

		$PAI\Gamma$
	WP23-0028	1 / (1)
Balance Owed		\$145.00
		Property
Street Address	8739 AURORA DR, MISSOULA, 59808	
	Per	mit Purpose
Purpose	A new drinking water supply well to serve a single living isolation zone easement (B1084 P690) and a COSA rev P912) were completed for this permit.	
		Well Type
Type of Well	New	
.	Drinking Water Supply	
Drinking Water Wells		
Number of Connections		
	Permi	t Conditions
Special Conditions	Please survey and stake the exact well location to ensing the exact location shown on the lot layout attached permit.	
General Conditions	The well must be installed as shown on the attached site plan.	
	Ensure that the well is at least 100 feet from all existing and proposed and at least 50 feet from any sealed components of a wastewate disposal system.	
	Notify the Health Department when the well is ready for inspection-258-4755 or emailing envhealth@missoulacounty.us. Wells must be the permit to remain valid.	
	Maintenance Recom	mendations
General Recommendations	Drinking water wells should be tested routinely for bacterial conta Bacteriological testing services are available at the Health Depart addition to several private labs in the area.	
	Several areas of Missoula County have shown to be high in nitrate Department recommends well owners test drinking water wells for constituents to determine if treatment is needed.	
	Protect your well from potential contamination by directing storm from the wellhead, keeping the well securely capped, and maint screens on any openings. Page 1/3	•

	_	_		_
	(N	Δ	×χ	7)
	(I)	C	٧١	ر ر
\cap	1	1	2r	•

		Owner
Name		
Phone #	406-239-1901	
Street Address	4297 Spurgin Rd	
City	Missoula	
State	MT	
Zip Code	59804	
Company Name	Ursus Equity, Inc	
Name		
		Legal Description
Geo Code	04-2325-03-3-01-05-0000	
T/R/S	T14NR20W-03	
COS	5955	
Tract	2	
Subdivision	-	
Long Description	S03, T14 N, R20 W, C.O.S. 5955, PARCEL 2	
Type of Parcel	The parcel has a COSA	
		0 00 111

On-Site Wastewater

Any existing septic systems? Yes

Septic Permit Number SP22-0103

Permit Expiration

This permit is valid for 12 months after the date of issuance. The well must be inspected and approved by the Health Department within that time in order to remain valid.

Notice

This permit is issued based on the requirements in the Missoula City-County Health Code Regulation #5. The permit conditions are in effect upon issuance and apply to the applicant, and all current and future property owners. This permit does not release the applicant or owner from complying with any other State, Federal, or Local regulations including but not limited to zoning, building, and floodplain regulations.

This well cannot be used or connected to a structure until the Department has completed an on-site inspection and approved the final location. Regulation 5, Section 5 of the Missoula City-County Health Code states: (A) Prior to being used, all wells require a final inspection of the well location by the Department, unless specific permission has been granted by the Department.

By signing this permit, I understand that the Department must receive notification within two (2) days of completion of this well.

MISSOULA COUNTY Missoula City-County Health Department

Well Permit # WP23-0028 (New)

Pegh D Capet	
	03/31/23
Health Authority	Date



Well Permit #: WP23-0028

NOTICE OF WELL INSPECTION REQUIREMENT

Regulation 5 of the Missoula City-County Health Code requires the Department receive notification within two (2) days of this well being drilled.

Once the Department is notified that the well has been drilled, staff will visit the site to verify that the well location complies with the permitted location shown on the attached site plan.

This well cannot be used or connected to a structure until the Department has completed an on-site inspection and approved the final location.

Regulation 5, Section 5: Inspections

(A)Prior to being used, all wells require a final inspection of the well location by the Department, unless specific permission has been granted by the Department.

By signing this permit, I understand that the Department must receive notification within two (2) days of completion of the well, and I understand that the well may not be used or connected to a structure until it has been inspected and approved by the Department.

