					
Lots of Parking - across Road is ours as well					

SIGNAGE AND LIGHTING					
☐ Yes	No	Does your proposal include signage? (Include any off-site signs)			
If Yes, p	lease list r	number of signs, size, location, and illumination of each sign:			
☐ Yes	Ď√v₀	Will there be lighting (including security lighting) that may be visible from roads, waterways, and adjacent properties?			
If Yes, p	lease expl	ost Lights on House of by lake that have been there forever			
REQUI	RED POS	STINGS			
Yes	□No	Have applicable licenses, rules and regulations and emergency contact information for police, fire, hospital, septic tank pumper, and permittee/owner/operator been posted in a prominent location within the rental unit? (Please attach copies)			
If No, ple	ease expla	in:			
Yes	☐ No	Have Aquatic Invasive Species (AIS) prevention guidelines been posted for watercraft use? (Please attach copy)			
If No, ple	ease expla	ain:			
WASTE	WATER	TREATMENT			
Will wast Yes	ewater be	e generated?			
If Yes, what type of system will be used to handle wastewater treatment?  Private Septic System  Municipal  Other, please explain:					
SOLID	WASTE	Check all types of waste generated and describe how you will collect and store waste generated from the Short Term Rental below:			
`	ehold Gart				
If Other, please explain:					
Please de	escribe co	Me collect daily bring to sanitary landfill daily			
SCREENING					
What typ	e of visua	al screening will be used:			
From Ro	ads	From Adjacent Properties From Lakeshore (if applicable)			
Veget	tative	Fence Other Vegetative Fence Other Vegetative Other			
Please D	escribe:	We have vegetation around property to separate from neighbors			

AUTHO	PRIZING	GAGENCIES					
☐ Yes	No	Have you received a Lodging License from the Minnesota Department of Health for this Short Term Rental?  (Please attach copy)  If No, your application will be returned. # Gary Collyard said we don't need one - a Hackel					
Yes	□No	Have you received a Minnesota Tax Identification Number from the Minnesota Department of Revenue for this Short					
ADDIT	IONAL	REQUIRED INFORMATION & ATTACHMENTS					
1.	Electroni	c Map or Sketch:					
	Boundary	lines with parcel dimensions.					
	Existing I	Buildings (see site sketch form for required information).					
	If located in a <b>RES</b> zone district, property lines shall be located by a licensed land surveyor <b>OR</b> a written agreement between the adjoining property owners and the short term rental permittee/owner/operator may be submitted and filed with the Department.						
2.	Documen	its:					
	Copy of a septic permit to construct or certificate of compliance approval or municipal/sanitary district approval.						
	Copy of c	current Minnesota Department of Health Lodging License and other applicable licenses.					
	Minnesot	a tax identification number and other applicable identification numbers.					
	Proof of	appropriate liability insurance.					
	On-site parking plan.						
	Current contact information for person(s) responsible for property management.						
	Photo documentation of visual demarcation of the property lines.						
	Evidence of ownership.						
Other information as deemed necessary by the Director.							
CONTA	CT: Planr	ning and Community Development Department					
Toll Free: Land Use	Il Assistano 1-800-450- Information uiscountymn	9777 Government Services Center Government Services Center Receipt #					

*All Structures of *All Driveways, * *All Proposed St *All Parking Area	el on Sketch (in fe on the Property and I Access Roads, and W tructures and Dimens as I Vegetative Screenir	Dimensions letlands ions	*Distance of Existing/P  *Distance of Existing/P	roposed Structures to Shoreline (Clos roposed Structures to Septic System roposed Structures to Property Lines roposed Structures to Road Centerlin	and Tank
u may submit you	ur own site sketch <u>IF</u>	it has the requ	ired information indicated ab	ove.	
Applicant Name: Site Address: PIN:	3820 Vermil	on Prive			
W E		pole Barkn	Prince part	7	
		t	twy24		
	1890 taken 12	John Jan	itation p	viage Neighbor May	
Neghibal	water (ing C	Suldry Suldry	Pome	Neghtary Neghtary	on.
	J Ko		lake 200FT		
			nitary Authority Use Only***		Quent
	( <u>To be determined b</u> s shown above, nega	y appropriate san		t area?   Yes   No	N.

