

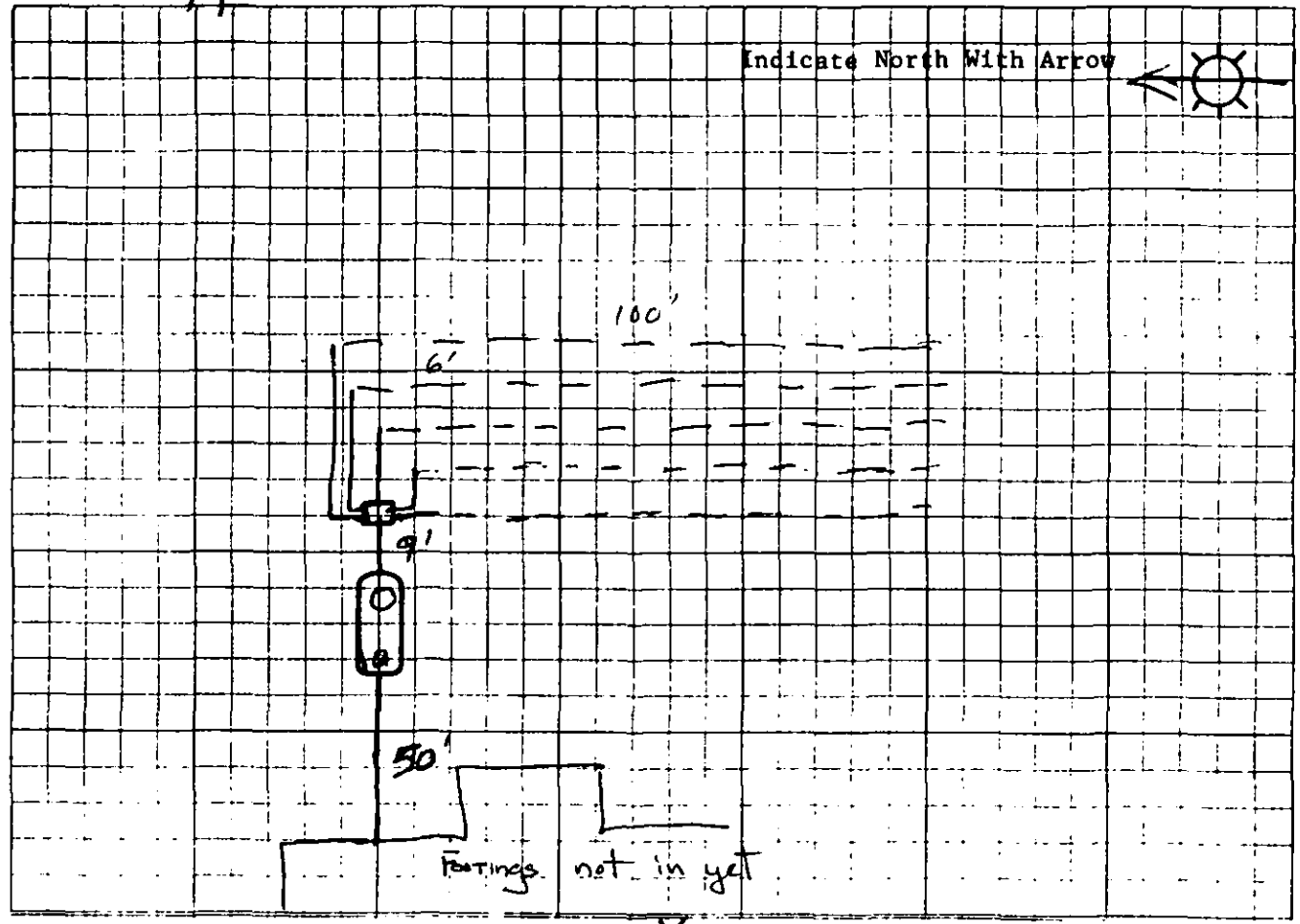
MISSOULA CITY-COUNTY HEALTH DEPARTMENT
301 W. Alder 721-5700

INDIVIDUAL SEWER SYSTEM INSPECTION REPORT

Name of Owner Wayne Smith
Legal Address/Location 21250 Jones Road Address
Certified Installer MORAN changed to: 6410 Lone Moose Rd

Type System: New Replacement
Septic Tank: Capacity: 1000 gal. Other gal., Material: Concrete Other , Depth to top: ft. in.
Drainfield: Total length 500 ft., # of laterals 5 , Trench Depth in. to bottom
Seepage Pit: Height ft., Depth to Top ft. in
Distance of Installation From: Property Lines: Wells: 100'± Surface Water: Other

Soil Type s/g



Installation Inspected: Approved Disapproved
[Signature]
Sanitarian 8/24/92
Date

Corrections Necessary:

