Permit No. <u>2007</u>-169

	MISSOULA CITY-COUNTY HEALTH DEPARTMENT 301 W. Alder, Missoula, MT 59802 Phone: 258-4755, Fax 2 INDIVIDUAL SEPTIC SYSTEM SELF-INSPECTION RE	58-4781 <u>PORT</u>
	You must call for an inspection and receive permission to self-inspect from the Department Name of Owner <u>Lawcence</u> Newman	it before using this form.
	Legal Address/Location <u>3250 Glacsen CR. Rd.</u>	
	Certified Installer Row Matthew	
	System Type: New V Replacement Standard X Gravelless Pressure I	Dist Dosed
	Capacity: Septic Tank 1000 gal. Pump Chamber gal. Depth to Top: Septic Tank 10	• "F Pump Chamberft.
	Drainfield: Total length /00_ft. # of laterals Range of Trench Depth	$\frac{20-24}{20}$ in to bottom soms Permitted \underline{RU} $H\infty$ k
	Distance of Installation from: Property Lines: <u>10'+</u> Wells: <u>100'+</u> Surface Water: <u>1</u> Foundations: <u>10'+</u> Other: <u></u>	10t
	Draw system components and any items above in the area provided below	Indicate North with Arrow
	KIK CA.	
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	I attest that this system was installed in accordance with the septic permit and th Health Code and that the above drawing accurately reflects what was installed. Self Inspected by:	e Missoula City-County <u>10 / 2 / 07</u> Date
	Inspection Reviewed By:	<u>10 15 07</u> Date
	Drawing shows that system meets the requirements of the permit and the Health	Code. Yes No
	Corrections Necessary:	
	Deficiencies Corrected: Yes No Sanitarian	//

MISSOULA CITY-COUNTY HEALTH DEPARTMENT 301 W. ALDER, MISSOULA MT 59802 PERMIT NO.: 2007-1			
(406) 258-4755 Fax (406) 258-4781 FEE AMOUNT: <u>225.00</u>			
SEPTIC PERMIT DATE PAID: $-\frac{7}{26}$			
Owner Name: Lawrence Nowman Phone: 370 6113			
Owner Address: 4820 Duncan Drive			
Certified Installer: Matthew Bros			
Location of Installation: <u>NW 1/4 NW 1/4 T 20 N R 17 W S 10</u>			
Address of Site: 3250 Glacier Creek Rd City: Condon			
Certificate of Survey #:			
Lot: Block: Tract: Parcel Size: 160 2010cc			
General Area Name: <u>Condon</u> <u>Geocode: 2991-10-1-01.0000</u>			
Site Plan Attached? Yes No New or Increased Use Yes No			
All separations met?			
Site plan matches state approval? N [A Yes No] Non-deg completed			
Any existing septic systems? $Yes $ No Property located in MWTPSA ? $Yes $ No			
Upgrade required? Yes No Subdivision Plat Language exists			
Inside or near floodplain? Yes No Deed Restriction filed			
Public sewer less than 200 ft? $\underline{Ves} \overline{V}No$ Property located in STEP area? $\underline{Ves} \overline{V}No$			
Checklist on reverse completed? <u>Ves</u> No City STEP tank permit obtained			
SOIL TYPE: <u>Silty Clay Joan</u> WATER SUPPLY: <u>Creek</u> (I, S, M, C, P) Circle one			
TYPE OF SYSTEM TO BE INSTALLED: New Replacement ModifiedPUBLIC (Must be approved by DEQ)			
SYSTEM SIZING: V Res: # Dwelling Units #of Bedras RV HQOKith Bsmat? Y (N) = Gal/Day 50			
Com: Use # Employees # Customers GAL/DAY APPLICATION RATE: (Gal/day or sq. ft./bedroom): Site Eval # Site Eval #			
APPLICATION RATE: (Gal/day or sq. ft./bedroom):			
Consultant (Name)			
SYSTEM SIZE & DESCRIPTION:			
drainfield trench using <u>gravily</u> distribution as per plans attached.			
Septic Tanks must include an inspection port measuring at least 8 inches above the inlet, marked with rebar and extend to within 12 inches of surface. Septic tank outlets must include an effluent filter or other approved device. An access to the effluent filter must allow maintenance of the filter and extend from the tank to the finished ground surface. A handle to the filter must extend to within 2 inches of the access lid. For multiple compartment septic tanks, an access riser at least 18" in diameter to each compartment must extend to within 12 inches of the finished ground surface. Additional comments: If infiltration chambers are used,If of drainfield is required.			
NOTE: Any well and/or drainfield must be installed as shown on the Certificate of Subdivision Plat Approval (76-4-130 MCA)			
As purchaser of this permit, I agree to comply with all requirements for installation as described in Missoula City-County Health Code Regulation #1, DEQ Circular 4 and special conditions described above. <u>This document does not release me from complying with any other State, Federal or Local regulations</u> including but not limited to zoning, building and floodplain regulations.			
This permit is valid for twelve (12) months from date of purchase. Sewage disposal systems must be completed within this time and inspected by the Department prior to covering the system. A copy of this permit is to be on site at all times during construction and inspection of the system. Please use the permit number in the upper right hand corner for reference when you call for a final inspection.			
Permit purchaser: Date:			
Health Authority: Date: 7/26/07			
G:\ENV\Files\Septic Permit04-2007.doc			

