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

Issue Date: 06/25/2022 Expiration Date: 06/24/2023

Property Owner: Mike Ramsay

Mailing Address: [redacted]

Telephone: [redacted] Email: [redacted]

Installer: Nathan Ramsay License #: 179

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

☒ Replace Drainfield ☐ Replace Tank ☐ Extension

Describe: Install four 50' laterals, standard trenches, gravity flow, per COSA

Parcel Description:

Legal: S12 T36N R27W, Little Creek Acres Lot 1

Property Address: 123 Little Creek Rd, Eureka Assessment Code: 11281

Approved Design Criteria:

# of Bedrooms: 2 Septic Tank Size: 1000 gallons Drainfield Size: 400 square feet

# of Laterals: 4 Length of Laterals: 50 feet Trench Depth: 24-36 inches

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

Special Instructions: Install system according to the lot layout, the Lincoln County Wastewater Treatment and Disposal Regulation, and Circular DEQ-4. ANY CHANGES MUST BE PRE-AUTHORIZED BY THE DEPARTMENT.

Issued By: *Kathi J. Hooper, 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:

I, _____, have inspected this system and found it to be in compliance with the approved design criteria and Lincoln County's Wastewater Treatment and Disposal Regulation.

Signed: _____ *Date:* _____

_____ 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.

Install check list

Date_____

Address 123 little creek road

Sent app_____

Owner Mike Ramsay + nathan Ramsay

Onsite _____

Contact # [redacted]

Permit _____

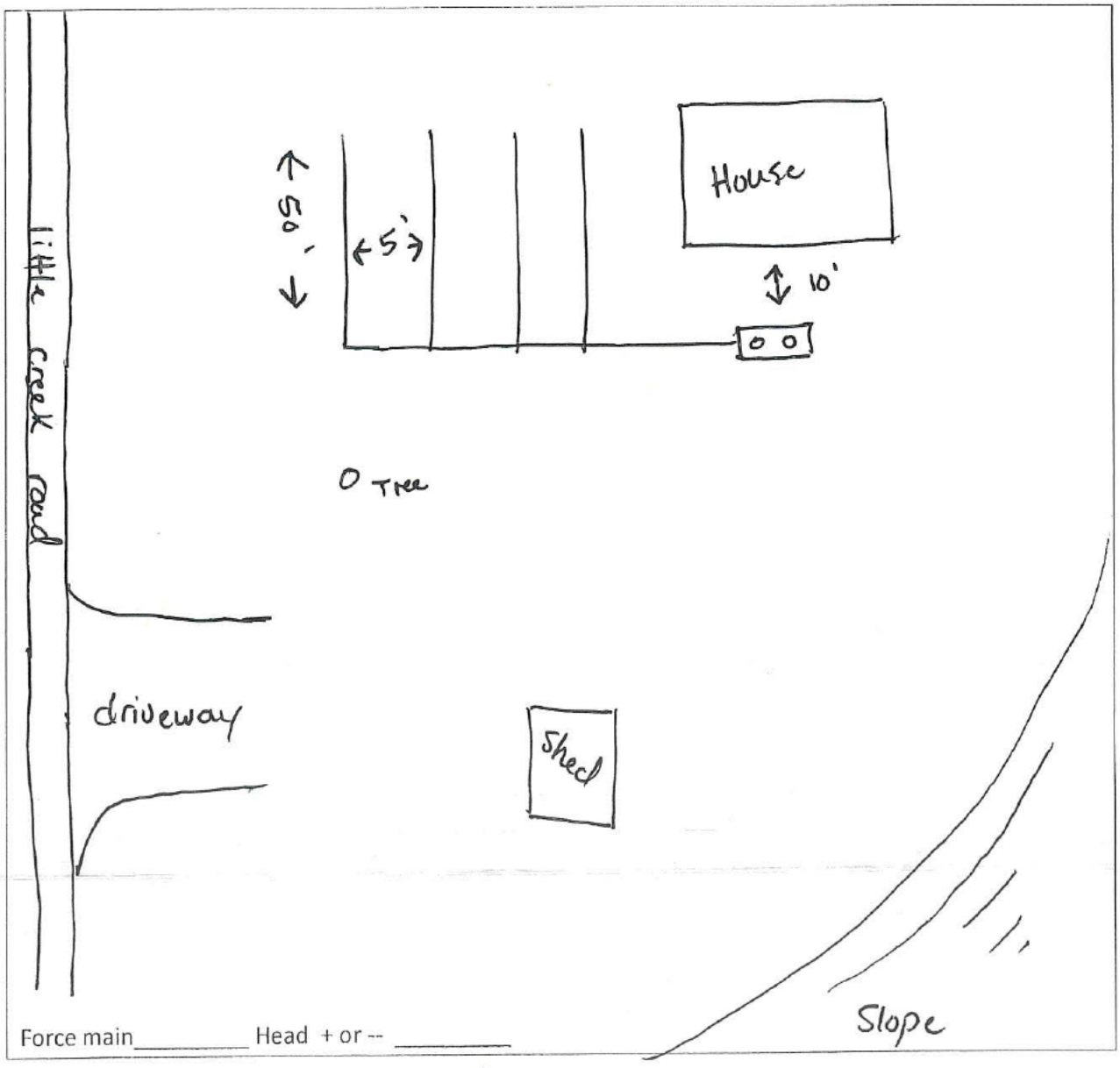
Email address [redacted]

Estimate _____

# of bedrooms 2 # of Structures 1 Acres 15.6 Type of system gravity

Property lines	Power lines	Water line	Utility lines	Structures	Fencing	
Parking areas	Driveways	Sloped area	Surface water	Flood areas	Trees	Well

New install North Replacement



Force main_____ Head + or -- _____

Property lines over 10'
well is over 500' away