Permit #548

BEAVERHEAD COUNTY ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT

P6-2/6/95 548-960

COMPLETED

Beaverhead County Environmental Health Department

2 South Pacific---CL Box #7 Phone: (406) 683-4868 Dillon, Montana 59725 Permission is hereby granted to install an on-site wastewater treatment system on the property owned by BOCCAND CHUPBRIC - RED POILE RU PARK and located at: 505 Sausrt Wrst ROAD

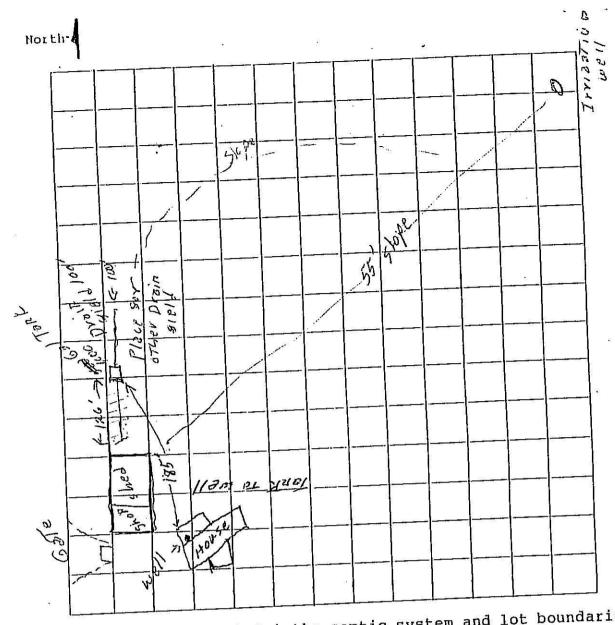
SWILL PROPERTY ADDRESS 20 Section, Township 105, Range 10 6, of Beaverhead county, in the —— Montana. This system shall be installed in accordance with current Department rules governing the on-site treatment of wastewater, and the minimum construction requirements and special requirements provided for in this permit. This permit is issued, based on the information provided in the permit application. If any of this information is found to be incorrect, or if the system is not installed as provided for, this permit shall be rendered null and void. Type and size of system: 1000 gallou Septin Touk
500 [Meal Feet of Daintiell in 5 [afree 15 -500 Libert Fort INSTALLER: 50/4 _____Phone No.: _____

INSPECTION:

1. A final inspection or specified written and photographic documentation is required prior to covering the completed system. The applicant or contractor shall notify the Health Officer or his designee not less than eight (8) working hours prior to completion. If the inspection cannot be made within forty-eight (48) working hours of notification the owner may cover-up the system without final inspection; however written and photographic documentation of the installation is still required.

OFFICE USE ONLY ATTACH PERC RESULTS, SCS SOILS DATA AND PROPERTY DESCRIPTION FROM CLERK AND RECORDER (DEED, SURVEY)
THERE IS A SEPTIC PERMIT FEE OF \$45 FOR ALL NEW SEPTIC SYSTEMS APPLICATION FOR ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT
Beaverhead County Environmental Health Department 2 South Pacific
Dillon, MT 59725 Phone: 683-4860

CONSTRUCTION OR MODIFICATION OF A SEPTIC SYSTEM SHALL NOT TAKE PLACE UNTIL A PERMIT IS ISSUED TO BE COMPLETED BY APPLICANT Applicant's Name: Rolland E. on CAROLS Campbell Applicant's Mailing Address: 505 SUNSET West Rd Applicant's Phone: Home 406-276-3555 Work_ Address of/ Location of Septic System: Dame as above Property Legal Description: _____1/4 Section 20 Township 10.5 Range 10 w Subdivision Name & Lot Number (If applicable): #12 SunseT wes 7. Property Size:____ If smaller than 20.00 acres in size: Year property survey was filed: War 15 74 If survey filed after July 1, 1973:
Year of sanitary restriction removal: b. Certificate of Approval number:_ Minimum absorption area required: (CHECK WITH YOUR REALTOR, THE COUNTY SANITARIAN OR THE COUNTY CLERK AND RECORDER'S OFFICE IF YOU DO NOT HAVE THIS INFORMATION AVAILABLE) Rolland F. Campbell Installer's Name:__ 8. Installer's Phone: 406- 276-Type of system to be installed: 10. New Replacement If Replacement: Tank Only Drainfield Both Extension Alternative/Experimental a. If replacement system: Year failing system installed_ Treatment system to serve: Single family dwelling Mobile Home/Modular Home Multi-family dwelling (# of units) 12. RESIDENTIAL: Number of bedrooms: __ COMMERCIAL: Attach estimated daily sewage flow data and minimum 13. required absorption area. 14. Type of water supply: (1) ell,



15. In the space above, sketch the septic system and lot boundaries. Include the following: all buildings, wells, waterways, drainageways, bedrock outcroppings, areas of high groundwater and ponding. SHOW DIRECTION OF SLOPE, AND DEGREE OR PERCENT OF SLOPE IN DRAINFIELD AREA. LABEL DISTANCES OF THE SEPTIC SYSTEM FROM WELLS, WATERWAYS, HOUSES, AND PROPERTY LINES. SHOW WHERE A 100% REPLACEMENT DRAINFIELD CAN BE LOCATED in the event of the original system's failure.

