

Permit to install, extend or repair septic tanks and sewage systems with inspection, in accordance covering the same. Passed by the Madison County Board of Health, Virginia City, MT, effective October 15, 1991.

Address: 51 Elk Hills City: Sheridan State: MT Zip: 59749
Phone: 842-5319

Address: saa City: saa State: _____ Zip: _____
Phone: _____

Subdivision name: Lake View

Lot, Tract or Parcel, Block: Lot 10

DEQ approval number: 05-1211

Authorized Address:

Permit issued on the 24th day of August, 20 18, for a fee of \$ 150.00
Check #: 1106 by the Madison County Sanitarian as an authorized representative for
Madison County, Montana. Receipt # 2650.

Conventional gravity septic system

Install 1500 gallon, two-compartment concrete septic tank with effluent

filter, risers as needed and 3- 50' laterals using 22" gravelless chambers.

Maintain all required set-backs and regulations IAW Circular DEQ-4, 2013 Edition and lot layout per EQ# 05-1211.

<https://deg.mt.gov/Portals/112/Water/WQInfo/Documents/Circulars/Circulars/DEQ4.pdf>

Be safe, and contact this office prior to backfill. 406-843-4275 or 406-596-8063

~~~**As-Built plans must be submitted upon completion**~~~ of the system and include property boundaries, measurements to wells and streams, as well as location and design of the system, and north indicator.

SIGNATURE:

**PERMIT #:**

Madison County Sanitarian's Office

Construction Permit #: 2004      Dated: 3/2/17      Receipt # 2650

250510 03401 160000

PERMIT # \_\_\_\_\_

**MADISON COUNTY APPLICATION FOR WASTEWATER TREATMENT SYSTEM**

Incomplete applications will not be processed. All permits are valid for 12 months from date of issuance. After that time, a \$50.00 fee will continue the permit for another year. The permit is void if the system is not installed within 24 months, and another must be purchased.

**PART A**

- (Bills)
1. Name of property owner: Ross W. Roylance  
Address: 51 Elk Hill Rd City: Shenandoah State: MT Zip: 59749  
Phone: \_\_\_\_\_
  2. If the person completing this application is not the owner, give:  