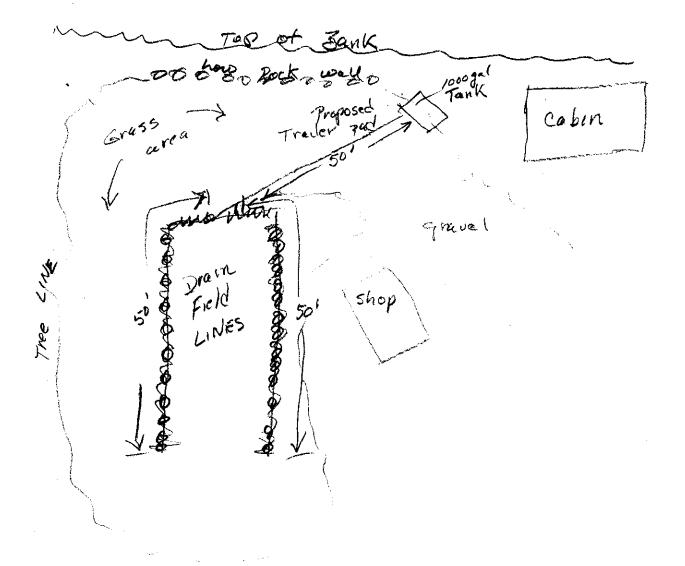
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SEPTIC PERMIT CHECKLIST