Inspection Witnessed By: [Signature] / /
Date

Deficiencies Corrected: yes no
Sanitarian / /
Date

SEWER PERMIT AND APPLICATION

FEE \$ _____

Owner/Applicants Name Wayne Smith Phone# _____

Owner/Applicants Address 21250 Jones Rd. Florence

Certified Installer Self

Location of Installation: 1/4 SW 1/4 T 11 R 20 Section 35

Address of Site 21250 Jones Rd. Florence 59833

Certificate of Survey # 2798 HD # _____

Subdivision _____

Lot _____ Block _____

Tractland D1

General area name Florence - County Line

Size of Lot or Parcel 4.95 A

Any existing structure or sewage disposal facilities: Yes _____ No X

If Yes, Explain: _____

Residential - Number of Bedrooms 4 Commercial _____ gal/day _____

Water supply: Private X Public _____ Multi-family _____

Soil Type _____

Depth to groundwater _____

Type of system to be installed: New X Replacement _____

System size: From Plat approval X From site evaluation # _____

Application rate _____ Gal./square Ft/day

Square feet per bedroom 310'

Engineered _____

085
085

Description of System to be installed 1000 gallon concrete septic tank with 620 linear feet of drainfield with 2' trench

Special Conditions 8" riser to surface

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 Pruchaser Wayne A Smith Date: 5-18-92

Health Authority Mary Lou Silman Date: 5/18/92

This permit is valid for 12 months. Construction of the sewage disposal system must commence during this time or the permit is no longer valid. A final inspection by the Department is required prior to covering the installed system. Applicant's copy of the permit must be on-site at the time of inspection. Please use the permit number in the upper right hand corner for reference when you call for a final inspection.

SEWER PERMIT CHECKLIST

PERMIT NUMBER 92-204

INITIALS mlj

ALL PERMITS:*****

SITE PLAN ATTACHED TO PERMIT

HOOK-UP TO MUNICIPAL SEWER IS REQUIRED IF: (CHECK ONE)

- <200' TO PROPERTY LINE IF IN CITY LIMITS CALLED AND REFERRED TO CITY ENGINEERS OFFICE
- <200' TO BUILDING IF OUTSIDE CITY LIMITS DATE _____
- NOT WITHIN 200 FEET OF MUNICIPAL SEWER _____ PERSON CONTACTED
- LINDA VISTA SPECIAL MANAGEMENT AREA: DEED RESTRICTION FILED WITH CLERK AND RECORDER

SEPARATION ADEQUATE FOR: (INFO SUPPLIED BY APPLICANT) (CHECK ALL)

	YES	NO
WELLS >100'		
WATER LINES >10'		
FLOODPLAIN >100'		
SURFACE WATER >100'		
HGW >6', >5', >3'		
BEDROCK >6'		
SLOPE >25% <50% = 2'x (%-25)		
PROPERTY LINES, BLDGS. >10'		

NEW PERMIT:*****

PLANNING/ZONING PERMIT REQUIRED (CHECK ONE)

- INSIDE BUILDING INSPECTOR ZONE - BUILDING PERMIT APPLICATION REQUIRED
- OUTSIDE BUILDING INSPECTOR ZONE - IN ZONED AREA OR NEAR FLOODPLAIN, COMPLIANCE PERMIT REQUIRED.
- OUTSIDE BUILDING INSPECTOR ZONE - NOT IN ZONED AREA OR IN FLOODPLAIN

TYPE OF PARCEL: (CHECK ONE)

- SUBDIVISION FILED PRIOR TO 5/27/61 REQUIRE A SITE EVALUATION. S.E. IN FILE _____ (YES OR NO)
- SUBDIVISION FILED AFTER 5/27/61 WITHOUT LIFTING REQUIRE SUBDIVISION REVIEW. S.E. IN FILE _____
- SUBDIVISION FILED AFTER 5/27/61 WITH RESTRICTIONS LIFTED AND RECORDED
- COS W/LIFTING ON FILE/RECORDED
- COS WITH >20 ACRE EXEMPTION (REQUIRES SITE EVALUATION) SITE EVALUATION ON FILE _____ (YES OR NO)
- COS WITHOUT LIFTING ON FILE (IS USUALLY AN EXEMPTION FOR WHICH NO PERMIT CAN BE ISSUED i.e. AG., CEMETERY, etc.)
- TRACTLAND REQUIRES A SITE EVALUATION. (>5 (BEFORE 1973), >10 (BEFORE 1975), >20 ACRES)

OTHER ITEMS TO CHECK:

- MEETS 600 GAL/ACRE/DAY
- RATTLESNAKE: ABOVE INTAKE
- IN 201 AREA (STEP TANK RECOMMENDED) (POSTED AT COUNTER)
- FRENCHTOWN (W 1/2 SEC 27, S 28, E 1/2 S 29, T 15N, R 21W)
- (NORTH OF I-90 AND SOUTH OF FRENCHTOWN CANAL) BOARD OF HEALTH CONDITIONS MET _____

REPLACEMENT SYSTEMS: *****

HIGH GROUND WATER:(CHECK ONE)