# Proparts Line



T. Ser. T.

#### Individual Sewage Treatment System Certificate of Compliance **Existing System**

Site:

AMO ENTERPRISES

2820 VERMILION DR

Address:

**COOK MN 55723** 

**Permit Number** 

16505

Date of Permit:

06/05/1992

Date of Issue:

12/01/2020

**Date of Inspection** 

10/15/2020

Parcel Code

250-110-210

Township: BEATTY (6318)

Inspector:

Vermilion Barging Inc

AMO ENTERPRISES LLC 3045 VERMILION DR COOK MN 55723

Legal Description:

LOT: 17

The system was sized for a Single Family Dwelling with 5 Bedrooms.

The permit was granted for:

A Replacement Standard System ONE 1,500 Gallon Septic Tank(s) ONE 500 Gallon Pump Tank(s)

System consists of 200 Feet of 3 Foot wide Std Rock Trench with a total of 12 Inches of Rock

System is issued a Certificate of Compliance

Comments:

DISCLAIMER: St. Louis County issues Certificates of Compliance as part of its discretionary activities on behalf of the public. St. Louis County disavows and assumes no liability for damages to person or property in any manner or form resulting from the issuance of this Certificate of Compliance. St. Louis County cannot and does not guarantee the successful operation of the system.

This Certificate of Compliance is valid for three years unless the system fails and becomes a public health hazard or nuisance.

St Louis County Planning & Community Development

Environmental Specialist Senior



#### Short-Term Rental

1 message

Collyard, Gary (MDH) <gary.collyard@state.mn.us>

Fri, Sep 25, 2020 at 4:39 PM

To: "bourbonaisj@stlouiscountymn.gov" <bourbonaisj@stlouiscountymn.gov>

Cc: "info@springbayresort.com" <info@springbayresort.com>, "Saloum, Jason (MDH)" <jason.saloum@state.mn.us>

Jenny,

Mr. Joe Amundson is proposing to rent his vacation home property at 2820 Vermilion Drive, Cook (pin 250-0110-00210) for periods no shorter than seven days; therefore, a lodging license from the Minnesota Department of Health is not required.

Please feel free to contact me if you have any questions.