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ALL PERMITS:
MUNICIPAL SEWER: (CHECK ONE)
Public sewer does not abut property or is not within 200 ft of system/building, verified by
Public sewer abuts property, is within 200 ft of structure or any part of subsurface disposal system, connection required.
Public sewer will not allow connection as per on on
SPECIAL MANAGEMENT AREAS: (see section XVII of Health Code)
STEP tank area requires City permits and inspections.
MWTPSA – Deed restriction filed
Subdivision Plat language exists
RATTLESNAKE – One system per lot – 25' vertical & 100' horizontal separation from valley
ROMAN CREEK/TOUCHETTE LANE (W ½ SEC 27, S 28, E ½ S 29, T 15N, R 21 W) Conditions met
LOLO SEWER (RSID 901) or Connection not allowed as per on
TYPE OF PARCEL: (CHECK ONE)
Subdivision filed prior to 5/27/1961, Site evaluation in file (Yes, No)
Subdivision filed after 5/27/1961 without lifting, requires subdivision review, Site evaluation in file (Yes, No)
Subdivision filed after 5/27/1961 with restriction lifted and recorded.
COS with restriction lifted and recorded.
COS with ≥0 acre exemption (requires site evaluation) Site evaluation in file (Yes, No)
Tractland requires a site evaluation. (>5 acres before 1973, >10 acres before 1975, >20 acres)
COS without lifting (usually an exemption - no permit can be issued, i.e. ag, cemetery, etc) Subdivision review required.
Mortgage release/exemption
NEW PERMITS
PLANNING/ZONING/FLOODPLAIN PERMIT REQUIRED
In a zoned area
Near a floodplain or flood prone area Subdivision for Lease or Rent
OTHER PERMITS REQUIRED
In Air Stagnation Zone, Paving permit required.
SIZE OF PARCELS OR PARCELS:
If $< \frac{1}{2}$ acre, ownership of contiguous lots prior to May 19, 1988; determined from Assessor's Office (See Section V(D)(2))
If $< \frac{1}{2}$ acre, complies with 350 gpd.
If $> \frac{1}{2}$ acre but less than 1 acre, complies with prorated 700 gal/useable acre/day.
REPLACEMENT SYSTEMS:
HIGH GROUNDWATER OR BEDROCK: (CHECK ONE)
High groundwater or bedrock area – pumping required.
Not a high groundwater or bedrock area determined by
ATTE VICTOR (ATTEAL AND)
SITE VISIT: (CHECK ONE)
Site visit required to verify room for: 1) Drainfield, absorption bed or seepage pit; 2) Groundwater; 3) Wells; 4) Other Site plan shows all separations met. Site visit not necessary to verify soils or groundwater.
She plan shows an separations met. She visit not necessary to verify sons or ground water.
INCREASED USE – CHANGE OF USE:
SIGNIFICANT IMPROVEMENT/EXPANSION OF STRUCTURES: (CHECK ONE)
Drainfield equivalent treatment required (DET)
Advanced secondary treatment required for systems not meeting DET above.
Septic tank appropriately sized, pumped, verified in good condition, effluent filter, capacity gallons.
Within MWTPSA, deed restriction required; recorded copy attached to permit.
G:\ENV\Files\Septic\Forms\Sewer Checklist.DOC

	DEPTIC System Dite Phan	7/26/07
For: Location:	Lawrence H. Newman	
hoca ion:	3250 Glacier CR Rd. 720N RITW Sec 10, NWNW	
Phone:	Cell - 370-6113	
	home - 549-1248	
Contractor	- Ron Matthew @ 754-2430	
INSTALL Date	- Aug, 07	



 MISSOULA CITY-COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION
 301 WEST ALDER MISSOULA, MONTANA 59802-4123
 (406) 258-4755 FAX (406) 258-4781

