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

Permit #24-816

Issue Date: 09/24/2024 Expiration Date: 09/23/2025

Property Owner: Cody Buller

Mailing Address: [redacted]

Installer: Bubba Persson License #: 197

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

☐ Replace Drainfield ☐ Replace Tank ☐ Extension

Describe: Installation of new pressure dosed system to replace failing system for 4 Bedroom Single Family Dwelling.

Parcel Description:

Legal: CRYSTAL LAKES UNIT 1, S19, T35 N, R25 W, LOT 47, ACRES 0.495, CS 3645

Property Address: 44 Forest Loop, Eureka, MT 59917 Assessment Code: 816

DEQ COSA: EQ# 27-78-K1696 Date: 01/30/79

Approved Design Criteria: Installation of new pressure dosed system for failing system for 4 Bedroom Single Family Dwelling with 3 Laterals @ 68' with reduction for chambers.

# of Bedrooms: 4 Septic Tank Size: 1500/500 gallons Trench Width: 36"

# of Laterals: 3 Length of Laterals: 68' 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. Reduction given for chambers. 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, R.S.

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:

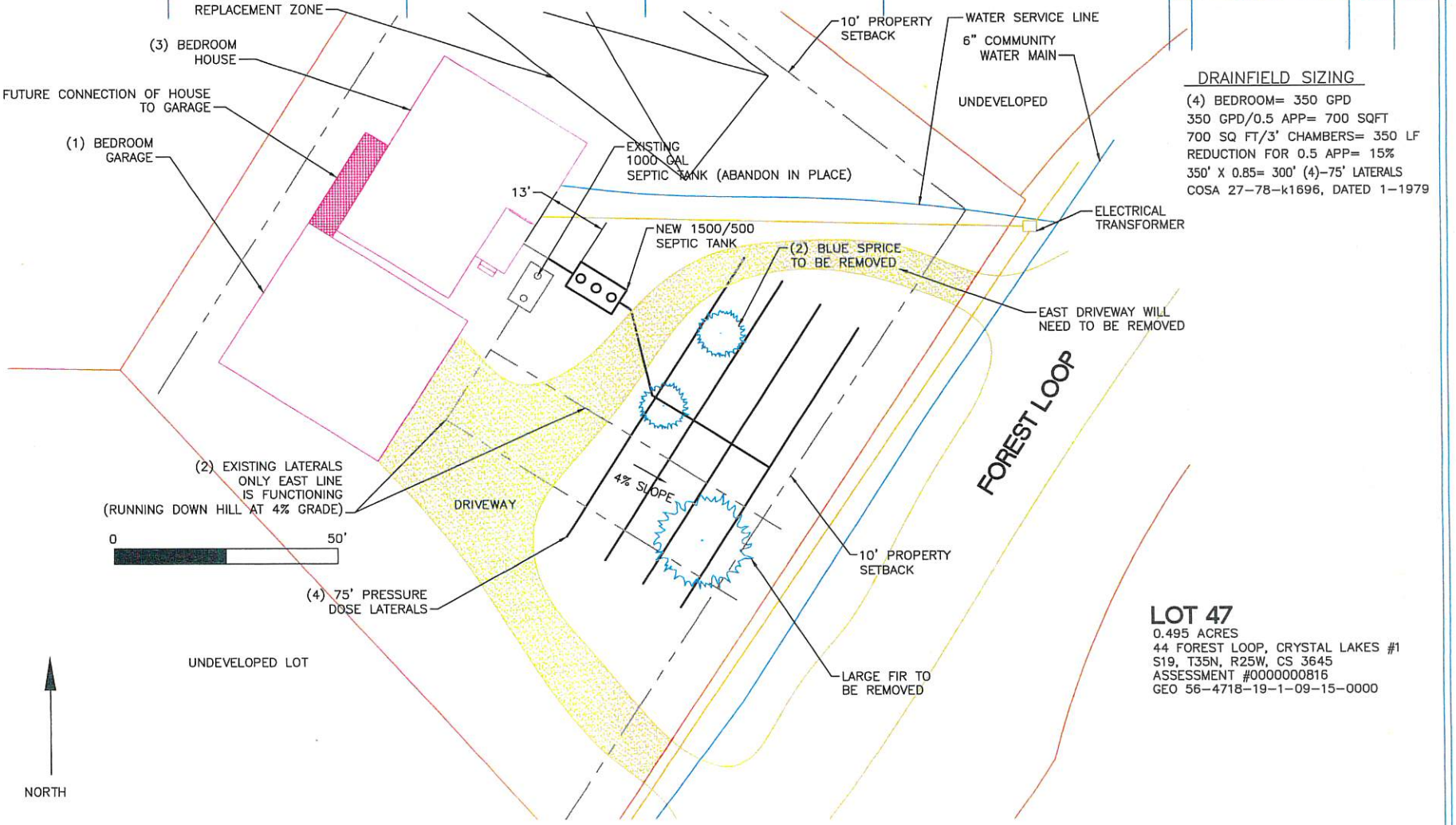
This system is in compliance with the approved design criteria and Lincoln County's Wastewater Treatment and Disposal Regulation.

Signed: Robin Blumberg *Date:* 9/30/24

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

This permit is not finalized until the system is inspected and the closure statement is signed.

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



REV	DESCRIPTION	BY/DATE	APRD/DATE

DRAINFIELD SIZING

(4) BEDROOM= 350 GPD
350 GPD/0.5 APP= 700 SQFT
700 SQ FT/3' CHAMBERS= 350 LF
REDUCTION FOR 0.5 APP= 15%
350' X 0.85= 300' (4)-75' LATERALS
COSA 27-78-k1696, DATED 1-1979

LOT 47

0.495 ACRES
44 FOREST LOOP, CRYSTAL LAKES #1
S19, T35N, R25W, CS 3645
ASSESSMENT #0000000816
GEO 56-4718-19-1-09-15-0000

BULLER REPLACEMENT SYSTEM LAYOUT

COMPANY: KEI	SCALE: 1/16 & NOTED	KOOCANUSA EXCAVATING BULLER SEPTIC							
CONTRACT:	DATE: 9/2024	SEPTIC LOCATION							
VERBAL		SCHEMATIC/DIAGRAM: 9/9/24							
PLOT FILE: PML-0001	WEIGHT: ---	FINISH	DRAWN: C. BULLER	DATE: 9/12/24					
			JOB NO.: 359-001	SHT NO.: 1					

THIS DRAWING IS PROPERTY OF KEI UNTIL CONTRACT HAS BEEN SECURED BETWEEN OWNER & KEI IT CAN NOT BE SUBMITTED TO ANY OTHER PARTIES WITHOUT WRITTEN APPROVAL FROM KEI MANAGEMENT

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