

SANDERS COUNTY

ENVIRONMENTAL HEALTH

Revised Lot Layout Instructions

Facilities in approved subdivisions may be relocated in accordance with ARM 17.36.112(8) Amendments that consist solely of the relocation of previously approved facilities may be made through approval of a revised lot layout document. The approved revised lot layout document must be filed with the county clerk and recorder and a copy must be provided to the department.

Relocating water or wastewater systems MUST comply with applicable statutes, rules, and policies.

The Environmental Health Department reviews revised lot layouts under contract with the Montana Department of Environmental Quality (MDEQ), Subdivision Review Program. Applicants must follow the instructions outlined below.

- ➤ <u>APPLICATION PACKET</u> submit to the Sanders County Environmental Health Department:
 - 1. A brief cover letter explaining the change being requested, and,
 - 2. A completed and signed Sanders County Revised Lot Layout Application, and,
 - 3. A completed and signed DEQ Joint Application Form Part I, and,
 - 4. A proposed Revised Lot Layout showing all requested changes, and,
 - 5. A copy of original Certificate of Subdivision Approval that shows proof the subdivision has been filed with the Sanders County Clerk & Recorder, and,
 - 6. Fees, paid separately:
 - a. \$125/lot payable to MDEQ, and,
 - b. \$5 payable to the Sanders County Clerk & Recorder, and,
 - 7. Any supporting information necessary for the review, and,
 - 8. A water right or DNRC exemption letter must be submitted for all projects, and,
 - 9. Four (4) copies of the final revised lot layout.
- ➤ <u>REVIEW TIME</u> Environmental Health has 30 days to review once all application materials are submitted.
- ➤ <u>APPROVAL PROCEDURE</u> Environmental Health signs each of the four revised lot layouts and sends them to the MDEQ with the application, required supporting documentation, and the \$125/ lot fee. The MDEQ signs each revised lot layout, keeps one for DEQ records, and sends the remaining three back to Sanders County.
- ➤ <u>RECORDING AND DISTRIBUTION</u> Environmental Health files one approved revised lot layout with the Clerk & Recorder's office, keeps one approved revised lot layout in the subdivision files, and mails a cover letter and approved revised lot layout to the contractor/owner.



SANDERS COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

PO BOX 519

THOMPSON FALLS, MT 59873

PH - 406-827-6961 / FAX - 406-827-4388

REVISED LOT LAYOUT APPLICATION

Current Property Owner	Phone	
Mailing Address		
Applicant / Authorized Agent		
Mailing Address		
Authorized Address of Site (if available)		
DEQ Certificate or Subdivision Approval E.Q. #	COS#	
Subdivision Name	BlockLot/Tract/Parcel	
Legal DescriptionSectionTownship	RangeSize of Parcel	
Type & Number of structure(s) proposed: Single Family Dwel	lling Other (describe)	
Unfinished Basement YES NO Total # of Bedrooms	Proposed (+1 for unfinished basement)	
<u>OR</u> gall	lons per day effluent produced	
Owner/Agent signature	Date	
,		
will then require the project be submitted as a <u>rewrit</u> whether your project is eligible for ARM 17.3.6.112 (8),	al is too complicated for the Revised Lot Layout process, which te in accordance with ARM 17.36.112. To help us determine please CHECK one or more of the following proposed changes: aries provided that the new location meets separation	
distances and will not adversely change the quality, quant		
Moving the location of the wastewater treatment s location meets separation distances and site evaluation cr capacity and dependability	system within the lot boundaries provided the new riteria, and the wastewater system is sufficient in terms of	
Submit a DNRC request for determination per ARM	17.36.103 (1) (s) (i) or (ii) for all projects.	
other (describe):		

MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY/ LOCAL GOVERNMENT JOINT APPLICATION FORM

PART I. GENERAL DESCRIPTION & INFORMATION

Name of proposed development: Location:	
City:	_
•	Geocode:
Legal description:1/41/4 of Section	ion Township Range
Type of Review	Type of water supply system
Division of Land, Boundaries Relocated, or Removal of Restrictions Condominiums/Townhomes/Mobile Homes/Recreational Vehicles Rewrite – No Boundaries Changing, Aggregation, Change of Use Modified Site Plan Descriptive Data Number of lots Number of condominiums, townhomes, or spaces Total acreage of lots being reviewed Indicate the proposed/existing use(s) Residential, single family Residential, multiple family Type of multiple family structure (e.g. duplex) Planned unit development Condominium/townhomes Mobile home park Recreational vehicle park Commercial or industrial Other (please describe) Name of solid waste (garbage) disposal site:	Individual well Individual surface water supply or spring Cistern Shared well (2 connections) Multiple-user (3-14 connections & < 25 people) Service connection to multiple-user system Service connection to public system Extension of public main New public system (15+ connections or serving 25+ people) Type of wastewater treatment system Individual wastewater treatment system Shared wastewater treatment system (2 connections) Multiple-user (3-14 connections & < 25 people) Service connection to multiple-user Extension of multiple-user main Service connection to public system Extension of public main New public system (15+ connections or serving 25+ people)
Designated representative, if any (e.g., engineer,	• •
I designatePrint name	ofPrint Company Name
as my representative for purposes of this application.	Lu y
Address:	
	Box, City, State, Zip Code
	Phone:
Owner Name:	
Name: Signature of all owners of record	Print name of owner (s)
Address:	D. C. C. T. C. I
	Box, City, State, Zip Code
Email:	Phone:
Date:	

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Reviewer	App	licant		
Yes Missing NA	Initials	Page(s) in Report	ELEMENT DESCRIPTION	
			<u>General</u>	
			Application form provided & signed by owner, plus contact info for consultant.	
			Filled out fee sheet & check made out to DEQ	
			Completed & signed copy of Part 4 Checklist	
			Vicinity Map Provided	
			Copy of plat or COS (or deed if aliquot parts or proposing Aggregation of lots)	
			4 copies of lot layout sheet(s); Facilities labeled as Existing or Proposed.	
			Copy of any existing COSA for reviewed lot(s)	
			Floodplains shown on drawings & any applicable documentation provided (LOMAs).	
Onsite Wastewater				
			Copy of any existing WWTS permits for reviewed lot(s).	
			Proof of pumping for septic tanks within last 3 years, unless system less than 5 years old.	
			Soil profile descriptions	
			Seasonal high groundwater addressed (results or letter indicating in process)	
			Non-degradation	
			Nondegradation info IF new development proposed, if expansion of existing development proposed, or for change in use (residential to commercial, etc.)	
Onsite Water				
			Copy of any existing well logs for wells on reviewed lot(s), for wells sampled, & for wells used for hydraulic conductivity estimates	
			Information about water quality, quantity & dependability (water tests & aquifer well logs)	
Public Water or Sewer				
			If extensions or connections to existing public water/wastewater proposed, "will serve" letter or copy of current bill from public facility owner if connected	
<u>Stormwater</u>				
	Stormwater drainage report & plans			
Other documents				
			Special Requests - Prior to full design (waivers, deviations, water availability analysis, non-degradation predetermination, etc.)	
			Sage Grouse documentation provided	
			Copy of submittal to DNRC requesting Water Rights review or, if available, review letter from DNRC.	
			Modified Site Plan	
Copy of This checklist AND (circle one)				
COMPLETE LETTER or INCOMPLETE LETTER sent on:				
REVIEWI	REVIEWED BY:AGENCY:			

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