Permit Purchaser:_		Date:
(or representative)	Wish D Comto	
Health Authority:	juga 17 caj-	Date: 03/31/23

MCCHD STAFF USE ONLY

Septic Application Fee: \$150.00
Permit Fee: Assessed when issued
Invoice #: _____
Date Paid: _____



MCCHD STAFF USE ONLY

Log # WP23-0028

Environmental Health 301 W. Alder Missoula, MT 59802 Phone 406.258.4755 envhealth@missoulacounty.us www.missoulacounty.us/HealthDept

Wastewater Treatment System and Well Application

Please submit by email envhealth@missoulacounty.us, mail/in person at 301 W Alder Street Missoula MT, 58902 Assigned Address: Cannot accept application without (Apply w/Co. Road Dept. 6089 Training Dr. 406.258.3701) Address: City: Zip Legal Description of Site: (Find on your tax statement or at http://gis.co.missoula.mt.us/propertyinformation/) Geocode: 04-___ - _ - _ - _ - _ Short Legal: T ___ R ___ Section ___ 1/4 Section ___ Certificate of Survey # or Subdivision Name: Tract or Lot _____ Block (if applicable): ____ Size of lot or parcel: _____ **Owner Information** Owner's name Owner's address _____ State ___ State ___ Zip Code ____ Phone # _____ Owner Paying Invoice: Yes _____ No ____ EMAIL FOR INVOICE ____ **Applicant Information** (if different from owner) Applicant's name Applicant's address _____ City ____ State ___ Zip Code ____ _____ Phone # _____ Email: Applicant Paying Invoice: Yes _____ No ____ EMAIL FOR INVOICE _____ Section 1 Are you applying for a well permit? YES (Fill out this section) NO (Skip to Section 2) Type of Well: New Replacement Reason for Replacement: **Intended Uses of Well:** Number and description of dwelling units and structures that will be connected to the well: Must include a site map, At least 100 feet from septic systems Yes No

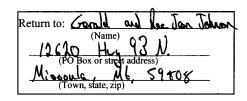
At least 100 feet from surface water

Out of the floodplain

Yes ____ No___ Yes ___ No___

and will the well be:

	Section 2		
Are you applying for	a septic permit? YES (Fill out this section	ion) NO (Skip to Section 3)	
Wastewater System In	oformation:		
Type of System:	New Replacement Tank/Con	nection Only Modification	
Intended Use:		Number of bedrooms	
		ent? Will it be finished?	
	Commercial Use	# Employees # Customers	
	Other Describe Use		
Surface Water:	Describe closest surface water:	(ft)	
Drinking Water:	What is the drinking water supply for the parce	el? (Well, Spring, Lake, etc)	
	How many structures are served by the water s	supply?	
Drainfield Elevation:	Same/Below Septic Tank(ft) Above S	Septic Tank(ft)	
Distance from Tank to	Drainfield:(ft)		
Attach floor plans (no l	R PLANS? YES (cannot review septical arger than 11" by 17") for all plumbed structure to be to scale and can be hand drawn. Please, lab	s to be served by any wastewater system.	
	Section 3		
Did you attach a SITE MAP? YES (cannot review septic or well application without) Attached site plan (no larger than 11" by 17") showing the locations of all features listed below (exiting and proposed). Site plans can, but don't have to be prepared to scale by a professional engineer or architect. If the site plan is not drawn to scale, include enough measurements to accurately depict where everything is on the property.			
Property Lines	Wastewater Systems	Wells	
Buildings	Surface Water	Easements and No Build Zones	
Roads & Drivewa		Wells/Drainfields 100ft from Property	
On the site map, did y	ou At least 100 feet from wells	Yes No	
show measurements to		Yes No	
the drainfield (septic o	only): At least 100 feet from floodplain	Yes No	
	At least 10 feet from septic tanks	Yes No	
	At least 10 feet from property lines	Yes No	
	At least 10 feet from buildings Approximate slope across drainfield	Yes No Yes No	
	Approximate stope across drainfield	Yes No	
Existing Structures ar	nd Facilities: Describe existing structures, wells	and wastewater systems on the parcel:	
	that the information I have provided on this applications are an accurate representation of all i		
Applicant's Signature:		Date:	



