

PERMIT #: 96-307

old 94-466

MISSOULA CITY-COUNTY HEALTH DEPARTMENT
301 W. ALDER (406)523-4755
SEWER PERMIT AND APPLICATION

OWNER NAME: Alan + Kathy Meyers PHONE: 721-2211

OWNER ADDRESS: 428 N Grove ZIP: _____

CERTIFIED INSTALLER: Must be certified

LEGAL DESCRIPTION: NE 1/4 NE 1/4 T 13 R 19 S 19

* ADDRESS OF SITE: N. Grove

CERTIFICATE OF SURVEY #: _____ SUBDIVISION: Cobbin Dinsmore Orchard Homes

LOT: 46 BLOCK: _____ TRACT: _____ SIZE OF PARCEL: 4.5 acres

GENERAL AREA NAME: Orchard Homes

SEPARATION ADEQUATE FOR:
(INFO SUPPLIED BY APPLICANT) (CHECK ALL)

	YES	NO
WELLS >100'	<input checked="" type="checkbox"/>	<input type="checkbox"/>
WATER LINES >10'	<input checked="" type="checkbox"/>	<input type="checkbox"/>
FLOODPLAIN >100'	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SURFACE WATER >100'	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HGW >6', >5', >3'	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BEDROCK >6'	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SLOPE >25% <50% = 2'x (%-25)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PROPERTY LINES, BLDGS >10'	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Special Conditions and Other Information

* SANITARY RESTRICTIONS ON LOT?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
* ANY EXISTING SEPTIC SYSTEMS?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
UPGRADE REQUIRED? <input checked="" type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
* INSIDE OR NEAR FLOODPLAIN:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
* PUBLIC SEWER GREATER THAN 200 FEET:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
* PROPERTY LOCATED IN MWTPSA?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
FOR NEW OR INCREASED USE	
SUBDIVISION PLAT LANGUAGE EXISTS	<input type="checkbox"/>
DEED RESTRICTION FILED	<input type="checkbox"/>
* PROPERTY LOCATED IN S.T.E.P. AREA?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
CITY S.T.E.P. TANK & PERMIT REQUIRED	<input type="checkbox"/>

SOIL TYPE: _____

WATER SUPPLY: _____

TYPE OF SYSTEM TO BE INSTALLED: NEW: _____ REPLACEMENT

SYSTEM SIZING: RESIDENTIAL: #OF BEDROOMS: 2 GAL/DAY: _____

 _____ COMMERCIAL: USE _____ GAL/DAY: _____

APPLICATION RATE (Gal/day or sq.ft./bedroom): 1.2

FROM: PLAT APPROVAL _____; SITE EVALUATION: _____; ENGINEER: _____

SYSTEM SIZE & DESCRIPTION: 1000 Gallon (concrete, STEP, other) septic tank with 125 lineal feet of 24 inch trench drainfield as per site plan attached. Install an 8 inch capped riser from tank to surface. STEPS tank requires manway and lid to be inspected by the City.

SPECIAL CONDITIONS: _____

As purchaser of this permit, I agree to comply with all requirements for installation as described in Missoula City-County Code Regulation #1, State Water Quality Bureau Regulations and special conditions described above. This document does not release me from complying with any other State, Federal or Local regulations including but not limited to zoning, building and floodplain regulations.

This permit is valid for twelve (12) months from date of purchase. Sewage disposal systems must be completed within this time and inspected by the Department prior to covering the system. A copy of this permit is to be on site at all times during construction and inspection of the system. Please use the permit number in the upper right hand corner for reference when you call for a final inspection.