Name of applicant: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_
  3. Authorized road address: \_\_\_\_\_  
Please submit directions to location property: Jordan Lane To Lake Ennis
  4. Legal description of property: 1/4 1/4, Section \_\_\_\_\_, Township \_\_\_\_\_, Range \_\_\_\_\_,  
consisting of \_\_\_\_\_ acres, located in the County of Madison, Montana.
  5. Subdivision name: Lake View Sub.  
Lot, Tract or Parcel, Block: LOT 10  
COS: \_\_\_\_\_
  6. Type of structure(s) to be served:  
\_\_\_\_\_ One single family dwelling  
\_\_\_\_\_ Other (please describe) \_\_\_\_\_
  7. Number of bedrooms in dwelling: 3
  8. Estimated volume of wastewater produced (commercial only): \_\_\_\_\_
  9. Name of Madison County licensed installer: Self
  10. Does the property have DEQ approval?  
☒ Yes and # \_\_\_\_\_  
\_\_\_\_\_ No (see part C)
  11. Does the property have any exemptions noted on plat?  
☒ Yes – type of exemption \_\_\_\_\_  
☒ No
  12. A permit fee of \$ \_\_\_\_\_ in accordance with the Madison County Regulations for Wastewater Treatment Systems is enclosed.
  13. This is:  
☒ New system  
\_\_\_\_\_ Upgrade or replacement
  14. Type of Water Supply and Wastewater Treatment System proposed: Well Septic

Make checks to: Madison County Sanitarian

Return application to: Madison County Sanitarian, PO Box 278, Virginia City MT 59755

I hereby declare that the information above is true, complete and correct to the best of my knowledge. The wastewater treatment system will be installed according to the Madison County Regulations for Wastewater Treatment Systems and the DEQ. I acknowledge that the Madison County Health Department is not bound or obligated to guarantee this systems' operation. I further agree to give a minimum of 24 hours notice for inspection of the system before it is back filled.

Tom W. Topfane  
Signature of Applicant

7/20/2018  
Dated

## PART B

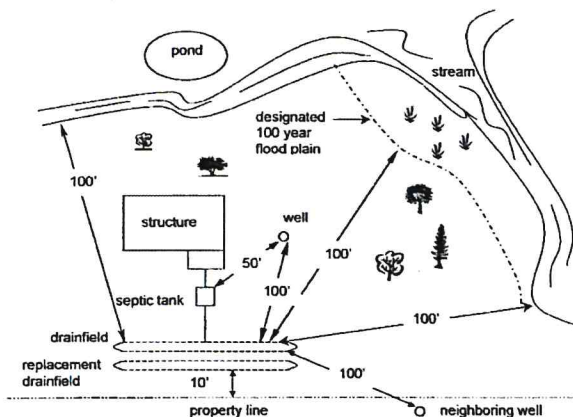
\*\*\* **IMPORTANT** \*\*\*

15. The application will not be accepted if any of the following site plan information is missing.

