MISSOULA PUBLIC HEALTH

MCCHD STAFF USE ONLY
Log #: _____

CLEARWTRS Grant Application

Missoula City-County Health Department (MCCHD) has been awarded a grant from the Department of Environmental Quality (DEQ) to upgrade or replace existing septic systems and unsealed pit privies at reduced to no cost to owner(s). Interested parties must fill out this application in its entirety and submit it via email to envhealth@missoulacounty.us or drop off in person at 301 W. Alder St. Missoula MT, 58902.

Owner/Applicant Information:

Name:_____ Phone #:_____

Email:_____

Mailing Address:_____

If different, property owner name:_____Phone #:_____

Property Information:

Address:_____City:_____Zip:_____

Legal Description of Property: https://gis.missoulacounty.us/propertyinformation/

Location:_____1/4_____1/4 Section_____T_____R_____

Tax ID:_____ GEOCODE:_____

Certificate of Survey #:_____ Or Subdivision Name:_____

Current System:

Residential/Commercial: (circle one) # Bedrooms _____ Bsmt?(Y/N)_____

System Type

- ☐ Unsealed Pit
- ☐ Privy
- ☐ Sealed Pit Privy
- ☐ Cesspool/ Seepage Pit
- ☐ Absorption Bed
- ☐ Drainfield
- ☐ Sandmound
- ☐ Other:_____

System Information

Permit Number (If applicable):_____

Year System Was Installed:_____

A complete application must include the following:

- **A description of the existing system,** current facilities, and all existing structures on the property to be served by a wastewater system (there is space available on the back of this application for the description.)
- **A site plan** no larger than 11" X 17", accurately showing all buildings, wells, septic systems, replacement areas, surface water, and flood plain on or within 100 feet of the property.
- **Detailed floor plans** on paper no larger than 11" X 17", showing the existing floor plan of **ALL** plumbed structures on the property.

I certify that the information provided in this application is true and complete.

Applicant Signature:_____ **Date:**_____

1. Please use this space to clearly describe your existing system, how it is functioning, are there any known issues or concerns you have with the system, etc.

2. Please describe all plumbed structures and structures with living space (houses, bunkhouses, bedrooms, etc)

3. Please provide any additional relevant information that you feel may be helpful in determining the type of replacement system can be offered for your property. This could include potential site constraints such as steep slopes, proximity to wells, nearby surface water, etc.

"This project has been funded wholly or in part by the EPA under assistance agreement SO - 95815370 to the Montana Department of Environmental Quality. The contents of this document do not necessarily reflect the views and policies of the EPA, nor does the EPA endorse trade names or recommend the use of commercial products mentioned in this document."