



SUBDIVISION TRAINING

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COMMON ABBREVIATIONS

- Montana Department of Environmental Quality (MDEQ)
- Department of Natural Resources (DNRC)
- Certificate of Survey (COS)
- Preliminary Plat (PLAT)
- Certificate of Subdivision Approval (COSA)
- Federal Emergency Management Agency (FEMA)
- Letter of Map Amendment (LOMA)
- Letter of Map Revision base on Fill (LOMR-F)
- Groundwater Information Center (GWIC)
- Montana Code Annotated (MCA)
- Administrative Rules of Montana (ARM's)
- National Resource Conservation Service (NRCS)
- National Oceanic Atmospheric Administration (NOAA)

RESOURCES

GIS [Montana DEQ Opencut Mining Web Mapping Application \(mtdeq.us\)](#)

GWIC [Montana's Ground Water Information Center 2023 \(mtech.edu\)](#)

FEMA [FEMA Flood Map Service Center | Welcome!](#)

SAGE GROUSE MAP [Program Map \(mt.gov\)](#)

DNRC Water Right [DNRC Water Right Query System \(mt.gov\)](#)

MT CADASTRAL [Montana Cadastral \(mt.gov\)](#)

NRCS WEB SOIL SURVEY [Web Soil Survey - Home \(usda.gov\)](#)

OPEN CHANNEL FLOW CALCULATOR [Open Channel Flow Calculator \(auburn.edu\)](#)

PUBLIC WATER SYSTEM DATABASE [Drinking Water Branch](#)

STREAM STATS [StreamStats \(usgs.gov\)](#)

NOAA Atlas 2 Precipitation Frequency [NOAA Atlas 2 Precipitation Frequency Estimates \(weather.gov\)](#)

AGENDA

- ▶ Pre-Application Meeting
- ▶ Element Review
- ▶ Application
- ▶ Fees
- ▶ Part IV Checklist
- ▶ Vicinity Maps
- ▶ Plat/COS
- ▶ Lot Layout
- ▶ Existing COSA
- ▶ Floodplain





GOALS OF THE TRAINING IS TO COVER EACH ITEM ON THE AGENDA

- ▶ Communicate DEQ Expectations
- ▶ Explain the review process in detail
- ▶ Provide suggestions to streamline application review

PRE-APPLICATION

MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY
Pre-Application Meeting

Name of proposed development: _____

Location:

City: _____

County: _____ Geocode: _____

Legal description: ___ ¼ ___ ¼ _____ of Section _____ Township _____ Range _____

Date Requested: _____ Date Scheduled: _____

Time Meeting Began: _____ Time Meeting Ended: _____

Attendees

Owner (name/address/email/phone): _____

Owner's Consultant (name/address/email/phone): _____

Reviewing Agent (DEQ/County): _____

Items Discussed:

- | | |
|--|--|
| <input type="checkbox"/> Onsite Water | <input type="checkbox"/> Storm Drainage |
| <input type="checkbox"/> Onsite Wastewater | <input type="checkbox"/> Legal Documents (Easements, User Agreements) |
| <input type="checkbox"/> Public Water or Wastewater | <input type="checkbox"/> Surveys (COS, Plat, Exemptions) |
| <input type="checkbox"/> Forms (application, fees, lot layout) | <input type="checkbox"/> Review Time-lines/Procedure |
| <input type="checkbox"/> Other approvals (Board of Health, DNRC, Platting, Sage Grouse, Discharge Permits, DPHHS, MDT) | <input type="checkbox"/> Lot History |
| <input type="checkbox"/> Nondegradation | <input type="checkbox"/> Physical constraints (groundwater monitoring, floodplain) |

Attached: Drawing Well Log Plat/COS Current COSA EQ# _____

Comments:

EQ # Assigned by DEQ: _____

Notice: Attending a pre-application meeting does not, in any way, guarantee the applicant to a water right, nor does the meeting guarantee pre-approval of the resulting application. Application will be reviewed in accordance with the rules in place at the time of receipt.