**Must include:** shape and size of parcel, location of house site and all buildings, percent and direction of slope, proximity to all water supplies to include wells, open bodies of water, streams and floodplain within 100 feet of the property, areas of high ground water, and the design of the wastewater treatment system area for 100% replacement absorption system.

**NORTH**

Example with setback distances



**PART C (Complete this section if the property does not have DEQ approval.)**

16. Name of site evaluator: \_\_\_\_\_  
Qualifications: \_\_\_\_\_
17. Give a description of the soil profile to a minimum depth of 8 feet: \_\_\_\_\_
18. Give the estimated depth to the seasonal high groundwater table and how this was determined: \_\_\_\_\_
19. Give the results of one percolation test and show the location on the site plan. Perc test must be performed in the drainfield area: \_\_\_\_\_
20. Nitrate/Nitrite background test results from closest well: \_\_\_\_\_  
Specific conductance test results: \_\_\_\_\_
21. Please attach well log.
22. Show the direction and percent of land slope across the proposed absorption system on the site plan.
23. Is the property located in the Madison County Floodplain and/or evaluate the potential for flooding or accumulation of surface water: \_\_\_\_\_

  
Signature of Evaluator: \_\_\_\_\_

7/20/2018  
Dated \_\_\_\_\_

**PART D (for department use)**

Type of Wastewater Treatment System required: \_\_\_\_\_

**Minimum Requirements:**

Septic tank type and size: \_\_\_\_\_

Absorption area: \_\_\_\_\_ lineal feet per bedroom

Comments: \_\_\_\_\_

Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_ Receipt #: \_\_\_\_\_

Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

Construction Permit #: \_\_\_\_\_ Dated: \_\_\_\_\_

## INSPECTION REPORT

Type of Wastewater Treatment System: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

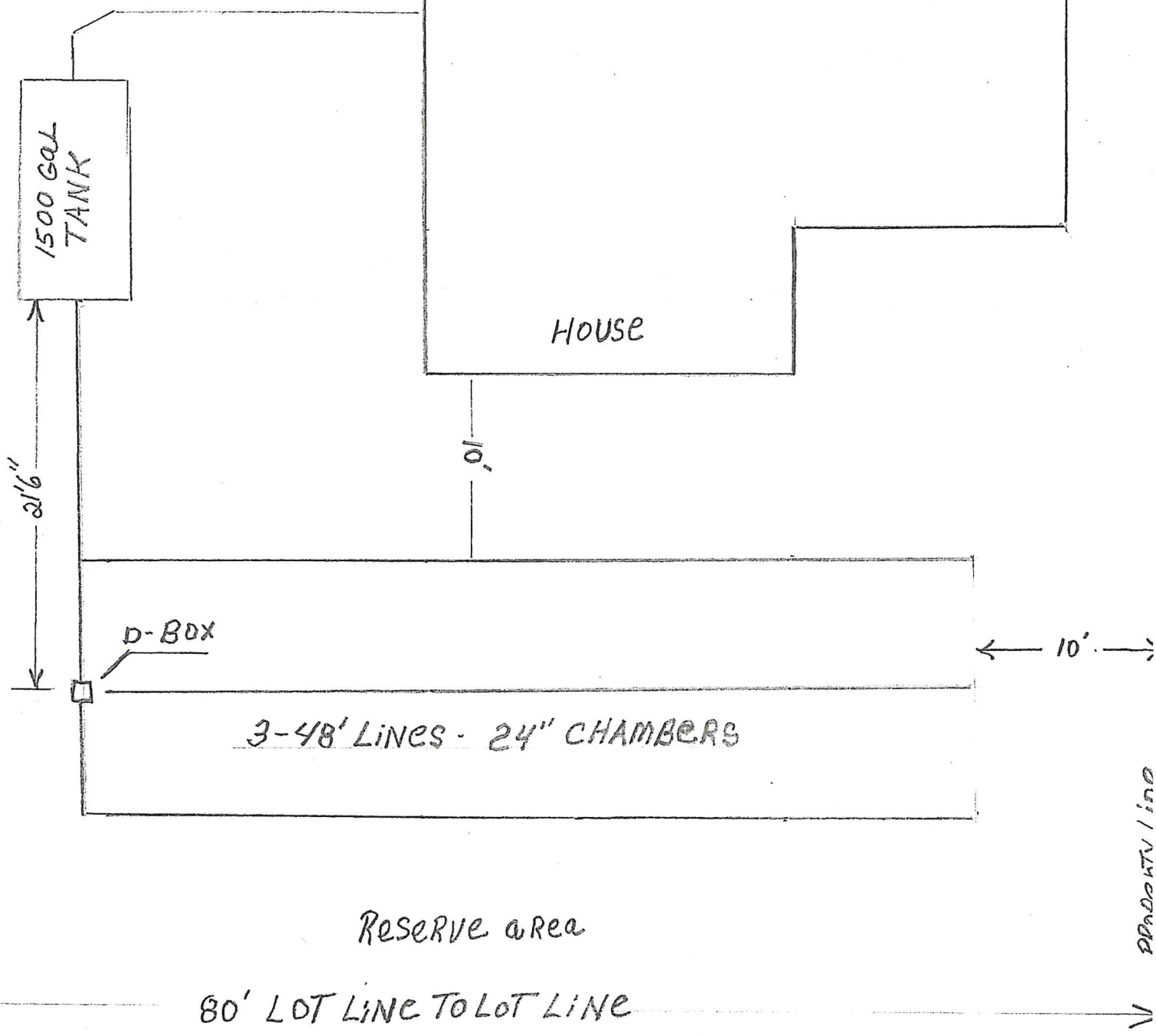
\_\_\_\_\_

Layout:

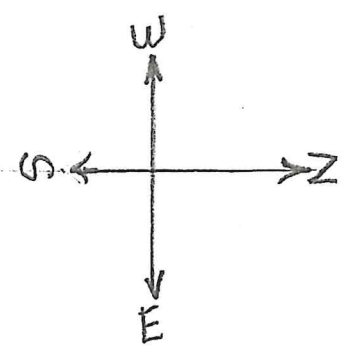
|       |              |        |       |
|-------|--------------|--------|-------|
| _____ | Approved     | _____  | _____ |