✓ Permit purchaser: [Signature] Date: 8-13-96

Health Authority: [Signature] Date: 8-13-96

SEWER PERMIT CHECKLIST

ALL PERMITS:

SITE PLAN ATTACHED TO PERMIT

HOOK-UP TO MUNICIPAL SEWER IS REQUIRED IF: (CHECK ONE)

- <200' TO PROPERTY LINE IF IN CITY LIMITS CALLED AND REFERRED TO CITY ENGINEERS OFFICE
 <200' TO BUILDING IF OUTSIDE CITY LIMITS DATE _____
 NOT WITHIN 200 FEET OF MUNICIPAL SEWER _____ PERSON CONTACTED

SPECIAL MANAGEMENT AREAS: (see section XV of Health Code)

- LINDA VISTA - Connect to public sewer.
 MWTPSA - IF YES, IS DEED RESTRICTION FILED? YES _____
OR SUBDIVISION PLAT LANGUAGE EXISTS: YES _____
 RATTLESNAKE - ONE SYSTEM PER LOT - 25' VERTICAL & 100' HORIZONTAL SEPARATION FROM VALLEY
 ROMAN CREEK/TOUCHETTE LANE (W 1/2 SEC 27, S 28, E 1/2 S 29, T 15N, R 21W)
(NORTH OF I-90 AND SOUTH OF FRENCHTOWN CANAL) - CONDITIONS MET _____

TYPE OF PARCEL: (CHECK ONE)

- SUBDIVISION FILED PRIOR TO 5/27/61 REQUIRE A SITE EVALUATION. S.E. IN FILE _____ (YES OR NO)
 SUBDIVISION FILED AFTER 5/27/61 WITHOUT LIFTING REQUIRE SUBDIVISION REVIEW. S.E. IN FILE _____
 SUBDIVISION FILED AFTER 5/27/61 WITH RESTRICTIONS LIFTED AND RECORDED
 COS W/LIFTING ON FILE/RECORDED
 COS WITH >20 ACRE EXEMPTION (REQUIRES SITE EVALUATION) SITE EVALUATION ON FILE _____ (YES OR NO)
 COS WITHOUT LIFTING ON FILE (IS USUALLY AN EXEMPTION FOR WHICH NO PERMIT CAN BE ISSUED i.e. AG., CEMETERY, etc.)
 TRACTLAND REQUIRES A SITE EVALUATION. (>5 (BEFORE 1973), >10 (BEFORE 1975), >20 ACRES)

NEW PERMITS:

PLANNING/ZONING PERMIT REQUIRED (CHECK ONE)

- INSIDE BUILDING INSPECTOR ZONE - BUILDING PERMIT APPLICATION REQUIRED
 IN ZONED AREA OR IN OR NEAR FLOODPLAIN - COMPLIANCE PERMIT REQUIRED.
 OUTSIDE BUILDING INSPECTOR ZONE - NOT IN ZONED AREA OR IN FLOODPLAIN.

SIZE OF PARCEL OR PARCELS: _____

- IF <1/2 ACRE, OWNERSHIPS OF CONTIGUOUS LOTS (prior to May 19, 1986)
DETERMINED FROM ASSESSORS OFFICE. (SEE SECTION V(D)(2))

REPLACEMENT SYSTEMS:

HIGH GROUND WATER OR BEDROCK:(CHECK ONE)

- HIGH GROUNDWATER OR BEDROCK AREA - DRAINFIELD, ADSORPTION BED, OR SHALLOW SEEPAGE PIT REQUIRED
 NOT A HIGH GROUND WATER OR BEDROCK AREA

SITE VISIT:(CHECK ONE)

- SITE VISIT REQUIRED TO VERIFY ROOM FOR: 1) DRAINFIELD, ADSORPTION BED OR SEEPAGE PITS 2) GROUNDWATER
3) WELLS 4) ETC.
 SITE VISIT NOT NECESSARY TO VERIFY SOILS, SPACE FOR ADSORPTION AREA, DISTANCE TO WELLS, OR
GROUNDWATER.

SEWER PERMIT AND APPLICATION

FEE \$ 75.00

Owner/Applicants Name Alan + Kathy Meyers Phone# 721-2211

Owner/Applicants Address 428 N. Grove

Certified Installer Must be Certified

Location of Installation: NE 1/4 NE 1/4 T 13 R 19 Section 19

Address of Site N. Grove next to 428 N. Grove

Certificate of Survey # _____ HD # _____

Subdivision Cobbin Dinsmore Orchard Homes

Lot 46 Block _____

Tractland _____

General area name Orchard Homes

Size of Lot or Parcel 4.5 acres

Any existing structure or sewage disposal facilities: Yes No _____

If Yes, Explain: _____

Residential - Number of Bedrooms _____ Commercial _____ gal/day _____

Water supply: Private Public _____ Multi-family _____

Soil Type S/g

Depth to groundwater +6'