1. Fill out preapplication form
2. Provide a proposed name for the Project
3. Provide the project location
4. Include anyone that needs to be invited to the Pre-application Meeting with contact information
5. Mark the items to be discussed
6. Any special comments
7. Submit to either Shawn Rowland (Subdivision Section Supervisor) or Jackie Kuhl (Public Water Section Supervisor)

Items that would be helpful to include:

1. A summary of the project
2. Any specific concerns that need to be addressed
3. Dates and times that you are available

PRE-APPLICATION SUGGESTED WHEN:

1. Large Subdivision Applications
2. High Groundwater or limiting layer within 4 feet of the bottom of drainfield
3. High background Nitrates
4. Limited water availability
5. Upgrading existing system for additional loading or capacity
6. Change in use, for example from residential to commercial
7. Spacing limitations/Setback Issues
8. Surface Water Nearby



ELEMENT REVIEW

Reviewer Yes Missing NA	Applicant		ELEMENT DESCRIPTION
	Initials	Page(s) in Report	
General			
			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
Stormwater			
			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 (<i>circle one</i>) COMPLETE LETTER or INCOMPLETE LETTER sent on: <input type="text" value="Complete Letter"/> Enter Date Here <input type="text"/>			
REVIEWED BY: _____ AGENCY: _____			

76-4-114 (3)(b) Within 15 days of the receipt of an application, the reviewing authority shall determine whether the application contains the elements required by **76-4-115(1)** to allow for review and shall notify the applicant of the reviewing authority's determination.

DEQ EXPECTATIONS FOR ELEMENT REVIEW

- Each Item is initialed by the consultant
- Each item is addressed
- Each item has a corresponding page number
- If the item is N/A – provide a brief explanation, for example, if the project is not located in Sage Grouse Territory, provide a map.

SAGE GROUSE MAP [Program Map](#)
([mt.gov](#))

- Suggested – provide a cover letter describing the proposed project



PART I: APPLICATION GENERAL

MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY/
LOCAL GOVERNMENT JOINT APPLICATION FORM

PART I. GENERAL DESCRIPTION & INFORMATION

Name of proposed development: _____

Location:

City: _____

County: _____ Geocode: _____

Legal description: ___ ¼ ___ ¼ _____ of Section _____ Township _____ Range _____

Type of Review

- _____ 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: _____

Designated representative, if any (e.g., engineer, surveyor)

I designate _____ of _____
Print name Print Company Name

as my representative for purposes of this application.

Address: _____
Street or P.O. Box, City, State, Zip Code

Email: _____ Phone: _____

Owner

Name: _____
Signature of all owners of record Print name of owner (s)

Address: _____
Street or P.O. Box, City, State, Zip Code

Email: _____ Phone: _____

Date: _____

- Type of Review:
 - Division of Land, Boundary Relocated, Removal of Sanitary Restrictions
 - Condominiums/Townhomes/Mobile Homes/Recreational Vehicles
 - Rewrite – (no boundaries changing, aggregation, change of use)
 - Modified Site Plan

If there is any question as to the type of review, please, request a Pre-Application Meeting

PART I: APPLICATION GENERAL

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)

• Descriptive Data:

- Number of Lots
- Number of Condominiums, Townhomes, or Spaces
- Total acreage of lots being reviewed
- Indicate the proposed/existing uses
- Residential Single Family
- Residential Multiple Family
- Type of Multiple Family Structure (duplex)
- Planned Unit Development
- Condominium/townhome
- Mobile Home Park
- Recreational Vehicle Park
- Commercial or Industrial
- Other (describe)

PART I: APPLICATION GENERAL

Type of water supply system

- _____ 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 Water Supply System:
 - Individual Well
 - Individual Surface Water Supply or Spring
 - Cistern
 - Shared Well (2 Connections)
 - Multiple-user (2-14 connections < 24 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)

PART I: APPLICATION GENERAL

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)

- Type of Wastewater Treatment System:
 - Individual Wastewater Treatment System
 - Shared Wastewater Treatment System (2 connections)
 - Multiple-user (2-14 connections < 24 people)
 - Service Connection to multiple user system
 - Extension of multiple-user main
 - Service Connection to public system
 - Extension of public main
 - New Public System (15+ connections or serving 25+ people)

PART I: APPLICATION GENERAL

Name of solid waste (garbage) disposal site: _____

Designated representative, if any (e.g., engineer, surveyor)

I designate _____ of _____
Print name Print Company Name

as my representative for purposes of this application.

Address: _____
Street or P.O. Box, City, State, Zip Code

Email: _____ Phone: _____

Owner

Name: _____
Signature of all owners of record Print name of owner (s)

Address: _____
Street or P.O. Box, City, State, Zip Code

Email: _____ Phone: _____

Date: _____

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- Names of Solid Waste Disposal Site
- Designated Representative (Consultant) information – include contact information
- Owner Information – if multiple owners each owner must provide contact information (including email), signature, and date the document was signed

If there are multiple owners, each owner can provide a separate signature page.

