

Septic System Permit

Flathead City-County Health Department

Environmental Health Services

1035 1st Avenue West, Kalispell, MT 59901

Phone: (406) 751-8130 / Fax: (406) 751-8131

Permit Number

18- 8660N

Site Eval Receipt:

17-2259

Date Issued:

06/11/18

Zone:

1

Date Recorded:

10/2/2017

1. Legal Description: Co. Assess. Tr.

Subdiv. Name: FOYS LAKE EST

COS #:

Name/EQ:

Property Address: 140 GRANITE HILL RD KALISPELL MT 59901

Sec 22

Twp 28

Rng 22

Lot: 8

Block:

Parcel Size:

12.05 acres

2. Legal Property Owner Justin & Ann Sorenson

Address and Phone 140 Granite Hill Dr, Kalispell, MT 59901

3. Authorized for: New

Existing Structure:

4. Structure: Proposed Structure Conv. Single Family

Specify:

5. System Use: Individual

6. Occupancy Type: No. of Bedrooms #: 1

Other Permits:

7. Water Supply: Individual

Public:

8. Nitrates:

Source: WELL

9. Soil Type: Gravelly to cobbly silt

How Determined: Submittal

10. Depth to Groundwater Table/Bedrock: > 84 inches

How Determined: Submittal

11. Classification: 1 Septic Tank Size (gal-min): 2000/500 Absorption Area (sq ft): 1083

Permit Fee: \$275.00

12. Drainfield Description:

This system shall be installed in accordance with applicable Flathead City/County Health Department, (FCCHD), regulations and the design prepared by Dallas Gray, which was approved by FCCHD on 5/30/18. Any changes from the approved design must be approved by the designer and FCCHD prior to modification of the project.

SPECIAL NOTES:

The installer and a representative from FCCHD must be present for the inspection and clear-water pump test. If the system was designed by a professional engineer, a representative of that office must also be present. Minimum well separations = 50 feet to solid lines and septic tank and 100 feet to drainfield.

Pump and alarm must be on separate electrical circuits.

The first five feet of forcemain out of the pump chamber must be schedule 80 pipe.

Maximum trench depth 36 inches.

System shall not be covered or backfilled until specifically authorized by FCCHD.

Use at least 433 lineal feet of Standard Rock & Pipe in 3 foot wide trenches.

Approved design report and layout sketch are attached. No kitchen in the accessory building.

6/1/2018

Christie Bond, R.S.

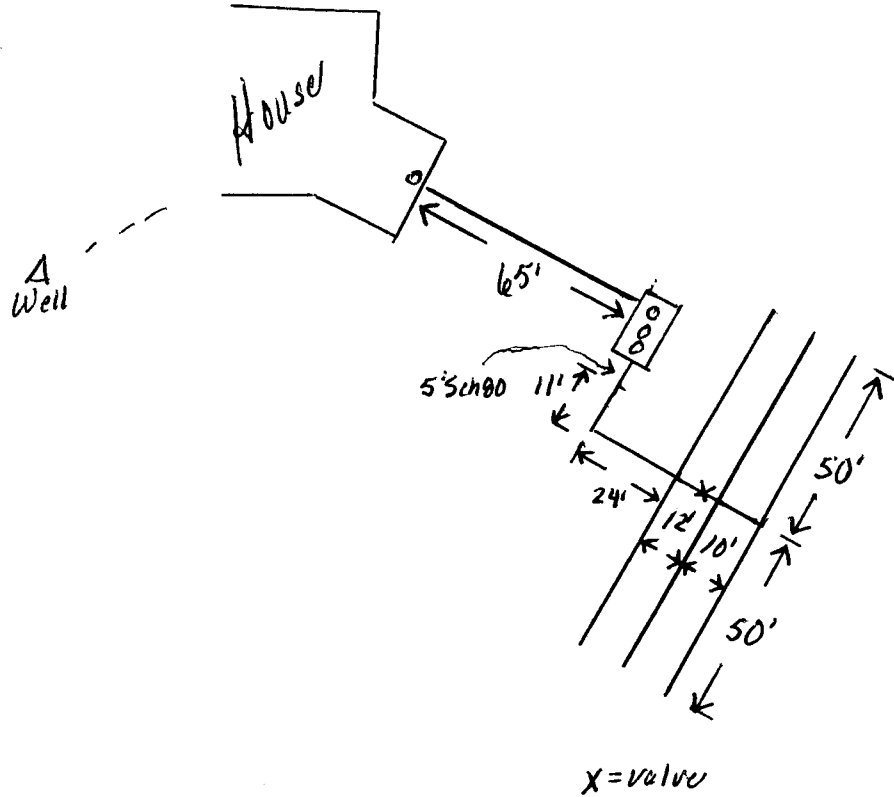
Date

Signature Authorizing Approval of Permit

* These requirements establish the MINIMUM STANDARDS for this septic system installation. The permit will be voided and declared invalid if the system is not installed within 12 months. The issuance of this permit authorizes construction of the septic system and requires the installation comply with the FLATHEAD COUNTY REGULATIONS FOR SEWAGE TREATMENT SYSTEMS (FCRSTS). The permit will be void if the system is not utilized as intended within three (3) years of installation. The property owner is responsible for operating and maintaining the system in accordance with FCRSTS. Failure to comply with these regulations may result in revocation of this permit. This permit does not constitute a design and does not bind or obligate this office to guarantee the performance of the system. This permit shall be given to the installer prior to construction. The owner shall give 48 hours advance notice for the required inspection of the system. Please call 751-8130.

Layout

NA



GPS Location: North 48° 10' 08.1663" Deg. West 114° 22' 31.9194" Deg.
 Water source developed at time of inspection? YES NO Distribution YES NO

Disapproved/Date _____ Comments _____

Approved/Date 6/15/18 Comments 2000/500 Glacier tank w/ Liberty 290 pump producing 6 1/2' squirt over 3' wide gravel trenches

Inspectors Signature Bruce Gunderson Name of Installer/Phone Dallas Gray 261-8204