# LINCOLN COUNTY HEALTH DEPARTMENT
## ENVIRONMENTAL HEALTH
## WASTEWATER TREATMENT AND DISPOSAL SYSTEM PERMIT

Issue Date: 09/13/2023 Expiration Date: 09/12/2024

Property Owner: George and Patricia Sargent

Mailing Address: [redacted]

Telephone: [redacted] E-mail: [redacted]

Installer: Terry Oedewaldt License #: 2

*Approved Work:* (Check One) ☐ New Installation ☒ Existing System

☐ Replace Drainfield ☐ Replace Tank ☒ Extension

Describe: Installation of additional 500gallon tank and additional 100' lateral.

*Parcel Description:*

Legal: UPHAM BEACH, S32, T29 N, R33 W, LOT 8E&8W, 1.4547 ACRES

Property Address: 18442 Bull Lake Rd. Troy, MT 59935 Assessment Code: 6202

DEQ COSA: EQ Date:

*Approved Design Criteria: Installation of additional 500gallon tank and additional lateral @ 100' for a total of three laterals @ 100' and 1500/500 gallon tank for a 4 bedroom house.*

# of Bedrooms: 4 Septic Tank Size: 1500/500gallon Trench Width: 24"

# of Laterals: 1 + 2 existing, 3 total Length of Laterals: 100' Trench Depth: 24"-36"

**SYSTEM MUST INCLUDE INSTALLATION OF EFFLUENT FILTER AT SEPTIC TANK OUTLET!!**

*Special Instructions: Install system according to the COSA, lot layout, the Lincoln County Wastewater Treatment and Disposal Regulation, and Circular DEQ-4. It is the installer's responsibility to ensure that all required horizontal setbacks are met. CHANGES MUST BE PRE-AUTHORIZED BY THE DEPARTMENT.*

**Issued By:** *Robin Blumberg, SIT*

**NOTICE: The Department must be notified at least 3 business days (72 hours) prior to backfilling the system. Call 406-283-2442. Any system not inspected by the Department or its designated representative prior to closure is an illegal installation in violation of Lincoln County Health Board Regulation Ch. 3. Illegal installations may result in fines and/or requirements to remove or reconstruct the system.**

Closure Statement:

*This system is in compliance with the approved design criteria and Lincoln County's Wastewater Treatment and Disposal Regulation.*

*Signed:* _____ *Date:* 11/1/23

____ Lincoln County Health Department (LCHD) ✓ Licensed Installer w/ approval of LCHD

***DISCLAIMER***

This permit is not a guarantee by the Department that the system will function properly for a prescribed period of time.

SV

BURKHART 11/1/23

LOCATIONS:

| | A | B |
|---|---|---|
| INCET | 20'6 | 13'6 |
| DIVIDER | 24'8 | 20' |
| FILTER | 28' | 24' |
| PUMP | 31'2 | 28' |