Type of system to be installed: New Replacement

System size: From Plat approval _____ From site evaluation # DS

Application rate _____ Gal./square Ft./day

Square feet per bedroom 125

Engineered _____

Description of System to be installed 1000 Gallon Tank and 125 Linear Feet Drainfield in Area Shown

Recommend STEP tank and city inspection of STEP

Special Conditions Replace existing old and tank for old homestead

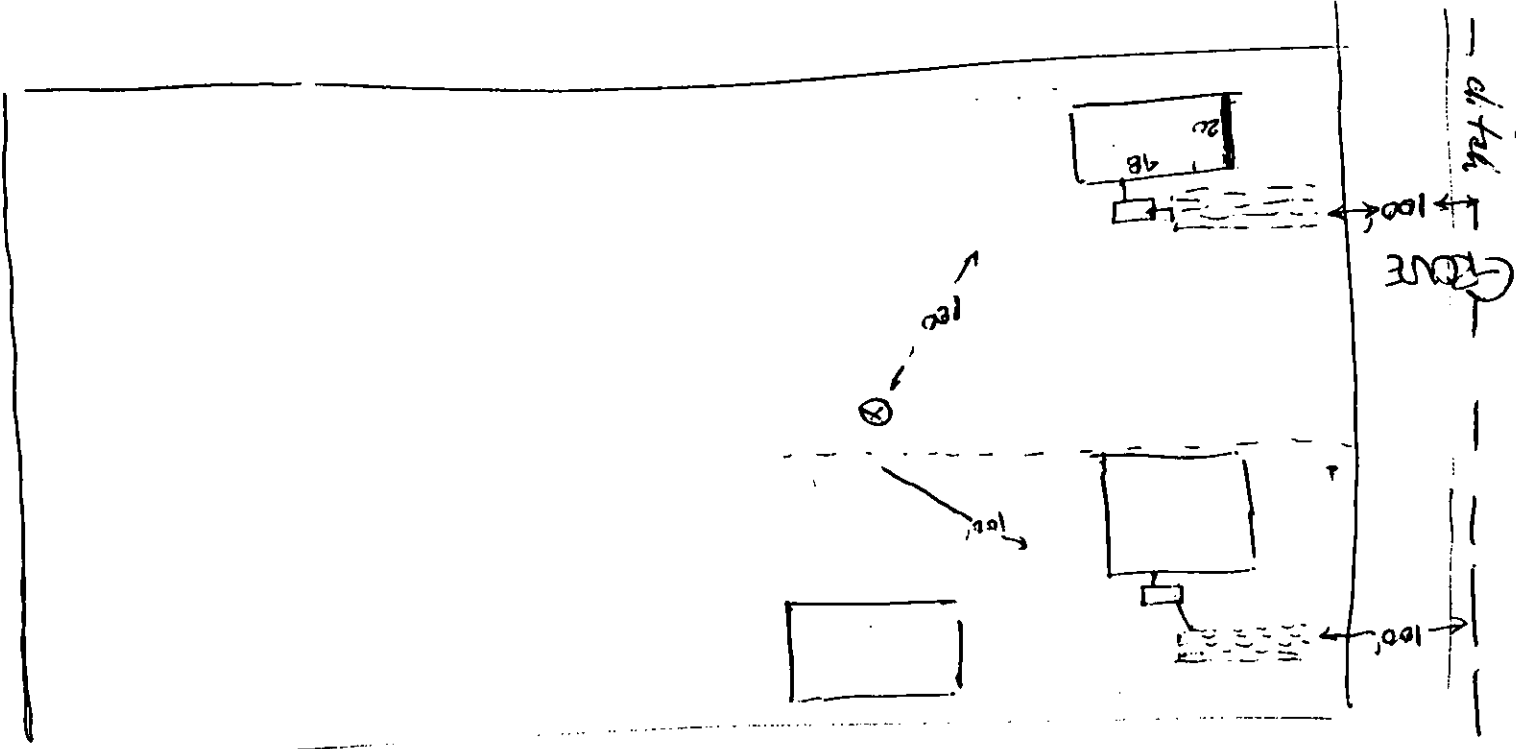
As purchaser of this permit, I agree to install an individual sewer system which meets all requirements as specified in the Missoula County rules and regulations for subsurface sewage disposal systems.

