

LINCOLN COUNTY
DEPARTMENT of ENVIRONMENTAL HEALTH
Wastewater Treatment and Disposal System Permit Application
For Connection To
An Approved Multi-User, Community or Public System

Property Owner: _____ c/o: _____

Address: _____

Telephone: _____(Home) _____(Work)

Signature: _____

Connection Installer: _____ Affiliation/License No.: _____

Proposed Work: (Check One) _____ Direct Connection to Main
_____ Grinder Pump Connection to Main _____ Effluent Lift Tank Connection to Main

Number of other sewer connections on lot or parcel: _____

Parcel Description:

Legal: _____

Address or Location: _____

Size or Dimensions: _____

Proposed Use: _____

Number of Bedrooms (Home) _____

Maximum Discharge (Business) _____ gallons/day

Construction Approval From HOA Included: _____ Yes _____ No _____ N/A

Parcel/Wastewater System DEQ health approval data:

Title of Approval: _____ Date: _____

Maximum Wastewater Discharge Allowed for parcel: _____gallons per day

Proposed Design Criteria:

Wastewater flows: _____ gallons per day Sewer Line Depth: _____ inches

Type of connection: _____ Other Components: _____

Permit Fee of \$200.00 must be included with this Application

Make Checks Payable to: **Lincoln County**

Additional Fees will be charged for any requested site visit, at the rate of \$150.00 per visit.

SITE PLAN

A lot layout must be drawn on an 8½ x 11" sheet showing the locations of the following features:

1. Existing and proposed sewer main connections, wastewater lines, cleanouts, lift tanks, pump stations, and any other system components.
2. Existing and proposed water supplies and distribution lines.
3. Lot boundaries, existing structures, future building sites, roads, parking areas, easements, and underground cables and lines.
4. Streams, lakes, ponds, water courses, irrigation ditches and swamps.
5. Designated 100 year flood zone boundaries.
6. Steep slopes, embankments, ravines, out-croppings, fills and cuts.
7. Zoning restrictions, covenants or other encumbrances upon the property that may restrict connection to the approved wastewater treatment system.
8. Any other natural or artificial feature or restriction that may influence the design and location of connections to the system. The lot layout must be in scale or have critical distances labeled. Additional information may be required by the County Sanitarian if it is deemed necessary to ensure compliance with requirements for connection to the approved wastewater treatment system.

The applicant may use the reverse side of this sheet to draw the lot layout.

Submit this application to:

DEPARTMENT OF ENVIRONMENTAL HEALTH
418 Mineral Avenue
Libby, Montana 59923

Date Received: _____ Approved: Yes No

Reason for Disapproval: _____

LOT LAYOUT