202220932 B:1084 P:690 Pages:4 Fee:\$32.00 12/15/2022 04:46:08 PM Easement Tyler R. Gernant, Missoula County Clerk & Recorder

DECLARATION OF WELL CONTROL ZONE (aka WELL ISOLATION ZONE)

THIS DECLARATION made on this 13th day of weeker, 2022, by Ursus Equity Inc., hereinafter referred to as DECLARANT:

WITNESSETH;

WHEREAS, the DECLARANT is the owner of Parcel 2 of COS 5955, S03, T14 N, R20 W, Lot 3, 2.52 AC, records of Missoula County, Montana, and said real property is situated within the 100-foot radius described on the hereto attached Exhibit A, and

WHEREAS, a well will be drilled upon Parcel 2 of COS 5955, S03, T14 N, R20 W, Lot 3, 2.52 AC, records of Missoula County, Montana, and said well will be located within the center of the 100-foot radius described on Exhibit A, attached hereto, and

WHEREAS, the DECLARANT, in order to protect the quality and purity of water from said well, is willing to impose certain restrictions upon portions of Parcel B2-B, currently owned by Gerald and Rae Jean Johnson, S10, T14 N, R20 W, Lot 4, 56.88 AC located within said 100-foot radius, said restrictions to run with the real property and to be binding on all parties having or acquiring any right, title, or interest in and to the said area under the terms and conditions herein stated,

NOW THEREFORE, SO LONG AS Exhibit A, records of Missoula County, Montana is used primarily for purposes subject to regulation as an Individual Water Supply, DECLARANT hereby declares that all of the property within a 100-foot radius of the well, hereinafter referred to as the WELL CONTROL ZONE, shall be held, sold, and conveyed SUBJECT to the following restrictions:

- No septic system, mixing zone wastewater disposal system, sewer lines, holding tanks, sewage lift station, French drain, or class V injection well, or any structure used to convey or retain industrial, storm or sanitary waste shall be located within the WELL CONTROL ZONE.
- No hazardous substances as defined by § 75-10-602 MCA, or gasoline, liquid fuels, petroleum products, or solvents shall be stored within the WELL CONTROL ZONE.
- No stormwater injection well, grass infiltration swale, or other stormwater disposal mechanism shall be located within the WELL CONTROL ZONE.
- No livestock shall be confined, fed, watered, or maintained within the WELL CONTROL ZONE.

- No private well shall be constructed within the WELL CONTROL ZONE
- No public roadway or public roadway easement shall be constructed or maintained within the WELL CONTROL ZONE.
- Pesticides including herbicides or insecticides shall not be applied or used in the WELL CONTROL ZONE.
- •The application of fertilizers shall be at agronomic rates and applied only during the growing season within the WELL CONTROL ZONE.
- Activities in the WELL CONTROL ZONE that threaten the quality of water in the WELL CONTROL ZONE are prohibited.

These restrictions shall terminate and be of no further force and effect in the event: (1) said Parcel 2 of COS 5955, S03, T14 N, R20 W, Lot 3, 2.52 AC is no longer being used primarily for purposes subject to regulation as a Water Supply; or (2) the aforementioned well is discontinued as a source of water and is abandoned in accordance with the laws and regulations of the Montana Department of Natural Resources and Conservation.

Although the restrictions set forth above may be specifically enforced, DECLARANT hereby expressly disclaims any liability for any damages or injuries that may accrue or be incurred to any person or property due to any violation of the above described restrictions. Avi Barden, as the owner of said Parcel 2 of COS 5955, S03, T14 N, R20 W, Lot 3, 2.52 AC records of Missoula County, Montana hereby releases and covenants to hold DECLARANT (and its successors and assigns) harmless from any such liability for any damages or injuries to any person or property due to any violation of the above-described restrictions and said release and covenant shall bind the successors and assigns of Ursus Equity Inc. .

