

## ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT

Lewis & Clark City-County Health Department ENVIRONMENTAL HEALTH DIVISION 316 North Park, Helena, MT 59623 443-1010, extension 351

Permission is hereby granted to install an on-site wastewater treatment system on the property owned by: $A/Ring \omega a/d$ , and located at: $A/Ring \omega a/d$ Property Owner Property Address in the: $A/Ring \omega a/d$ Sec 22 THN RGW of Lewis and Clark County. Legal Description
This system shall be installed in accordance with current Lewis and Clark City-County Health Department rules governing the on-site treatment of wastewater, and the minimum construction requirements and special requirements provided for in this permit.  This permit is issued, based on the information provided in the permit application. If any of this information is found to be incorrect, or if the system is not installed as provided for, this permit shall be rendered null and void.
PERMIT ISSUED BY: Frank Preskar, R.S.  Type of System: Standard  INSTALLER: (T) NC Helena Septic Phone No. 442-1430
NOTE: THE SYSTEM MAY NOT BE BACKFILLED WITHOUT PRIOR APPROVAL OF THE DEPARTMENT OR AS PROVIDED FOR CERTIFIED INSTALLERS. THE INSPECTION TAG SHALL BE POSTED IN A CONSPICUOUS SPOT AT THE CONSTRUCTION SITE UNTIL PERMISSION IS GIVEN TO BACKFILL THE SYSTEM.
INSPECTION CALLED FOR: Time 8.00, Date 5-11-92  READY: Time Now, Date
THIS PERMIT WILL EXPIRE TWO (2) YEARS AFTER THE DATE OF

ISSUANCE. IF YOUR SYSTEM HAS NOT BEEN INSTALLED PRIOR TO THE EXPIRATION OF THIS PERMIT, YOU WILL HAVE TO REAPPLY AND MEET STANDARDS CURRENT AT THAT TIME.

4923

MINIMUM CONSTRUCTION REQUIREMENTS:	Inspection Results:
1. Septic tank: a) size 1000 gallon	ok
b) material <u>concrete</u>	ok
c) inlet/outlet caulked must Provide	ok
2. Treatment field: a) <u>/6 7</u> linear feet of perforated pipe.	ok
b) trench depth 36" may (24" min to 36" max)	actual 24 25"
c) cover material most Provide	actual Straw
3. Distribution system: a) D-Box YES NO	ok
b) Baffle YESNO	ok
c) Lift Station YESNO	ok
Size	actual
4. Distance to water source from: a) septic tank (50' min)	· · · · · · · · · · · · · · · · · · ·
b) treatment field (100' min)	actual actual
SPECIAL REQUIREMENTS:	
Proposed Home  40'  40'	
INSPECTED: Time 8:75am, Date 5-12-92 APPROVED PROBLEMS:	, NOT APPROVED
3/85 im HEALTH AUTHORITY June	Preskan, R.S.

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SIGNATURE OF APPLICANT: 💉

## APPLICATION FOR SITE EVALUATION FOR ON-SITE WASTEWATER TREATMENT SYSTEM

Lewis & Clark City-County Health Department ENVIRONMENTAL HEALTH DIVISION P. O. Box 1723, 316 North Park Helena, MT 59624 \* 443-1010 Ext. 351

Ottice Use Only	_
Region FP Date Rec. 6-6-90 Fee Paid 50 30.70 Receipt No. 3032 3406	

NO CONSTRUCTION OF DWELLINGS, DOMESTIC WELLS OR SEPTIC SYSTEMS SHALL TAKE PLACE UNTIL THIS SITE EVALUATION IS COMPLETE AND A NUMBERED PERMIT HAS BEEN ISSUED.

TYPE OF SYSTEM: NEW $\frac{\chi}{\chi}$ REPLACEMENT EXPERIMENTAL SUBDIVISION REVIEW OF EXISTING If replacement for tailed system, has failure analysis form been completed? Yes No	<u></u> .
PART A: TO BE FILLED OUT BY APPLICANT HCK 30 CANYIN	(În
1. PROPERTY OWNER A KINGWOLD 2. OWNER'S ADDRESS PARTY 15	76 3 Jan
3. PROPERTY ADDRESS Lot 9 + 10 fletches acres 4. PHONE: Work Home	34
5. LEGAL DESCRIPTION 1/4 1/4 1/4 NW1/4 Sec 22 TH/N RCW Lot Size 40 Acr	 :es
6. INSTALLER CI NC 7. PHONE	
8. TREATMENT SYSTEM TO SERVE:  RESIDENTIAL TOTAL LIVING SPACE: 900 SQ. FT	
10. TYPE OF WATER SUPPLY Sorma & well 11. Is Lot in Existing Subdivision? (Les	
12. CERTIFICATE OF SURVEY NUMBER* (For New Construction Only)	
13. PROVIDE A DIAGRAM SHOWING: LOCATIONS OF: THE PROPOSED BUILDING SEPTIC SYSTEM REPLACEMENT AREA DISTANCES FROM: WELLS SURFACE WATERS GULLIES ROADS ROCK OUTCROPS EASEMENTS PROPERTY BOUNDARIES . (Use as a checklist)	
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THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT IF ANY OF TH APPLICATION IS FOUND TO BE UNTRUE, MY APPLICATION WILL NOT BE VALID.	₹'

PART B.	TO BE	COMPLETED I	BY THE DEPA	RTMENT		CON	APLETE BY		
APPLICATION ON-SITE VIS	N COMPLE SIT REQU	TE: YES	NO NO	SPEC:	IFY NTS				
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USDA SCS SO									<del></del> -
LIMITATIONS	S: Rati					5			
TYPE	DEPTH			Ē		PERMEABILITY		BSERVATION	is I
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Depth to se				********		ed <i>TcST</i>			
						indwater Moni		VES	NO V
	suitable	: Treatment	Material	>84"	How Veri	fied 7/57 7 ft. V 4	hole		NO <u>7</u>
						, 20, <u></u>			
Is Property Is Property FIRM/Floodw	within ay Map N	100 ft. of lo	100 Year E	loodway?	YES f 300038	NO			
Slope at Tro	eatment	Field Site	s: A) <u>13</u>	- 16%	В)	A	spect	······································	
Is there roo	om for a itial an	100% Replacem	acement Are ent sites m	ea? YES neet all	NO s <del>epa</del> rati	o <del>n r</del> equireme	nts? Y	es 🗹 no	
Observations	s: <u>area</u>	heav.ly	timbered	( most	of the p	roparty is on	Steep St	AS. Core	Should
be taken	to ma	ke Scie S	ystem is	Placed	4	erst holes			
APPROVED: Y	es 🗸	NO 1	BASIS FOR D	DENIAL: _		·		·	
REEVALUATED:	DATE	<del></del>	APPROV	ÆD: YES	NO	BASIS		——————————————————————————————————————	<del>2</del>
SITE REQUIRE	MENTS:	1000 90	allon con	crete	Tank,	Concrete D	box	167 1	near
feet of c	drain 1	Pield. 30	6" max	Trend	h dep	<u> </u>			
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REVIEWED BY:	Tran	& Tres	Kan RS	, )		DATE:	6-11-	90	