MISSOULA CITY-COUNTY HEALTH DEPARTMENT INDIVIDUAL SEWACE DISPOSAL INSTALLATION PERMIT, C.E. Stilwell PERMIT NO. INSTALLATION FOR Left of Holland LK. Tur (location, street, blk:) ROAD. (2 Piner Public

TOTAL NUMBERS: Living Units Bedrooms People Served Septic Tank gal. Seepage Pit Field Drain Modified Field Drain PUC Type of tile Sq: Footage(Effective Area) Describe soil to depth of 10 ft. GRAVEL Depth to first Absor, Bed DISTANCE OF INSTALLATION FROM ft. Back ft. Side Wells ft. Canals or ditches Nearest adjacent well ft. Special cons. cond. Property Lines: Front Foundation ft. Special cons. cond. Address Sketch house, proposed sewage disposal layout and all adjacent wells Percolation rates

Hole No. HOUSE RAILER HOOKSP 50 DRAINFIELD 6 - ring seepage pet

Installer may perform perc. tests with permission of the Health Department

Plans Approved

INSTALLED BY

Installation Inspected Not Date

Sanitarian or Health Officer-Missoula City-County Health Department

75-344

MISSOULA CITY-COUNTY HEALTH DEPARTMENT Permit to Install Individual Sewer Systems

NAME OF BUILDER:

NAME OF EXCAVATOR:

NAME OF OWNER:

C. E. Stilwell

PROPERTY ADDRESS AND LEGAL DESCRIPTION OF SYSTEM INSTALLATION:

R 16 W, T 20 N, NE¹4, Sec. 6 (To left of Holland Lake turnoff)

TYPE OF SYSTEM TO BE INSTALLED:

1,000-gallon septic tank and 6-ring seepage pit

SPECIAL CONSIDERATIONS:

Installation must meet all requirements as specified in the Missoula County rules and regulations for subsurface sewage disposal systems.

PLANS APPROVED April 30, 1975

DATE

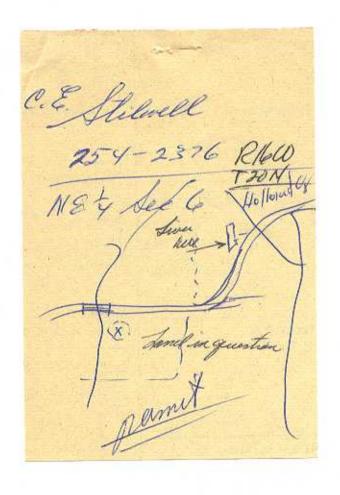
BY: Elsephedel SANITARIAN

As purchaser of this permit, I agree to install an individual sewer system which meets all requirements as specified in the Missoula County rules and regulations for subsurface sewage disposal systems.

PERMIT PURCHASER

PERMIT FEE \$20

This permit is valid for six months.



75-344

MISSOULA CITY COUNTY HEALTH DEPARTMENT Application for Permit to Install Individual Sewer Systems

NAME OF APPLICANT:	(BUILDER)	(EXCAVATOR)	(OWNER) CESti	liv
PROPERTY ADDRESS AND	LEGAL DESCRIPTI	on:	ty (file	P
IF SUBDIVISION: (NAME OF SUBDIVIS	ION) (LOT #)	(BLOCK #)	
HAVE THE SANITARY	RESTRICTIONS BEE	N LIFTED: (YE	(NO)	
IF TRACT: (NAME	OF TRACT) (LO	T #) (BLOCK #)	(ACREAGE)	
APPROXIMATE DEPTH TO	SEASONAL HIGH G	ROUND WATER: 20	ń	
PROBABLE SOIL TYPE:		gravel		
PROBABLE ABSORPTION	RATE: (GOOD)	(POOR)		
NUMBER OF BEDROOMS:	2			
WATER SUPPLY: (P	RIVATE WELL)	(CITY WATER)		
ADD TRAIGUETON DIFFON	EC LOCUMED ON OR	WEAR MUR DROBERS	W TINES	

ARE IRRIGATION DITCHES LOCATED ON OR NEAR THE PROPERTY LINES:

To read all (YES) ----- (NO) margaralings which no because on the contract of

ARE ANY EXISTING WELLS LOCATED CLOSER THAN 100 FEET FROM THE PROPOSED ABSORPTION AREA:

(YES) (NO)

TYPE OF SYSTEM PROPOSED:

1,000-gal