IN WITNESS WHEREOF, the undersigned have hereunto executed this DECLARATION, the day and year set forth besides each of their signatures below.
Date: 12/13/22 Avi Barden (Ursus Equity Inc.)
State of MOUTANA: : ss. County of MISSOULA;
This instrument was acknowledged before me on this 13 day of 12 da
MICHELE YVONNE HAGEDORN MICHOLO VIONICALION ACCIONALIONALIONE

Printed Name: Michele Yvnne Ha Notary Public for the State of Montana Residing at: 610, MT

My Commission Expires: Q

202220932 Page 3 of 4 12/15/2022 04:46:08 PM

Date: 12-12-22

(Owner)

Date: / 2-12-22

e Jean H Johnson

State of MONTA Nay

County of MISSOULAY

: SS.

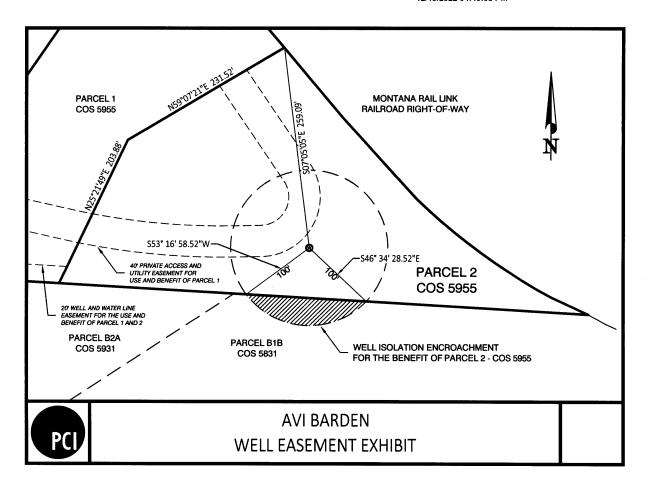
This instrument was acknowledged before me on this 12 day of New day of New 2022, by General John Son and Raylan Johnson.

(Notarial Seal)

MICHELE YVONNE HAGEDORN NOTARY PUBLIC for the State of Montana Residing at Lolo, MT My Commission Expires September 08, 2024. Mulle Yvannet and don Printed Name: Michele Yvanne Hagedorn Notary Public for the State of Montana

Residing at: 1010, MT

My Commission Expires: 09-08





202302419 B:1086 P:912 Pages:4 Fee:\$5.00 03/08/2023 04:52:49 PM Certificate Of Subdivision Pl Tyler R. Gernant, Missoula County Clerk & Recorder

March 2, 2023

Kane Leithead Professional Consultants Inc 3115 Russell Street Missoula MT 59801-8538

RE: COS 5

COS 5955 Parcel 2 Rewrite

Missoula County E.Q. #23-1825

Dear Mr. Leithead:

The plans and supplemental information relating to the water supply, sewage, solid waste disposal, and storm drainage (if any) for the above referenced division of land have been reviewed as required by ARM Title 17 Chapter 36(101-805) and have been found to be in compliance with those rules.

Two copies of the Certificate of Subdivision Plat Approval are enclosed. The original is to be filed at the office of the county clerk and recorder. The duplicate is for your personal records.

Development of the approved subdivision may require coverage under the Department's <u>General Permit for Storm Water Discharges Associated with Construction Activity</u>, if your development has construction-related disturbance of one or more acre. If so, please contact the Storm Water Program at (406) 444-3080 for more information or visit the Department's storm water construction website at

http://www.deg.state.mt.us/wqinfo/MPDES/StormwaterConstruction.asp. Failure to obtain this permit (if required) prior to development can result in significant penalties.

In addition, your project may be subject to Federal regulations relating to Class V injection wells. Please contact the United States Environmental Protection Agency regarding specific rules that may apply.

Your copy is to inform you of the conditions of the approval. Please note that you have specific responsibilities according to the plat approval statement primarily with regard to informing any new owner as to any conditions that have been imposed.

If you have any questions, please contact this office.

Sincerely.