| _____ | Not Approved | Signed | Dated |



Well SITE 1004'  
To DRAIN Field  
OVER 50' TO TANK



18 JORDAN LANE  
ENNIS MT.



490-2244

3 Bedrooms = 300 gpd/day

App Rate 0.8 gpd/ft<sup>2</sup>

$$300 \text{ gpd} \div 0.8 \text{ gpd/ft}^2 =$$

$$375 \text{ sq. ft} / 2' \text{ wide} =$$

187.5' lineal (standard  
drainfield)  $\therefore$  22"

Chamber  $\therefore$  25% reduction

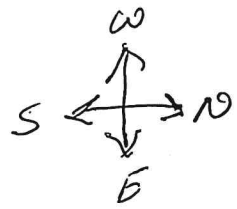
$$187.5 \times .75 = 140.625'$$

$$\underline{141'} \text{ drainfield} = 3 @ 47'$$

$$\therefore 3 @ 48'$$

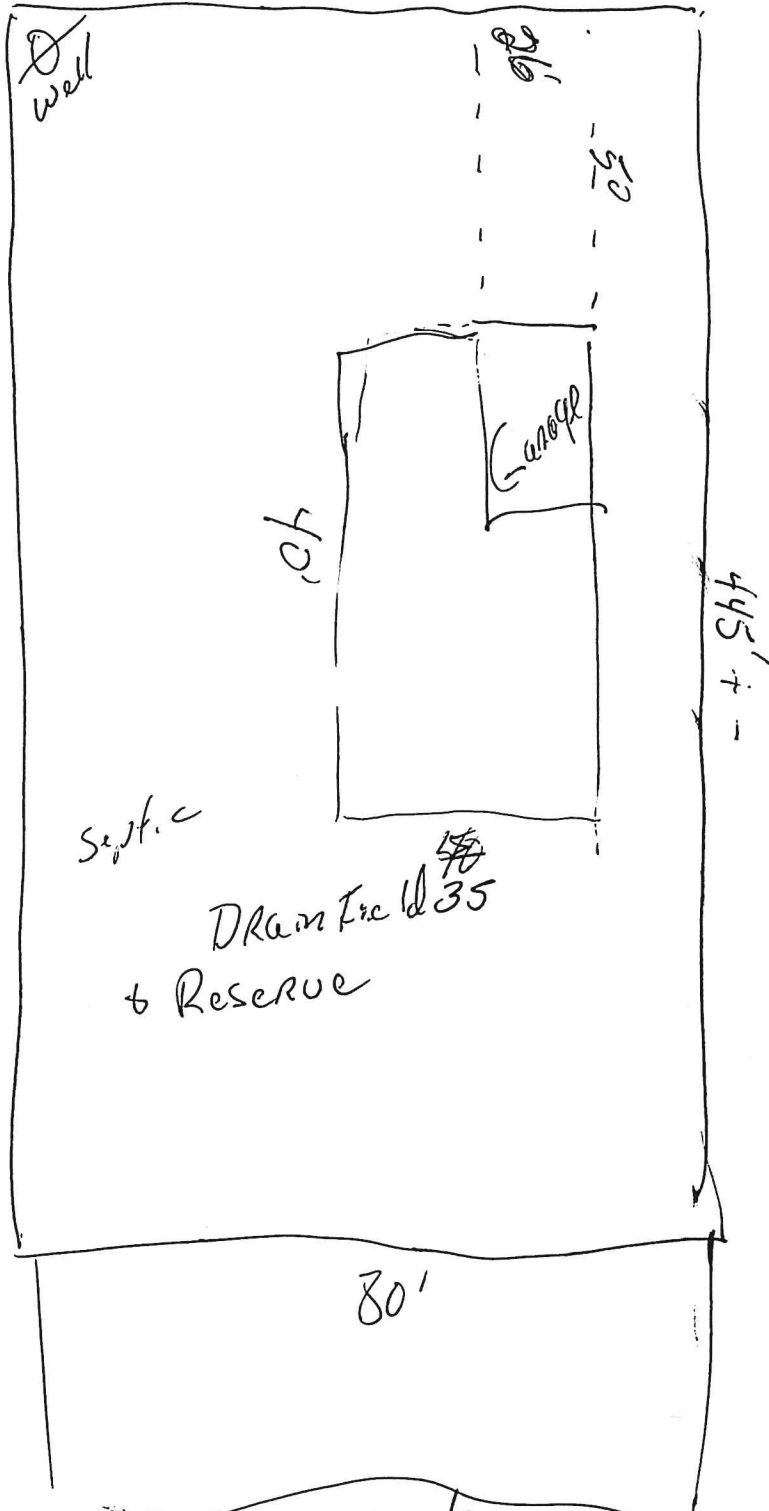
144' Total  
2 @ 72'

LOT 10



JORDON, Louie

80' ±



Ennis Lake



STATE OF MONTANA MADISON CO. I

RECORDED: 10/20/2004 10:20 BOOK: 518 RECORDS PAGE: 546  
Peggy Kaatz CLERK AND RECORDER BY: *P. Kaatz*  
MOONLIGHT BASIN RANCH PO BOX 1369, ENNIS MT 59729

DOC #: 102045

FEE: \$18.00

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

BOOK 518, PAGE 54

TO: County Clerk and Recorder  
Madison County  
Virginia City, Montana

E.Q. #05-1211  
05-07mad

THIS IS TO CERTIFY THAT the plans and supplemental information relating to the subdivision known as **Lake View Subdivision No 1, Lots 4-14, RSR:**

A tract of land located in the E1/2SW1/4 of Section 3, Township 5 South, Range 1 West, Principal Meridian Montana, Madison County, Montana

consisting of eleven(11) lots have been reviewed by personnel of the Permitting and Compliance Division, 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 Plat is made with the understanding that the following conditions shall be met:

THAT the lot sizes as indicated on the Plat to be filed with the county clerk and recorder will not be further altered without approval, and,

THAT each lot shall be used for one(1) single family dwelling, and,

THAT each individual water system shall consist of a new 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 50 to 100-feet, and,

THAT each individual sewage treatment system shall consist of a minimum 1,000 gallon septic tank with an effluent filter 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 subsurface drainfield shall have an absorption area of sufficient size to provide 0.80 gallons per day per square foot, and,