DEQ EXPECTATIONS FOR PART I: APPLICATION

- ▶ To fully describe the project
- ▶ To provide consultant contact/owner contact information in a readable format

Suggestion:

Request a Pre-application meeting if something is unclear, or include a cover letter that explains the proposed project



FEE SHEET

Subdivision Review Fee Calculation Checklist

SUBDIVISION NAME:

EQ#

Choose type of lots, water system, wastewater system, nondegradation, and other components as necessary

TYPE OF LOTS

	Unit	Unit cost	Number of Units	Total (unit cost x no. of units)
Subdivision lot or parcel or townhouse	lot or parcel	\$160		\$0.00
Condominium, trailer court, RV campground unit or space	unit or space	\$60		\$0.00
Resubmittal fee - previously approved lot/boundaries not changed	lot or parcel	\$90		\$0.00

TYPE OF WATER SYSTEM

Individual or shared water supply system (existing/proposed)	unit	\$110		\$0.00
Multiple user water system (non-public) <i>*plus \$130 per hour for review in excess of 4 hours</i>	unit*	\$400		\$0.00
	hour	\$130	If Required	To be invoiced
	new distributing system	lineal foot	\$0.30	
connection to distribution system	lot/unit	\$90		\$0.00
Public water system				
DEQ 1 or DEQ 3 Water System	component		per 17.38.106	To be invoiced
Connection to System (per 17.38.106)	lot/unit	\$90		\$0.00

- Type of Lots:

- Subdivision Lot or Parcel or Townhomes (New)
- Condominium, trailer court, RV campground, or mobile home
- Resubmittal fee (Rewrites), previously approved lot and boundaries not changing

- Type of Water System

- Individual or shared water supply systems
- Multi-user water supply system
- Public water supply System

FEE SHEET

TYPE OF WASTEWATER SYSTEM

Existing systems	unit	\$90		\$0.00
New gravity fed system	drainfield	\$120		\$0.00
New dosed systems, elevated sand mound, ET systems, intermittent sand filter, ETA system, recirculating sand filter, recirculating trickling filter, aerobic treatment unit, nutrient removal, and whole house subsurface drip irrigation <i>*plus \$130 per hour for review in excess of 2 hours</i>	design*	\$240		\$0.00
	drainfield	\$60		\$0.00
	hour	\$130	If Required	To be invoiced
Gray water reuse, holding tanks, sealed pit privies, unsealed pit privies, seepage pits, waste segregation systems, experimental systems <i>*plus \$130 per hour for review in excess of 2 hours</i>	unit*	\$120		\$0.00
	hour	\$130	If Required	To be invoiced
New multiple user wastewater system (non-public) <i>*plus \$130 per hour for review in excess of 4 hours</i>	unit*	Per Type Above		
	hour	\$130	If Required	To be invoiced
	lineal foot	\$0.30		\$0.00
	lot/unit	\$90		\$0.00
Public wastewater system				
	Treatment System	component	per 17.38.106	To be invoiced
	Connection to System (per 17.38.106)	lot/unit	\$90	\$0.00

- Type of Wastewater Treatment System:

- Existing Systems
- New Gravity Fed System
- New Dosed Systems
- Gray Water Reuse Systems
- New Multiple User System
- Public Wastewater System

FEE SHEET

OTHER				
Deviation from Circular	request*	\$250		\$0.00
<i>*plus \$130 per hour for review in excess of 2 hours</i>	hour	\$130	If Required	To be invoiced
Waiver from Rules	request*	\$250		\$0.00
<i>*plus \$130 per hour for review in excess of 2 hours</i>	hour	\$130		To be invoiced
Reissuance of original approval statement	request	\$70		\$0.00
Review of revised lot layout document	request	\$160		\$0.00
Municipal Facilities Exemption Checklist	request	\$120		\$0.00
Nondegradation review - nonsignificance determinations				
individual/shared	drainfield*	\$70		\$0.00
<i>*plus \$130 per hour for review in excess of 2 hours</i>	hour	\$130	If Required	To be invoiced
multiple-user	lot/structure*	\$40		\$0.00
<i>*plus \$130 per hour for review in excess of 2 hours</i>	hour	\$130	If Required	To be invoiced
source specific mixing zone	drainfield	\$250		\$0.00
public	drainfield		If Required	To be invoiced
Storm drainage plan review - DEQ-8 Simple plan review	project	\$130		\$0.00
Storm drainage plan review - DEQ-8 Standard plan review	project	\$220		\$0.00
	lot*	\$50		\$0.00
<i>*plus \$130 per hour for review in excess of 30 minutes per lot</i>	hour	\$130	If Required	To be invoiced
Preparation of environmental impact statements/EAs	actual cost		If Required	To be invoiced
Review for compliance with ARM 17.30.718				
New Level 2 System Approval	approval*	\$900		\$0.00
<i>*plus \$130 per hour for review in excess of 6 hours</i>	hour	\$130	If Required	To be invoiced
Total Review Fee				\$0.00