- HIGH GROUNDWATER AREA - DRAINFIELD, ADSORPTION BED, OR SHALLOW SEEPAGE PIT REQUIRED
- NOT A HIGH GROUND WATER AREA

LIFTING:(CHECK ONE)

- NO LIFTING ON FILE
- LIFTING ON FILE REQUIRES DRAINFIELD/ADSORPTION BED

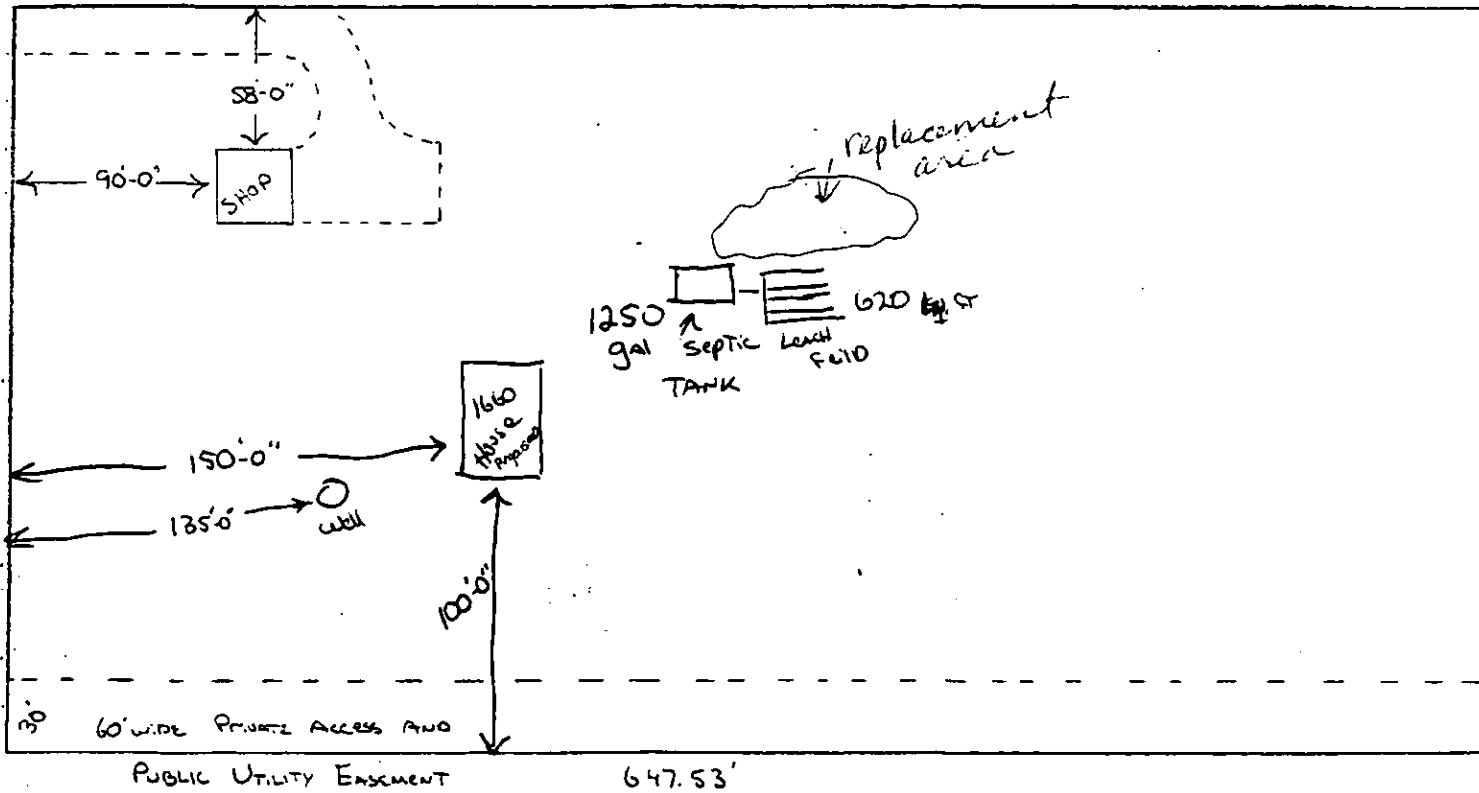
SITE VISIT:(CHECK ONE)

- SITE VISIT REQUIRED TO VERIFY ROOM FOR: 1) DRAINFIELD, ADSORPTION BED OR SEEPAGE PITS 2) GROUNDWATER 3) WELLS 4) ETC.
- SITE VISIT NOT NECESSARY TO VERIFY SOILS, SPACE FOR ADSORPTION AREA, DISTANCE TO WELLS, OR GROUNDWATER.

OTHER ITEMS TO CHECK:

- PERMIT REQUIRES CAPPED RISER TO SURFACE;
- PERMIT REQUIRES BAFFLES/TEES INSPECTED; TANK PUMPED IF NECESSARY

Jones Road



337.92'

WAYNE & BRIDGET SMITH