Permit Purchaser [Signature] Date: 8-12-94

Health Authority [Signature] Date: 8-11-94

This permit is valid for 12 months. Construction of the sewage disposal system must commence during this time or the permit is no longer valid. A final inspection by the Department is required prior to covering the installed system. Applicant's copy of the permit must be on-site at the time of inspection. Please use the permit number in the upper right hand corner for reference when you call for a final inspection.

LOT 46 C.D.O.H.
428 N. Grove



THIS INDENTURE, Made the 20th day of June in the year of our Lord one thousand nine hundred and eighty-nine between J. ALAN MEYERS and KATHY MEYERS, husband and wife, of Missoula, Montana parties of the first part and OTTO WEGNER and VIRGINIA WEGNER, of 1108 Bayview Drive, Polson, Montana as joint tenants and to the survivor of said named joint tenants and not as tenants in common, the parties of the SECOND PART. WITNESSETH: That the said parties of the FIRST PART for and in consideration of the sum of Ten Dollars, (\$ 10.00) to them in hand paid by the said parties of the SECOND PART, the receipt of which is hereby acknowledged; do hereby convey, remise, release and forever quitclaim unto the said parties of the second part as joint tenants and to the survivor of said joint tenants and not as tenants in common and to the heirs, and assigns, of such survivor the following described real estate, situated in the County of Missoula State of Montana, to-wit:

Lot 46 of COBBAN AND DINSMORE'S ORCHARD HOMES, a platted subdivision in Missoula County, Montana, according to the official recorded plat thereof. EXCEPTING THEREFROM that land sold to the State of Montana in Book 242 at Page 579 Deed Records and Book 82 at Page 382 Micro Records.

This deed releases all interest acquired by the parties of the First Part in and to the subject property from the date hereof through and including the date of recording, less any portion previously conveyed by warranty deed.

together with all the tenements, hereditaments, and appurtenances thereto belonging, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof; and also all the estate, right, title, interest, dower, right of dower, property, possession, claim and demand whatsoever as well in law as in equity, of the said parties of the first part, of, in or to the said premises and every part and parcel thereof.

TO HAVE AND TO HOLD, all and singular the said premises, with the appurtenances thereto belonging, unto the said parties of the second part as joint tenants and not as tenants in common and to the heirs and assigns of the survivor of said named joint tenants forever.

IN WITNESS WHEREOF, the said parties of the first part have hereunto set their hand and seal the day and year first above written.

Signed, Sealed and Delivered in the Presence of

J. Alan Meyers (SEAL)
Kathy Meyers (SEAL)

_____ (SEAL)

STATE OF MONTANA,

County of Missoula ss.

On this 20 day of June nineteen hundred and eighty-nine before me the undersigned _____ a Notary Public for the State of Montana, personally appeared J. Alan Meyers & Kathy Meyers known to me _____

(or proved to me on oath of _____) to be the person whose name are subscribed to the within instrument, and acknowledged to me that they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year in this certificate first above written.

Ernest J. ...
Notary Public for the State of Montana.

Residing at Missoula My Commission expires May 27, 1990

COPY

18 17
19 20



CORBAN DINSMORE
Lot 46

428 N. GROVE

Existing
HOUSE & BARN

625.52

Fence

46

DAVEWAY

HOUSE 20'x48'

20'
75' →

-1354

331.01

GROVE STREET 60' WIDE

STREET B 60' WIDE

31

32

33

34

35

36

37

38

39

627.46

30

29

20

19

18

17

16

15

14

326.20

28

21

STATE OF
COUNTY OF

ENGINEER
WERE MADE
A CORRECT
IS LAID OUT
STREETS AND
REFERENCE

SUB.
7-15
OF O.
HUN
NOT
COU.

STATE OF
COUNTY OF

CERTIFY T
PLATTED I
AND CERT
TRACT OF L
T
HALF OF T
NORTH HA
OF THE NO
CAUTION

LOT 46 C.D.O.H.
428 N. Grove