Revised 09/03/2020

- Other Fees:
 - Deviation from Circular (Non-Public Systems)
 - Waiver from Rules
 - Reissuance of Original Approval Statement
 - Review of Revised Lot Layout Document
 - Municipal Facilities Exemption Checklist
 - Storm Drainage Plan Review Simple Plan
 - Storm Drainage Plan Review Standard Plan
 - Preparation of the Environmental Impact Statement/EA's
 - Review for Compliance with ARM 17.30.718

PART IV CHECKLIST

2016 04 22 PARTIV.PDF (MT.GOV)

Part IV SUBDIVISION CHECKLIST

Subdivision:
E.Q. Number (provided by DEQ):

County:
Date:

Please complete the checklist with your initials or N/A.

Applicant or Representative Initial or N/A	County Initial or N/A	DEQ Initial or N/A	Question	Refer to ARM 17.36 Subsections	Reviewer's Comments
			1. Have deviation or waiver requests been submitted with appropriate fees?	17.36.601	
			2. Is check included with correct fee?	17.36.103 and 17.36.802	
			3. Is application included with owner's signature/address/phone/date?	17.36.102	
			4. Is legible copy of Preliminary Plat or COS included?	17.36.103	
			5. Is legal description included on the Preliminary Plat or COS?	17.36.103	
			6. Are all lots described on survey being reviewed and any exclusions clearly stated on Preliminary Plat or COS?	17.36.103, 17.36.605	
			7. Are state letters of approval included (DNRC water rights permit, Groundwater discharge permit, public water etc.?)	17.36.103	
			8. Is local health officer approval included?	17.36.103, 17.36.106, 17.36.108	
			9. Are Planning Board or County Commissioner comments included?	17.36.103(1)(t)	
			10. Is a clear copy of USGS or other topo map included to show ground slope of property?	17.36.103 and 17.36.322 - subsurface wastewater treatment system (SWTS);	

1. Itemized Checklist for complete submittal
2. Ask the submitter to address specific questions about the proposal
3. Provides the appropriate ARM or Circular that provides guidance on how to answer or address each question.
4. Provides an initial area for applicant/consultant to initial that the item has been addressed

DEQ EXPECTATIONS FOR THE PART IV CHECKLIST

- ▶ Address each item
- ▶ If the item is N/A provide a brief explanation (for example the project is not located in a flood zone, provide a FEMA map)

Suggestions - Request a Pre-application meeting if something is unclear or include summary/discussion about items that may be considered special circumstances. For example (confined aquifer, high background nitrates)





VICINITY MAP

17.36.103 : APPLICATION--CONTENTS - ADMINISTRATIVE RULES OF THE STATE OF MONTANA (MT.GOV)

17.36.103 APPLICATION—CONTENTS (1) In addition to the completed application form required by ARM 17.36.102, the following information must be submitted to the reviewing authority as part of an application:

(d) vicinity maps or plans showing the locations of the following features:

- (i) lakes, streams, irrigation ditches, wetlands, and springs; and
- (ii) a large-scale vicinity map showing existing, existing, previously approved, and proposed wells, wastewater treatment systems, drainfields, existing and approved mixing zones and other sources of contamination within 100 feet of the proposed subdivision, or approved public water and public wastewater mains within 500 feet of the boundaries of the subdivision; and lagoons within 1,000 feet of any existing or proposed drinking well;