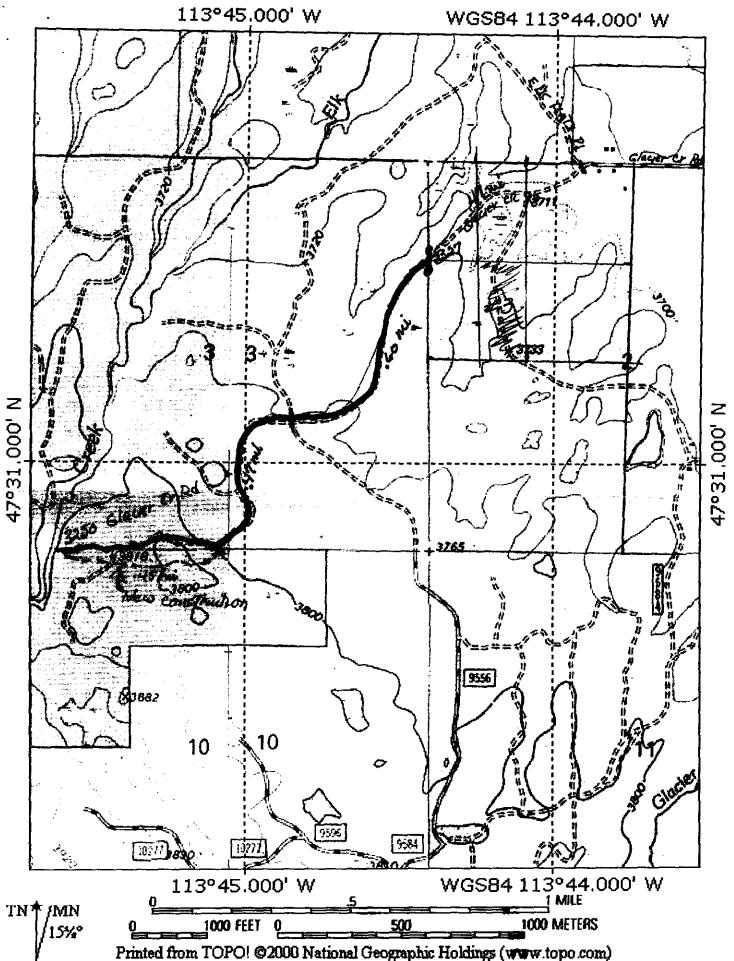
SITE EVALUATION REPORT

#

Name of Appli	cant: Lourence N	auman	Phone:	549-1248	
Address: 4	320 Duncon Dr	<u>Ne</u>			
*Legal Descrip	otion: <u>NUO</u> 1/4 M	1/4 S 10	т20	R_\7	
Subdivision or Certificate of Survey: <u>539</u> Size of lot or parcel: <u>160 acres</u>					
Address of site(if any): 3250 Glacier Creek Ro					
Distance to nea	arest well, irrigation ditch, or s	urface water:			
Comment:	· · · · · · · · · · · · · · · · · · ·				
SOIL PROFILE HOLE #1: Latitude & Longitude Lat 97° 30.791 Long 13° 45.611					
Depth	Texture	Structure	Color	Other Features	
0-7	Silt Loran	Blocky	Tan	arove 1/4	
7-25	silley dray loam	Blocky	ton	Some gravel	
25-	Chaultom	Blocky	Brown	Samo grovel	
) 00 1				

SOIL PROFILE HOLE #2: Latitude & Longitude _____

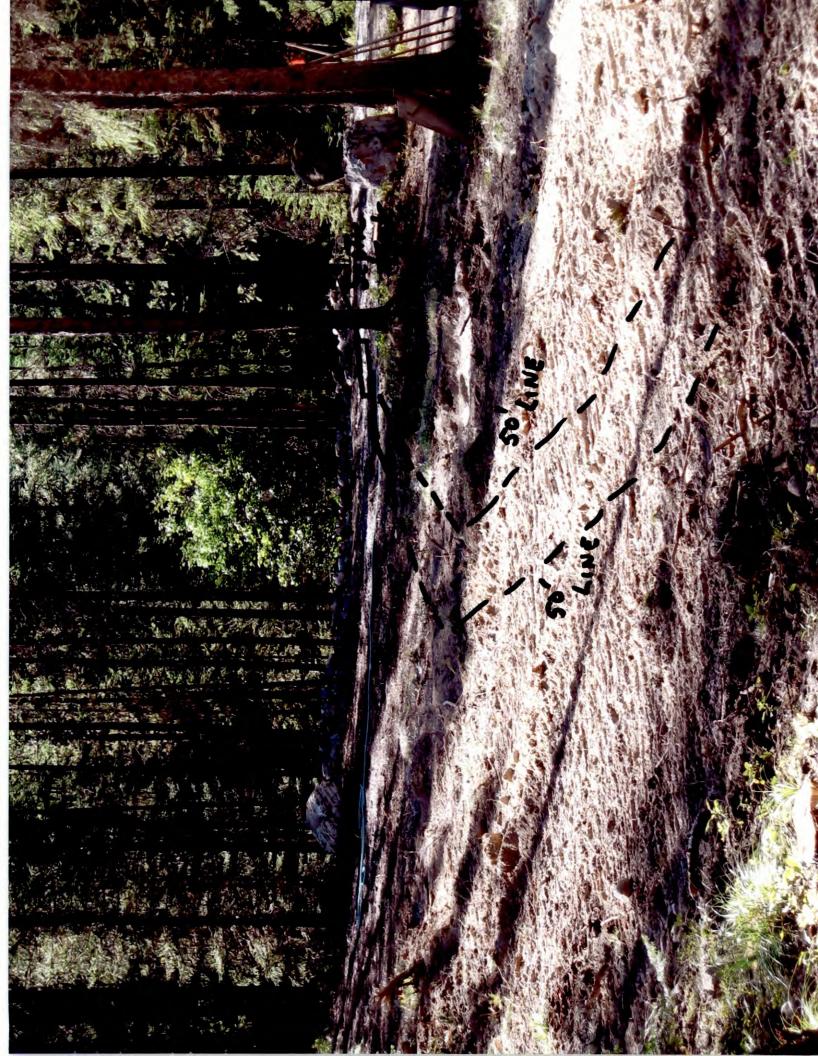
Depth	Texture	Structure	Color	Other Features
				<u> </u>
				/ 1.122
				·····
*Soil Descrij *Slope of lot	ption, 18-36": <u>X. H. (1)-</u> : at site: <u>2-3</u>	y loom/daylo	247)	
Other feature	$rate: 3 col \frac{1}{9}$			
Recommend	ations: for hooking 2	n RV INto -	1000 gal time	70001 3
*Soils accept	table for septic system: Yes	XNo		ىسر _
Non-Degrad	ation Analysis Performed & Attache	ed or	Parcel is Categorically Exempt	<u> </u>
	conducted by:	Mailed Daviesen		, 20 <u>0 - 7</u>
*Indicates in	formation required for data entry	O O		
G:env\files\S	Site Eval\Forms\Site Eval Report.do	c		