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16. is	1/4	M	ule	<u>/</u>		•		stream,		700 S - V		+ahle	is	hiah

17. A. Do you have reason to believe that the water table is high (within 6 feet of ground surface during highest period of year:

(MICHIAN	YES	X	NO
		feet from gr	ound surface.
If yes, est	for locating proper	rty: Red Ro	ck exit
18. Directions	for locating proper	miles 5. 1/2/	nile
1-15 = 37	1 NW.	yruce	
			bne ophologi

19. The above information is true to the best of my knowledge and I understand that if any of this application is found to be untrue, my application and permit will not be valid. I further understand that inspection and approval of the above septic system does not constitute assumption by the Department or its employees of liability for the system's failure. The property owner, shall be responsible for the system's failure of the system and for abatement of any nuisance arising from its failure.

SIGNATURE OF APPLICANT_	Rolland E. Campbell	DATE:	2-3-95
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APPLICATION FOR ON-SITE WASTEWATER TREATMENT, SYSTEM PERMIT
ApplicantsName: ROCAND CAMBRICC
PART II. TO BE COMPLETED BY SANITARIAN
Application complete? Yes V No Specify
On-site visit required? Yes V No Comments Trest Plf-
Site Simafor
Depth to seasonally high groundwater <u>OK</u> How verified <u>TEST Part</u>
Depth to bedrockO/CHow verified7c>f Prf
Site characteristics
Slope at drainfield <4 % Slope at replacement site <4 %
Is there room for a 100% replacement field: Yes No
List any site problems and mitigation measures:
Percolation test results (if applicable):minutes/inch
SOIL PROFILE DESCRIPTION: SKETCH APPROVED SYSTEM LAY OUT
and to the total
Too he to the test of the second
System requirements Kristing System Tauk - 500 Likeal Feet Dt in 2 Foot with Franch 45 per WDB 4 - 100 / Lot PAGES FOR DENIAL
APPLICATION APPROVED DENIED BASIS FOR DENIAL
AFFIICATION MITROVED
APPLICANT'S OPTIONS AFTER DENIAL:
AFFIICANI D OTTONO METER DECISION
Reviewed by: Date:

PART III. TO BE COMPLETED BY INSTALLER AND SANITARIAN	l Ingnoglion
TOTAL MANY	Inspection Results
Distance from nearest water source 185 (50 ft. min.)	Actual Zoo +
Distance from foundation 126 (5 ft. min.)	Actual NA
Size 5000° gallons	OK /000
Material /" to " except & Cliris	OK Plastre
Tank level: baffles: inlet & outlet caulked.	OK
Slope of inlet line: 1/4 inches/ft. (1/8"/ft. min.)	Actual 1/4
Slope of outlet line: 1/4 inches/ft. (1/8"/ft. min.)	All the state of t
DISTRIBUTION BOX? YES YES NO	PDF-SEED W
Box level; inlet & outlets sealed.	OK
Outlets same height from bottom.	OK
LIFT STATION? YES YES NO	Actual No
5ho	
	200
Distance from nearest water source /85' (100 ft. min.)	Actual NA
Distance form foundation 720 122	Actual 900
Total 100 lineal feet of perforated pipe Distance between lines (min. 8 ft. on centers)	Actual 6
Tongth of longest line (200 (100 ft. max.)	Actual
Type of filter material: /" rock	OK
a of filter materials.	l OF
Under pipe: 6" (6" min.) Over pipe: 6" (2" min.)	OK V
Ends of laterals capped.	OK V
Laterals level *********************************	******
TARRAM GUOVENO LOCATION AND STEE OF SYSTEM AS INSTALLED	0:
(Locate the septic tank with distances from two (2) perm	anent features)
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75	
SHed: - <108 > = <100'	>
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INSPECTOR'S COMMENTS: Seasonal Use	4
INSPECTOR'S COMMENTS:	- N
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· · · · · · · · · · · · · · · · · · ·	
This septic system was approved for closure/cover-up on	

STATE OF MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY CERTIFICATE OF TRAILER COURT APPROVAL (Section 76-4-101 through 76-4-131, and 50-52-101 through 50-52-302, MCA 1979)

TO: Carol & Rolland Campbell 505 Sunset West Road Dillon, MT 59725

No. E.S. 1-95-T1-22 291K

THIS IS TO CERTIFY THAT the plans and supplemental information relating to the recreational vehicle park known as Red Rock RV Park consisting of five (5) spaces, located in Beaverhead County, Montana, have been reviewed by personnel of the Water Quality Division, and,

THAT the documents and data required by Section 76-4-101 through 76-4-131, and 50-52-101 through 50-52-131, MCA 1979 and the rules of the Department of Environmental Quality made and promulgated pursuant thereto have been submitted and found to be in compliance therewith, and,

THAT the approval of the plans of said recreational vehicle park is made with the understanding that the following conditions shall be met:

THAT the RV space sizes as indicated on the plans to be filed with the county clerk and recorder will not be further altered without approval, and,

THAT the multiple family water system and sewage disposal system will be provided by Red Rock RV Park, and,

THAT the subsurface drainfield shall have an absorption area of 475 lineal feet of (2 feet wide trench) per disposal trailer space, and,

THAT the bottom of the drainfield shall be at least four feet above the water table, and,

THAT no sewage treatment system shall be constructed within 100 feet of the maximum highwater level of a 100 year flood of any stream, lake, watercourse, or irrigation ditch, nor within 100 feet of any domestic water supply source, and,

THAT plans for the proposed water and individual sewage treatment systems will be reviewed and approved by the Beaverhead County Health Department before construction is started, and,

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