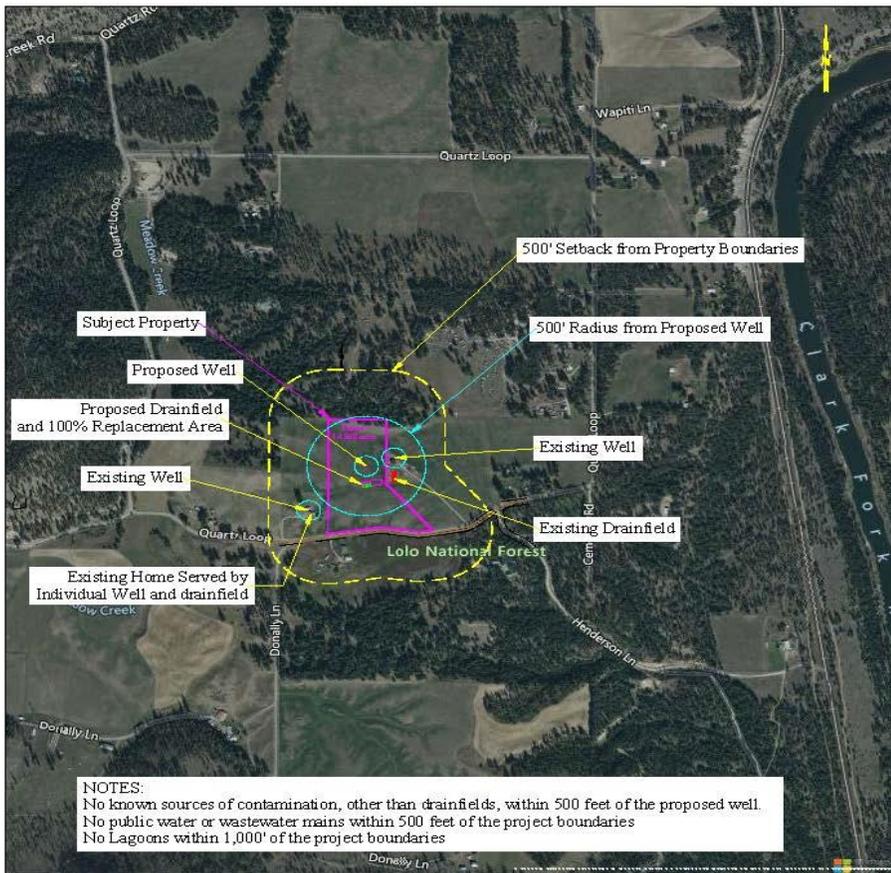


DEQ EXPECTATIONS FOR THE VICINITY MAP

Purpose of the Vicinity Map

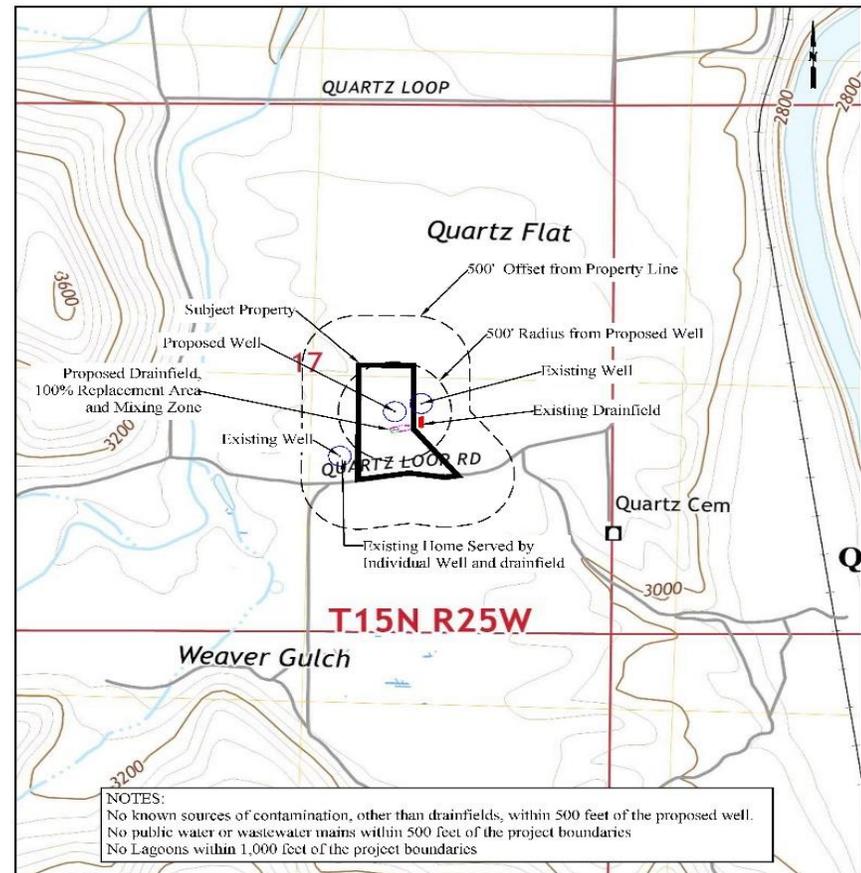
- ▶ Provide location without having to reference any other document
- ▶ Potential sources of contamination within 500 feet
- ▶ Potential sources of contamination within 1,000 feet (Lagoon)
- ▶ Surface water within a ½ mile
- ▶ Provide the locations of wells within the area

