

PERMIT APPROVAL SPECIFICATIONS
Sanders County Environmental Health Department
1111 Main St. Thompson Falls, MT, 59873 * 406.827.6909

Owner information:

<u>Tungsten Holdings Inc.</u>	<u>25,26 21N 28W</u>
Name	S T R
<u>809 Mineral Avenue</u>	<u>10/25/16</u>
Mailing address	Date Submitted
<u>Libby, MT 59223</u>	<u>10/28/16</u>
City	Date Approved
<u>17-033</u>	<u>10/28/17</u>
Permit Number	Expiration Date

Tract 1-E, COS 3067CO, 0.8 miles past pavement of River Road West, Plains
Physical Address

Permit Specifications:

Installation of a gravity wastewater treatment system for a three (3) bedroom living unit.

- 1000 gallon combination septic tank and dosing chamber
- Drainfield per specifications below

Pipe and Gravel:

NA square feet
NA lineal feet

Gravelless Chambers:

400 square feet
200 lineal feet



NA laterals @ NA feet 2 laterals @ 100* feet

Use Rocky Mountain Surveyors design drawings and specifications.

Gravity trenches are 2 feet wide and a maximum depth of 36 inches. Please follow all Sanders County wastewater regulations & State regulations outlined in Circular DEQ 4, 2013 edition. Install as indicated on the approved Lot Layout.

Pre-notification is mandatory 72 hours before backfilling system.



Sanders County Sanitarian

**AS-BUILT SKETCH
AND
STATEMENT OF ACCURACY OF INSTALLATION**

Land owner's name TUNSTEN HOLDINGS INC

Permit number 17-~~030~~ 033

I TERRY CAIDWELL, as the licensed installer or landowner for the following system have constructed or altered the septic system on the parcel referenced by the permit number above.

I do hereby declare that the **EXACT** specifications of the approved permit have been followed. Accompanying this statement is a copy of the county approved lot layout and my as-built sketch. My as-built sketch is included on another sheet of paper. **I understand that it is my responsibility to submit the above within 10 days of the completion of the system.**

INSTALLER'S SIGNATURE Terry Caldwell

INSTALLER'S LICENSE NUMBER SI 08

COMPLETION DATE OF SYSTEM 7-26-17

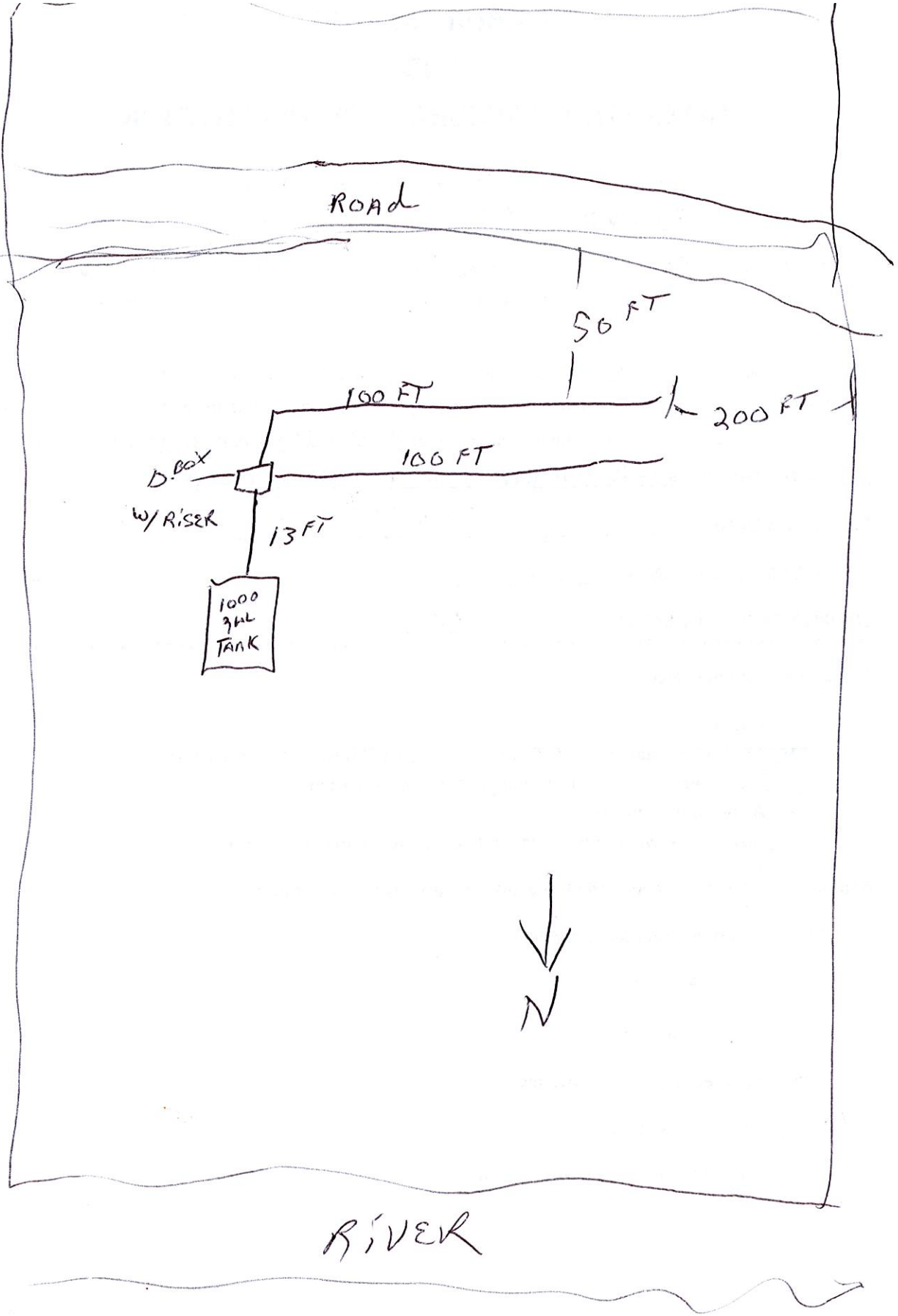
Checklist of as-built sketch:

- ☒ North Arrow
- ☒ Triangular measurements from two corners of house to tank access lid.
- 13 FT Measurement of pipe from tank to D-box or Manifold
- ☒ All parcel boundaries
- ☒ Distance between the system and at least two parcel boundaries

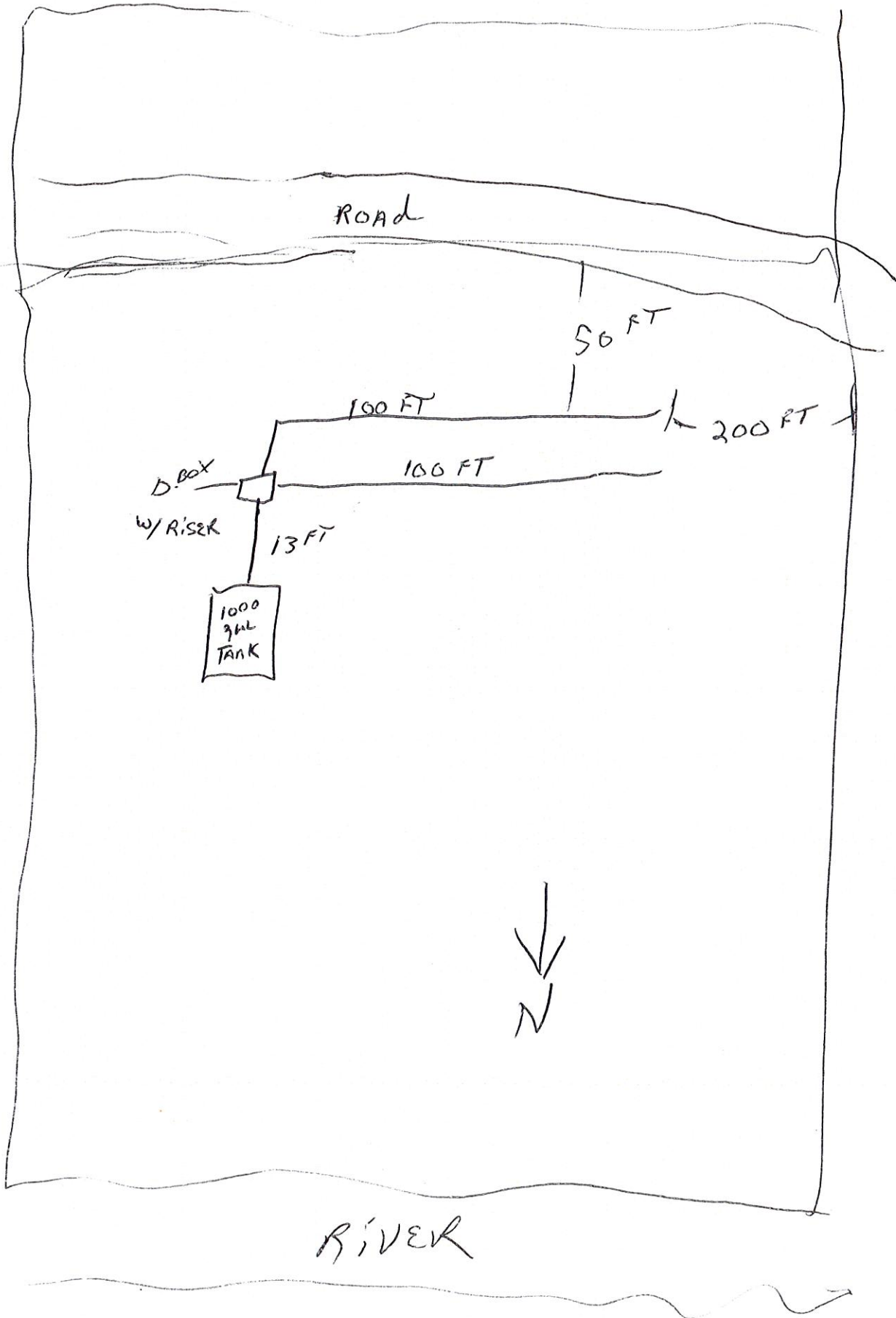
Additional information needed (fill the blanks in with quantitative data):

- 100 FT Length of drainfield laterals
- ____ Pipe & Gravel
- ☒ Infiltrators
- 2 Number of drainfield laterals
- 1000 GAL Volume of septic tank
- ____ Copy of Pump Specs if Pressurized





APPROVED
DATE 7/26/17 INITIAL M



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