	MISSOULA CITY-COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION $\frac{\# 2007 - 0.52}{Fee: \#150^{20}}$
•	301 W. ALDER
	MISSOULA MT 59802-4123 (406) 258-4755 FAX (406) 258-4781
\mathcal{A}	
V	APPLICATION FOR SITE EVALUATION
Ow	ner/Applicant's Name Lawrence +1 Newman Phone # 549-128
Ow	ner/Applicant's Address 4820 Duncan DR
А.	Legal Description of property: Attach a copy of property description from the Missoula County Property Database:
	Located on the Web at: http://www.co.missoula.mt.us/Owner/default.aspx (or complete below):
	Location: $NW 1/4 NW 1/4$ Section 10 T 20N R 17W
	TAX ID: 1642706 GEOCODE: 2991-10-1-01-0000
	Certificate of Survey # <u>539</u> Or Subdivision name:
	Lot Block
В.	Assigned address from County Road Department (located at 6089 Training Drive, PH: 258-4753)
	Address: 3250 Glacier Cr Road
C.	Any existing structure or sewage disposal facilities? Yes No X
	If Yes, Explain
D.	Size of lot or parcel _ 20.06 ac_
	Proposed use: Residential – Number of Bedrooms Basement? YES / NO_circle one)
	Commercial Use Gal/day
F.	Water Supply: Private X Public (PWS #) Multi-Family
_	Applicant requirements: (in addition to this application)
0.	1) Provide location map and/or description of how to locate the site.
	2) Provide a plat or drawing showing the proposed location of the site on the property.
	3) Two test holes must be dug, one to a depth of at least ten (10) feet and a second to a depth of at least five (5) feet, located at each end of the proposed absorption system site. The Department may require more test holes be dug if
	the site is in an area where soils are not consistent.
	4) Obtain a Nitrate sample from the nearest well and submit the results with application to determine compliance with ARM 30.7 (Montana's Non-degradation rule for surface and ground water).
	 5) Call the Department to schedule the evaluation with an Environmental Health Specialist.
by th	Department does not conduct percolation tests, which are required in some situations. If the soil is finer than silt loam, percolation tests may be required e Department and must be performed by an approved site evaluator. In addition to an acceptable site evaluation, the applicant must show compliance ARM 30.7 (Montana's Non-degradation rule).
acces	site evaluation is for the site proposed, and any approval or denial is for that specific site. The applicant has responsibility for securing permission to s and evaluate soils by a health Department representative and by signing this document acknowledges that he is acting with permission and under the action of the owner. The applicant is responsible for having necessary holes dug and setting up an appointment for the site evaluation.

Signature of Applicant: Lawnence H	/ Heuman	Date: _	7-19-07	
Paid: 150.00 7/19/07			•	

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7/26/07 Newman « source 1000 gal concrete Tenti 2-50' drain lines