VICINITY MAP EXAMPLES



TITLE: VICINITY MAP

COUNTY:	COUNTY	OWNER:	OWNER	COMPANY NAME
SECTION:	TWP	SCALE:	DATE:	PHONE AND
SEC:	TWP	FILE:	DRAWN BY:	ADDRESS
RNG:		FILE:	DRAWN BY:	



TITLE: VICINITY MAP

COUNTY:	COUNTY	OWNER:	OWNER	COMPANY NAME
SECTION:	TWP	SCALE:	DATE:	PHONE AND
SEC:	TWP	FILE:	DRAWN BY:	ADDRESS
RNG:		FILE:	DRAWN BY:	

COS/PLAT

- ▶ A copy usually can be found at the local health department or the local clerk and recorders office for existing COS/PLAT
- ▶ COS/PLAT needs to be completed by a Licensed Land Surveyor
- ▶ Major and Minor Subdivison need a PLAT – the Preliminary Plat may be reviewed by the Platting/Planning Board and Subdivision Review concurrently
- ▶ An Existing COS or PLAT for a Rewrite
- ▶ If using an exemption needs to be included on the COS/PLAT
- ▶ The COS or PLAT needs to match the Lot Layout for the Certificate of Subdivison Approval (COSA)



17.36.104 APPLICATION--LOT LAYOUT DOCUMENT

- (1) The applicant shall provide lot layout documents for the subdivision application. At least one copy of the lot layout must be submitted with the subdivision application. Prior to final approval, four copies of the final lot layout must be submitted. The lot layout documents must be on sheets no larger than 11" x 17", at a scale no smaller than 1" = 200'. The reviewing authority may require a larger scale if needed to enhance readability. Multiple sheets may be used for large developments, provided that individual lots are not split across two sheets. If multiple sheets are used, a single sheet must also be provided, using an appropriate scale, that shows the entire development.
- (2) The following information must be provided on the lot layout documents. Other information (e.g., percolation test results, soil profile descriptions) may be included on the lot layout documents only if the documents remain legible:
 - (a) the name of the subdivision, and the county, section, township and range (e.g., "Sec. 12 T27N R6E") in which the subdivision is located;
 - (b) a north arrow and scale;
 - (c) the boundaries, dimensions, and total area of each lot;
 - (d) an identifier or number for each lot (e.g., "Lot 1, Lot 2," "Tract 1, Tract 2," or "Parcel 1, Parcel 2");
 - (e) locations of existing and proposed easements;
 - (f) locations of existing and proposed roads and utilities;
 - (g) locations of drainageways;
 - (h) name and affiliation of the person who prepared the lot layout;
 - (i) information as set out in Table 1 for the specific water supply, wastewater, and storm water facilities in the subdivision, and those located within 100 feet of the perimeter of the subdivision or parcel. All systems must be labeled as "existing" or "proposed." For individual and shared systems, the locations and design details do not have to be shown on the lot layout if those details will not be determined until the time of septic permitting.

LOT LAYOUT

LOT LAYOUT ARM 17.36.104 TABLE REQUIREMENTS

17.36.104 : APPLICATION--LOT LAYOUT DOCUMENT - ADMINISTRATIVE RULES OF THE STATE OF MONTANA (MT.GOV)

NOTES

1. Other than those illustrated or indicated, no existing or approved wells, drainfields or mixing zones within 100' of property lines.
2. There are no known potential sources of contamination, other than drainfields, within 500 feet of the proposed well.
3. Well shall be constructed in accordance with arm title 36, chapter 21, subchapter 6.
4. Parcel 1 is exempt from stormwater review as per 17.36.310(6)(b), as a lot that is over 5 acres or larger and the proposed impervious area is less than 5% of the lot area, including easements and right-of-ways.

Impervious Area + (Easements and Right-of-ways) = 7,500ft² or 1.2% of the lot area.

5. Parcels 2 & 3 are exempt from sanitation review. Exemptions provided by Surveyor. See exemption text on each parcel.
6. Proposed home locations and driveway are provided as conceptual in nature. This Lot Layout shall in no way act as a regulatory document for siting homes or driveways.