THAT pressure distribution will be required for any drainfield in this subdivision that exceeds 500-lineal feet of distribution pipe or requires more than 1,000-square feet of absorption area, and,

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

THAT no sewage treatment system shall be constructed within 100 feet of the maximum high-water 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 water supply systems, sewage treatment systems and storm drainage systems will be located as shown on the approved plans, and,

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Lake View Subdivision No 1, Lots 4-14, RSR  
Madison County  
EQ#05-1211

BOOK 518, PAGE 547

THAT plans and specifications for any proposed sewage treatment 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, and,

THAT all sanitary facilities must be located as shown on the attached lot layout, and,

THAT the developer and/or owner of record shall provide each purchaser of property with a copy of the Plat, approved location of water supply and sewage treatment 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 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.

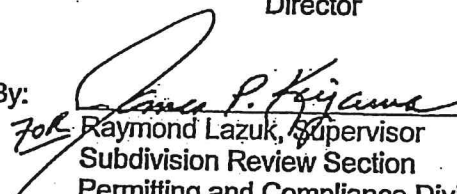
Pursuant to Section 76-4-122 (2)(a), MCA, a person must obtain the approval of both the reviewing authority under Title 76, Chapter 4, MCA, and local health officer having jurisdiction, before filing a subdivision plat with the county clerk and recorder.

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

DATED this 28<sup>th</sup> day of September 2004.

Jan P. Sensibaugh  
Director

By:

  
Raymond Lazuk, Supervisor  
Subdivision Review Section  
Permitting and Compliance Division  
Department of Environmental Quality



Owner's Name: Joe Vujovich



LAKE VIEW SUB. No. 1, LOTS 4  
E 1/2, SW 1/4 & NW 1/4 SE 1/4 S3, T5  
MADISON COUNTY

⊙ = 10' Test Pit

W 100' → = PROPOSED WELL & 100' RADIUS

⊙ = Perc Test

PROPOSED DRAINFIELD & REPLACEMENT & 100' MIXING ZONE

