

Sanders County

State of Montana



Name Gail Krauthoff
Permit number 95-053

Septic

The septic system permit has been granted for the owner of the indicated parcel. This is a reminder of some of the critical rules of the regulations. The installer is responsible for all of the regulations, however, a reminder is sometimes helpful.

1. The specification of the permit are to be followed exactly.
2. The permit is valid for one year from date of issuance.
3. The installer is to notify the Courthouse within 72 hours of final cover. The information may be given in person or by telephone to either the Sanitarian, the Receptionist to the Commissioners or the Secretary to the Commissioners.
Information to be given is:
 1. name of installer
 2. name of property owner
 3. general location of system
 4. permit number (found in upper right hand corner of the permit on page 1)
 5. a phone number at which the installer can be notified and the time the installer can be notified (example 847-5555 after 3 pm)
4. Failure to notify the County is a violation and may jeopardize the installer's license.
5. The installer shall return the "as-builts" and a statement of accuracy to the Sanitarian's office within 10 days of installation. The "as built" is a copy of the lot layout with crucial distances labeled.
Along with the "as built" the installer will turn in a statement of accuracy (form enclosed).
6. The permit is non-transferrable between property owners, site locations or certified installers. Due to the unavailability of licensed installers, the installer noted on the permit may be changed if requested in writing and granted in writing.
7. The Sanitarian and/or Board of Health members have been given the right to inspect any time during the site evaluation or the installation of the system.

If there are any questions, please contact the County Sanitarian or a Board of Health member. Thank you.

SEPTIC

The application for the permit has been reviewed with the following result:

Owner information:

Name Gail S. Krauthoff

Date submitted 7/11/95

Mailing address PO Box 1165

City Plains, MT 59859

Permit results:

Permit denied. Reason: _____

Permit denied as information submitted incomplete.

Information needed: _____

Permit approved with the following specifications:

1000 gal size of tank

420 l.f. lineal feet of drainfield

(840 ft² square feet of drainfield)

_____ any special design for the system. List design

specifications: drainfield depth is 24". Standard

subsurface drainfield as per WQB-6

8/1/95 Signature of Sanitarian J

8/1/95 Date

95-053 Permit number

8/1/96 Expiration date of permit

Septic

DRAIN Field 420'

Big Rock

Box

5% Slope

Trunk

100'

100 ft around

tree Rock

100'

100'

100'



WOOD

Box Replacement Field

North

100'

100'

Yellow stone pipe line

Power Lines

Nov 200

SEPTIC

STATEMENT OF ACCURACY of Installation

I Gerald L. Carr, as the licensed installer for the
(Printed name of installer)
following system have either constructed or altered the septic
system or supervised and/or approved the construction of the
septic system of the following parcel:

Chappy Krawthoff Owner's name

_____ General location of parcel

95-053 Permit number

I do hereby declare that the specifications of the approved
permit issued have been followed. Accompanying this statement is
a copy of the lot layout to file in the Courthouse Sanitarian's
office. This statement and the "as built" shall be filed in the
Sanitarian's office within ten (10) days of completion of the
system.

Gerald L. Carr
installer's signature

L. I. P. 02
installer's license number

7/27/96
Date system completed