#### **Gary Collyard**

Public Health Sanitarian III | Food, Pools, & Lodging Services

Minnesota Department of Health

Office: 218-302-6147 | Mobile: 218-940-9306





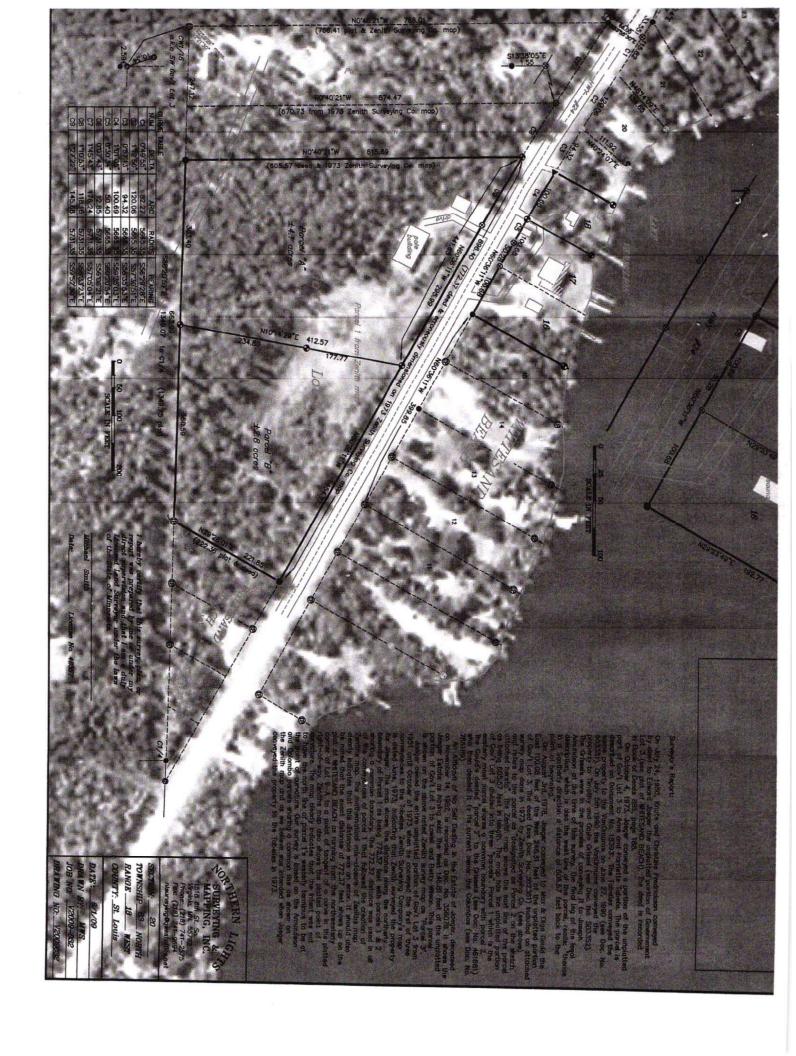














#### **EMERGENCY CONTACT INFORMATION**

Short Term Rental St. Louis County, Minnesota

**About:** The permittee/owner/operator shall post within the rental unit the rules and regulations and emergency contact information for police, fire, hospital, septic tank pumper, and permittee/owner/operator.

APPLICANT			
Name Soe Amundan Spring Bay Resort	-		
3045 Var mlan Drive	и	City Cook	State ZIP Mn 55773
Email  Into a Spring Bay Reset, con  Contact Person  Contact Person  Contact Person	1		
Contact Person Soe Amundson / Steve	Contact Person	# 218 740 De 218 660	4100 218780 5607 5941
Contact Person Email 6 @ Spring Bay Resortico	~		
PROPERTY MANAGEMENT/LOCAL CONTACT			
Name			
Address		City	ZIP
Email ) [7] (V			
Contact Person	Contact Person	#	
Contact Person Email			
POLICE			
Station Name St Louis county sheariff			
Address 300 St Sthave		City Vinginia	MA,
Non-Emergency # 749 7134	Emergency #	911	
FIRE			
Station Name Cook m			10
Address III and ST E.		COOK	5572 }
Non-Emergency # 2866 2866	Emergency #	911	

HOSPITAL						
Name Cook Hospi	taL					
Address			Caok	55723		
Contact # 218 - 6465	945					
SEPTIC TANK PUMPER						
Name Tong Good to	go Septie Dun	1Ping				
Address 7 806	go Septie pur Wouari Rd.	1 ).	Virginia	5792		
Email						
Contact Person		Contact Person				
70NS.		218-	750 0103			
Contact Person Email						
CONTACT: Planning and Community Development Department						
Technical Assistance Toll Free: 1-800-450-9777 Land Use Information www.stlouiscountymn.gov/landuse	<b>Duluth</b> Government Services Center 320 West 2 <sup>nd</sup> Street, Suite 301 Duluth, MN 55802 (218) 725-5000	Virginia Government Services 201 South 3 <sup>rd</sup> Avenue Virginia, MN 55792 (218) 749-7103	Center Receipt Receipt Receipt I	#Date		

Payment Amount \_\_\_\_\_ Paid By

#### **House Rules**

10 PM Quiet Time

Stay within property boundaries...keep OFF neighbors property

Dishes must be done before checking out

Stay within limit on number of guests as agreed on

See Aquatic Invasive Species Prevention Guideline

Please launch boat at an inspection site, or at Spring Bay Resort (trained staff on site)

#### Emergency #'s

218-666-5607 Spring Bay Resort

218-780-4100 Joe Amundson

218-780-5941 Steve Amundson

218-666-5945 Cook Hospital

218-666-5941 Cook Clinic

218-749-7134 Sheriff Dept. (NON-EMERGENCY)

218-750-0103 Tony's Good To Go (SEPTIC PUMPER)

218-666-2866 Cook Fire Dept. (NON-EMERGENCY)

\*\*\*911 for all immediate emergency needs\*\*\*

# Miles 0.5 St. Louis County April PC Meeting PIN:250-0110-00210 **Amo Enterprise** Location Map **Subject Parcel** Planning & Community Development (218) 725-5000 www.stlouiscountymn.gov St. Louis County

# 009 RES-8 300 Feet Vermilion Lake St. Louis County April PC Meeting PIN:250-0110-00210 **Amo Enterprise Subject Parcel** Zoning Map RES-9 Disclaimer This is a compilation of records as they appear in the St. Louis County Offices affecting the area shown. This drawing is to be used only for reference proposes and the County is not responsible for any inaccuracies herein contained. Planning & Community Development (218) 725-5000 www.stlouiscountymn.gov St. Louis County Prepared By:

# St. Louis County Site Map