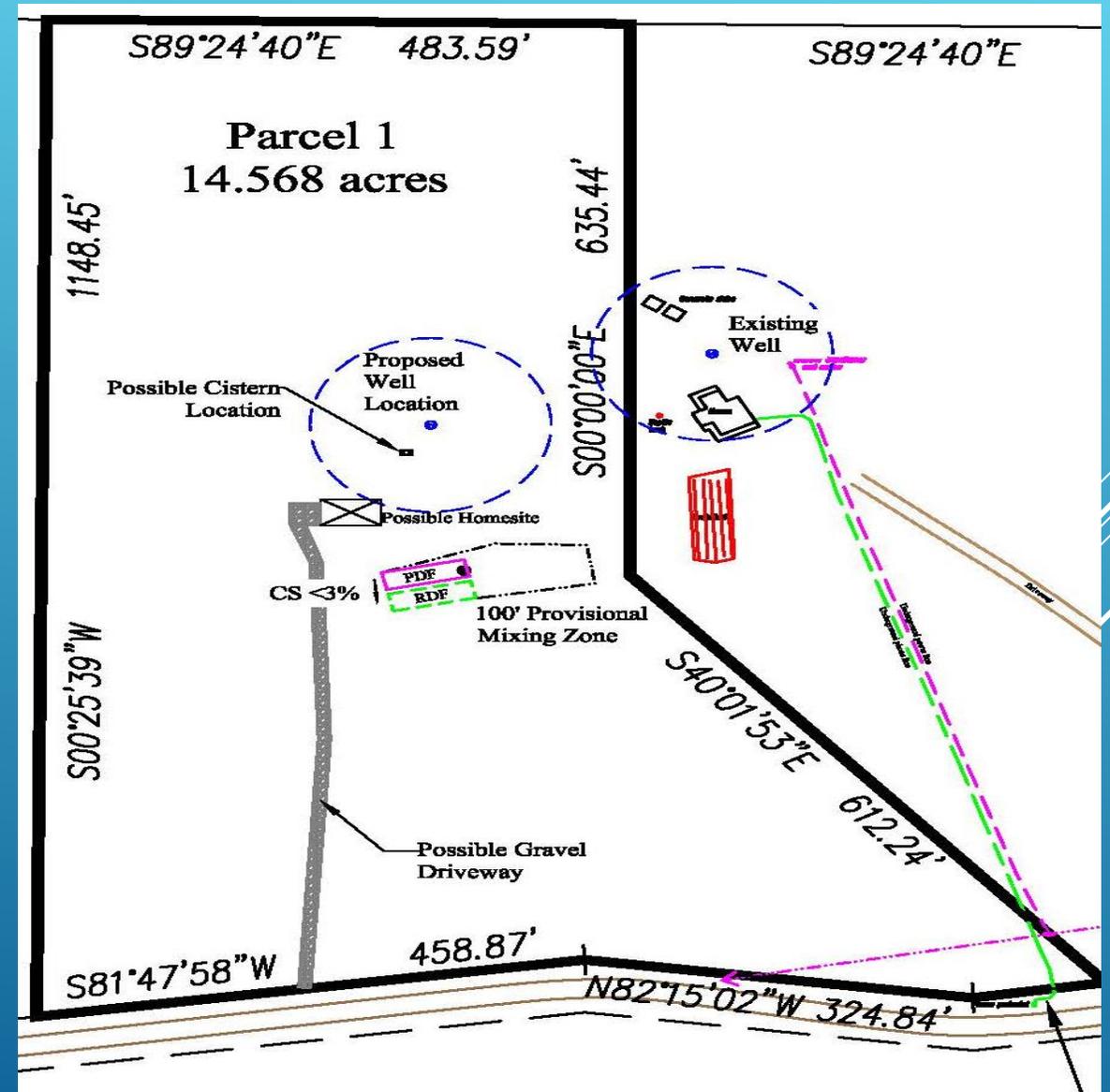
4. Drainfield Area is sized based on 4-bedroom Home and 0.6 gpd/ft² application rate.

$$350\text{gpd}/06\text{gpdft}^2 = 584 \text{ ft}^2$$

$$584\text{ft}^2/3\text{ft wide trenches} = 195 \text{ lineal feet of drainfield}$$

