

Zone _____
Failing _____
PreApp _____
Nitrate _____

Receipt Number _____

RESIDENTIAL
JOINT SITE EVALUATION and SEPTIC SYSTEM PERMIT
APPLICATION FORM

Flathead City/County Health Department
Environmental Health Services
1035 1st Avenue West
Kalispell MT 59901
(406) 751-8130

1) LEGAL DESCRIPTION OF PROPERTY

Subdivision Name or EQ# _____ Lot # _____ Blk # _____
County Assessor's Tract No. (Example Tr. 3BD) _____ County Assessor's No. _____
Certificate of Survey (COS) or Deed Exhibit No. _____
Section _____ Township _____ Range _____
Parcel Size (Acres) _____
Address of Property _____
City _____ Zip Code _____

All new structures require new addresses assigned by GIS @ <https://flathead.mt.gov/gis/AddressRequestHome.php>

The information requested can be obtained from the County Plat Room. If the property is in a subdivision, you do not need the Co. Assessor's Tract No. and COS No. If the property is not in a platted subdivision, Tract No. and COS No. / Deed Exhibit are required. A complete copy of the COS/Deed Exhibit must be attached (if on file).
Incomplete applications will be returned.

2) LEGAL PROPERTY OWNER (Current owner, not buyer)

Owner's Name _____
Mailing Address _____
City _____ Phone _____
Email Address _____

If someone other than the legal property owner is to be the contact with this department, please complete the following:

Name and Affiliation _____
Mailing Address _____
City _____ Phone _____
Email Address _____

3) Licensed Installer's Name _____ Email: _____

4) Phone _____ Self-Installed? _____ If self-installed, a competency test is required (\$100 fee)

5) PURPOSE OF APPLICATION

Is this form being submitted to:

- _____ Obtain a site evaluation. \$275.00 (Fee required at the time of application. This is not a permit fee.)
_____ Non-degradation analysis. \$200.00 (Fee required at the time of application. This is not a permit fee.)
_____ Site Review. \$150 (Fee required at time of application. (This is not a permit fee.)
_____ Obtain a septic permit. (Permit fee varies and is due when the permit is issued.)

6) PROPOSED DEVELOPMENT- Residential (also under construction)

_____ Conventional Single Family No. of Bedrooms _____
_____ Mobile Home No. of Bedrooms _____
_____ Unfinished Basement (will be considered an additional bedroom) _____
_____ Other _____