Shawn Rowland M.S. R.S. Subdivision Section Supervisor

Engineering Bureau Water Quality Division

SR/JL

cc: County Sanitarian

County Planning Board (e-mail)

Owner

STATE OF MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY CERTIFICATE OF SUBDIVISION PLAT APPROVAL (Section 76-4-101 et seq. MCA)

TO: County Clerk and Recorder Missoula County Missoula, Montana E.Q. # 23-1825 COS 5955 Parcel 2 Rewrite Owner: Bardin

THIS IS TO CERTIFY THAT the plans and supplemental information relating to the subdivision known as COS 5955 Parcel 2 Rewrite, located Missoula County, consisting of one (1) parcel has been reviewed by personnel of the Water Quality Division, and,

THAT Parcel 2 was reviewed, and

THAT this Certificate of Subdivision Plat Approval supersedes E.Q. 06-1397 dated the 24th day of January 2006, and all copies should be marked superseded in the files, and,

THAT the documents and data required by ARM Chapter 17 Section 36 have been submitted and found to be in compliance therewith, and,

THAT the approval of the rewrite is made with the understanding that the following conditions shall be met:

THAT the parcel size(s) as indicated on the COS filed with the county clerk and recorder will not be further altered without approval, and,

THAT Parcel 2 shall be used for one (1) living unit, and,

THAT the **individual water system** will consist of a well drilled to a minimum depth of 25 feet constructed in accordance with the criteria established in Title 17, Chapter 36, Sub-Chapters 1, 3, and 6 ARM and the most current standards of the Department of Environmental Quality, and,

THAT data provided indicates an acceptable water source at a depth of approximately 180 feet, and,

THAT a well isolation zone easement for the benefit and use of Parcel 2 has been filed with the county clerk and recorders (B:1084 P:690), and,

THAT the individual wastewater treatment and disposal system will consist of a septic tank and subsurface drainfield of such size and description as will comply with Title 17, Chapter 36, Sub-Chapters 1, 3, and 6 ARM, and,

THAT the sand-lined, pressure distribution subsurface drainfield shall have an absorption area of sufficient size to provide an application rate of 0.6 gallons per square foot per day, and,

THAT when the present wastewater treatment and disposal system is in need of extensive repairs or replacement it shall be replaced by a septic tank and subsurface drainfield of such size and description as will comply with Title 17, Chapter 36, Sub-Chapters 1, 3, and 6 ARM, and,

THAT the bottom of the drainfield shall be at least four feet above the water table, and,

THAT no wastewater treatment and disposal system shall be constructed within 100 feet of the maximum highwater level of a 100-year flood of any stream, lake, watercourse, or irrigation ditch, nor within 100 feet of any domestic water supply source, and,

THAT all sanitary facilities will be located as shown on the approved plans and lot layout, and,

THAT the developer and/or owner of record shall provide the purchaser of property with a copy of the COS approved location of water supply and wastewater treatment and disposal system as shown on the attached lot layout, and a copy of this document, and,

THAT instruments of transfer for this property shall contain reference to these conditions, and,

THAT plans and specifications for any proposed wastewater treatment and disposal systems will be reviewed and approved by the county health department and will comply with local regulations and ARM, Title 17, Chapter 36, Subchapters 3 and 9, before construction is started.

THAT pursuant to Section 76-4-122(2)(a), MCA, a person must obtain the approval of both the State under Title 76, Chapter 4, MCA, and the local Health Officer, under Section 50-2-116(1)(i), before filing a subdivision plat with the County Clerk and Recorder.

THAT departure from any criteria set forth in the approved plans and specifications and Title 17, Chapter 36, Sub-Chapters 1, 3, and 6 ARM when erecting a structure and appurtenant facilities in said subdivision without Department approval, is grounds for injunction by the Department of Environmental Quality.

YOU ARE REQUESTED to record this certificate filed in your office as required by law.

DATED, this 26th day of January 2023

D'SHANE BARNETT, DIRECTOR MISSOULA CITY-CO. HEALTH DEPT.

CHRIS DORRINGTON DIRECTOR, DEQ

Kyle Crapster, R.S.

By: /left D Capet

Environmental Health Specialist II

Missoula City-County Health Department

Shawn Rowland, MS

By: Seata Engl

Subdivision Section Super

Engineering Bureau

Water Quality Division

Department of Environmental Quality