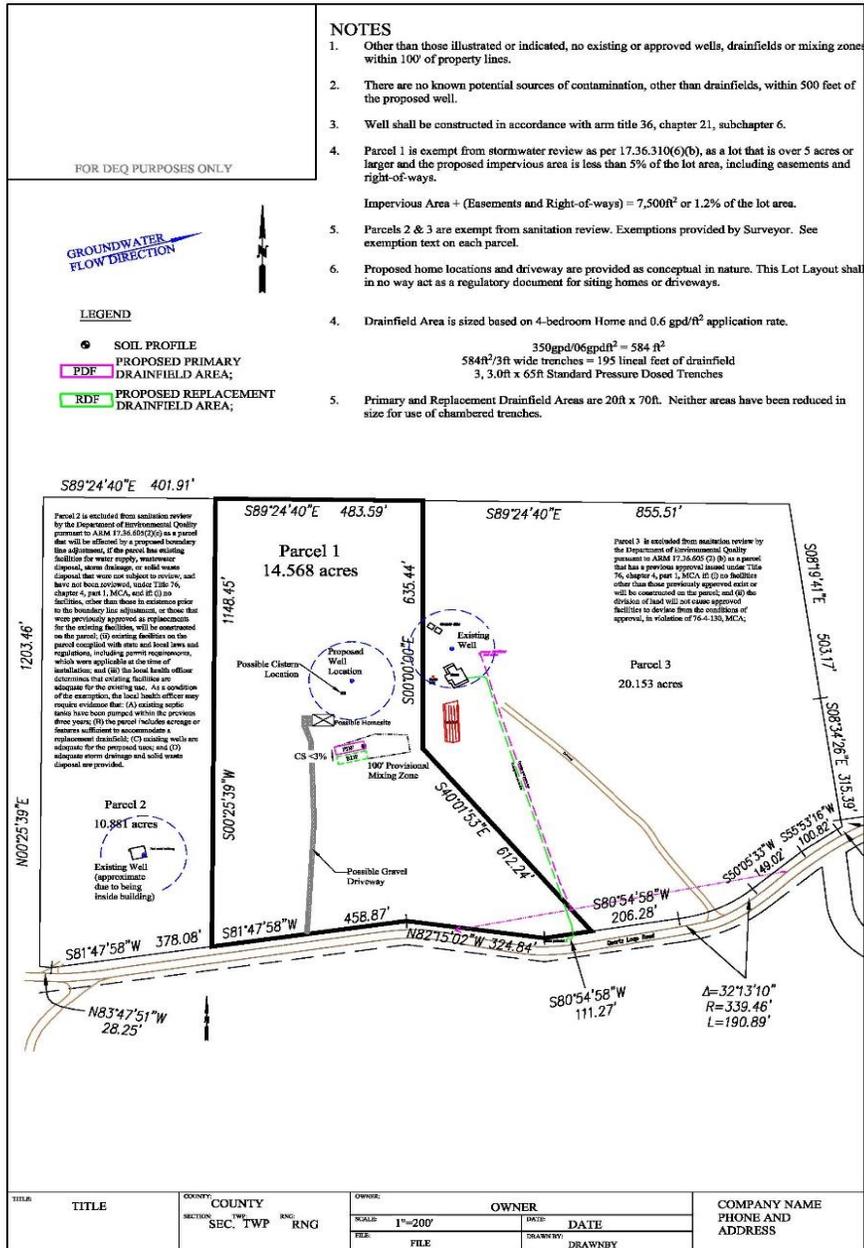
3, 3.0ft x 65ft Standard Pressure Dosed Trenches

5. Primary and Replacement Drainfield Areas are 20ft x 70ft. Neither areas have been reduced in size for use of chambered trenches.



DEQ Expectations for the Lot layout

- Usable document & Scale
- Scale needs to be printable to actual size
- Show Drainfield Locations/Septic does not have to be shown unless setbacks are an issue
- Includes the proposed project name
- Provide a space for the approval stamp
- Includes the consultant or firms name and location – contact information
- Include a note stating that all existing potential sources of contamination, surface waters, and drinking water wells have been identified and are shown on the Lot Layout.
- Someone unfamiliar with the project needs to be able to locate the appropriate drainfield and drinking water supply locations





CERTIFICATE OF SUBDIVISION APPROVAL

- ▶ Existing COSA may be found at the Local Health Department and/or the Local Clerk and Records office

FLOODPLAINS

- FEMA Flood Plain Maps
- Floodplain Administrator
- If there is a flood plain on the property, the map provided needs to show where the 100-year elevations came from.
- FEMA [FEMA Flood Map Service Center | Welcome!](#)



DEQ.MT.GOV

- ▶ Water Resources | Montana DEQ (mt.gov)
- ▶ Let's take a minute to look through the website to locate forms and additional information



QUESTIONS ? NEED TO CONTACT US?

- ▶ Leata English, Data Control Technician, lenglish@mt.gov
 - ▶ Shawn Rowland, Subdivision Supervisor, shawn.rowland@mt.gov
 - ▶ On-call Reviewer: deq-eoc@mt.gov
- 
- A decorative graphic consisting of several parallel white lines of varying lengths, slanted diagonally from the bottom right towards the top right, located in the lower right quadrant of the slide.