

## MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY MUNICIPAL FACILITIES EXCLUSION

Subdivision Name:	Number of lots/parcels/units://_	
Geocode:	ocode: (this can be found at http://svc.mt.gov/msl/mtcadastral)	
Are main extensions necessary to serve the sub for review?YesNo	odivision?YesNo If yes, have plans for the mains been submitted	
How will construction of the facilities be finan-	ced?	
Owner Information:		
Owner(s) Name:		
Print name of owner(s)	Signature of all owners of record	
Address:		
Street	t or PO Box, City, State, Zip Code	
Email:	Phone:	
Consultant Information:		
Company and Address:		
Email:	Phone:	
Eligibility Requirements: All of	the following criteria must be met:	
must review storm water plans.  All the mains necessary to serve the subcowned mains or lift stations make the pro		
The municipality must be a 1 <sup>st</sup> or 2 <sup>nd</sup> clas policy pursuant to Title 76, chapter 1.	s municipality as described in MCA 7-4-111 or covered under a growth	
The project must be <u>one</u> of the following	(check applicable box):	
Previously divided parc Divisions or parcels of I	to review under the Montana Subdivision and Platting Act, or els recorded with Sanitary Restrictions prior to July 1, 1973 or land that are exempt from Montana Subdivision and Platting Act review 3-207 (1) (a), (b), (d), (e), or (f)	

Form continues on next page

Submittal Requirements: All of the following items must be submitted:

Copy of Preliminary Plat, COS, Amended Plat, Unit Declaration or Exemption Certificate. The Plat, COS, An Plat, Unit Declaration or Exception Certificate must contain the exemption 76-4-125 (1)(d)(i), (ii) or (iii), if using item (iii), the Plat, COS, Am Plat, Unit Declaration or Exemption Certificate must also contain the appropriate Platting Act exemption.  Vicinity map showing project location.  Applicable zoning ordinances in effect on file  Copy of growth policy, if applicable on file  \$120 processing fee  Certification:  I hereby certify that I am licensed to practice engineering in the State of Montana, I am employed directly or retained by the municipality providing service and am authorized to sign on behalf of the municipality. In addition, I hereby certify that:  1. The existing water and wastewater systems are in compliance with the provisions of Title 75, chapters 5 and 6, and 2. The water and wastewater systems have adequate capacity to meet the needs of the project, and 3. The municipality has or will review plans to ensure adequate storm water drainage and adequate solid waste disposal.  (Signature of Professional Engineer) (Date Signed)  Montana P.E. Number  PE Stamp	this form, signed by the property owner, <b>and</b> the mo	micipalities representative.
Applicable zoning ordinances in effect on file copy of growth policy, if applicable on file \$120 processing fee  Certification:  I hereby certify that I am licensed to practice engineering in the State of Montana, I am employed directly or retained by the municipality providing service and am authorized to sign on behalf of the municipality. In addition, I hereby certify that:  1. The existing water and wastewater systems are in compliance with the provisions of Title 75, chapters 5 and 6, and 2. The water and wastewater systems have adequate capacity to meet the needs of the project, and 3. The municipality has or will review plans to ensure adequate storm water drainage and adequate solid waste disposal.  (Signature of Professional Engineer) (Date Signed)  Montana P.E. Number	Plat, Unit Declaration or Exception Certificate must ousing item (iii), the Plat, COS, Am Plat, Unit Declaration	contain the exemption 76-4-125 (1)(d)(i), (ii) or (iii). If
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Send to: MTDEQ Subdivisions	Montana P.E. Number	
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		PE Stamp
DO Pay 200004	Send to: MTDEQ Subdivisions	
PO Box 200901	PO Box 200901	

Helena MT 59620-0901