



PERMITTING & COMPLIANCE DIVISION

◆ *Sewer Main* Extension and Replacement ◆

CERTIFIED CHECKLIST

August 8, 2014 Edition

CHECKLIST SUBMITTAL INSTRUCTIONS:

This checklist procedure may be used when the conditions listed below are met. Checklist submittals can only be used for gravity sewer main extensions or replacements subject to review under DEQ-2, Chapter 30. Lift stations, force mains and alternative collection systems are not eligible for checklist review. Construction is unlawful until approval of the checklist is granted by the department, normally issued in a letter to the design engineer submitting the plans and specifications. Use of the main is unlawful until the department receives a certifying letter in accordance with ARM 17.38.101. The department must approve any deviation requests. Normally, complete submittals will be reviewed by the Department within 10 working days. Deviation requests may result in slower turn-around.

Required Documentation: *Checklists submitted without all of the required documentation will be considered incomplete and will not be processed until all of the required information has been submitted.*

1. A certified checklist form signed and stamped by the professional engineer responsible for the design of the project. All sections of the certified checklist must be completed.
2. Three sets of plans and specifications stamped and signed by the professional engineer responsible for the design of the project.
3. An engineering report addressing the design capacity and flow requirements in Section 32 of Circular DEQ 2. The engineering report must include all applicable analysis and supporting assumptions.
4. A map showing the location of the proposed sewer main in relation to the rest of the sewer collection system the water distribution system.
5. Owner certification that a professional engineer will be retained for construction inspection and will certify completion in accordance with the approved plans and prepare as-builts for submittal to the department within 90 days of project completion.
6. An approval letter from a professional engineer (other than the design engineer) who is employed directly or retained by the owner of the public wastewater system providing service to the proposed sewer main. The letter must state the system approves of the extension and the system has adequate capacity to accommodate the extension. Signature on the Municipal Facilities Exclusion checklist does not fulfill this requirement. This approval letter is not required if:
 - a. The proposed sewer main extension is part of a wastewater utility master plan previously approved by the department within the past ten years, and the department concurs the master plan appropriately covers the extension. A copy of the applicable portion of this master plan must be submitted with the checklist; or
 - b. The sewer main replaces an exiting main and is equal to or greater than the existing pipe. An approval letter from the owner of the system providing service must be submitted with the checklist.

The fee for processing main extensions can be found in ARM 17.38.106.

Completed checklist submittals may be mailed to: Department of Environmental Quality, Permitting & Compliance Division, Community Services Bureau, Metcalf Building, P.O. Box 200901, Helena, MT 59620-0901; or for those systems served by the Kalispell Office: Department of Environmental Quality, Public Water Supply Section, 109 Cooperative Way, Suite 105, Kalispell, MT 59901 or for those systems served by the Billings Office: Department of Environmental Quality, Community Services Bureau, Airport Business Park 1P-9, 1371 Rimtop Drive, Billings, MT 59105-1978. Questions can be answered by writing the above address or calling (406) 444-4400 in Helena, (406) 755-8971 in Kalispell and (406) 247-4455 in Billings.

**DEPARTMENT OF ENVIRONMENTAL QUALITY
SEWER MAIN CERTIFIED CHECKLIST**

Project Name _____

Location _____ County _____

Public Supply Owner _____

Developer _____

Mailing Address _____

Engineer _____

Mailing Address _____

Will this project trigger a Sanitation Act review under MCA 76-4? Yes No
If so, has a Municipal Facilities Exclusion form been filed? Yes No

REQUIRED DOCUMENTATION:

Checklists submitted without all of the required documentation will be considered incomplete and will not be processed until all of the required information has been submitted. If you are submitting electronically these documents will be required as uploads in the system to submit your application.

Included?

Y No

- Three sets of plans and specifications stamped and signed by the professional engineer responsible for the design of the project.
- An engineering report presenting, at a minimum, the design capacity and flow requirements in Section 32 of Circular DEQ 2. The engineering report must include all applicable analysis and supporting assumptions.
- A map showing the location of the proposed sewer main in relation to the rest of the collection system and the water distribution system.
- Owner certification that a professional engineer will be retained for construction inspection and will certify completion in accordance with the approved plans and prepare as-builts for submittal to the Department within 90 days of project completion.
- Review Fee as specified in ARM 17.38.106.
- Capacity Certification (one of the following is required):
 - This is a sewer main extension that is part of a wastewater utility master plan approved by the department within the past ten years. A copy of the applicable portion of this master plan is included; or
 - This is a sewer main replacement of an existing pipe and the pipe diameter is equal to or greater than the existing pipe. An approval letter from the owner of the system providing service is included; or
 - All other extensions: An approval letter from a professional engineer (other than the design engineer) who is employed directly or retained by the owner of the public wastewater system providing service to the proposed sewer main is included. The letter must state the system approves of the extension and the system has adequate capacity to accommodate the extension. Signature on the Municipal Facilities Exclusion checklist does not fulfill this requirement.

DESIGN STANDARDS

Check “yes” when all the requirements of the section are satisfied. Check “N/A” when the section is not applicable and explain why the section is not applicable.

Section 31 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.1 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.2 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.3 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.41 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.42 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.43 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.44 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.45 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.46 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.5 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.6 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.7 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.81 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.82 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.83 **Yes** **N/A** **Deviation (include Deviation Form)**
If N/A, Explain _____

Section 33.84 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 33.85 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 33.91 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 33.92 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 33.93 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 33.10 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.1 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.2 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.3 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.4 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.5 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.6 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.7 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.8 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 34.9 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 35 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 36.11 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)

Section 36.12 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 36.13 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 36.14 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 36.21 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 36.22 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 37 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 38.1 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 38.2 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 38.31 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 38.32 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)
Section 39 If N/A, Explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<input type="checkbox"/> Deviation (include Deviation Form)

CERTIFYING STATEMENT

I certify that I have examined the above checklist and supporting documentation and attachments and find this information to be correct, true and complete. I find the plans and specifications for this project to be in compliance with the Department of Environmental Quality Circular DEQ-2 as specified above.

(Signature of Professional Engineer)

(Date Signed)

Montana P.E. Number _____

PE Stamp