



RAVALLI COUNTY ENVIRONMENTAL HEALTH
DEPARTMENT
215 S 4th STREET, SUITE D
HAMILTON, MT 59840
(406) 375-6565.

Fees Paid: \$ _____
Receipt # _____

GROUND WATER MONITORING APPLICATION – DEADLINE: March 1st, 2026

A: APPLICANT’S INFORMATION

Applicant’s Name: _____ Date: _____
Mailing Address: _____ City: _____ State: ___ Zip Code: _____
Contact Phone: _____ Email: _____

B: PROPERTY INFORMATION

Tax ID: _____
Property Owner: _____
Property size: _____
Number of monitoring Pipes: _____

- The groundwater monitoring pipes must be:
- At least 100 feet from wells
 - At least 10 feet from water lines
 - At least 100 feet from floodplain
 - At least 100 feet from surface water
 - At least 10 feet from property lines
 - At least 10 feet from buildings
 - Placed in natural ground (not fill)
 - Be 10 feet long
 - Be 4 inches in diameter and perforated
 - Placed at least 8 feet in the ground
 - Accessible, and have a lid of some kind.
 - See attached information for complete details

C: REASON FOR MONITORING:

Sanitarian Required: _____
Consultant Required: _____
Other: _____

D: Please provide the following information for each GWM pipe on a lot map obtained from this office and attached to the application:

- The location of each pipe
- The distance (in feet) from the pipe(s) to the access road, and
- The route and distance (in feet) to be taken to each pipe.
- Please label all roads, ditches, stream crossings, and access points.

E: APPLICANT’S ACKNOWLEDGEMENT:

____ I have read and understand the Ravalli County Subsurface Wastewater Treatment and Disposal Regulations.
____ I will comply with the requirements of the Wastewater System Permit and the system will be in compliance with Ravalli County Subsurface Wastewater Treatment and Disposal Regulations.
____ I have received and read the following requirements attached to this application:
- Groundwater Monitoring (GWM) fee sheet, Application Requirements, Ravalli County Wastewater Regulations GWM requirements, DEQ-4 Appendix C.
____ I certify that the information provided on this application is accurate and true.

Applicant’s Signature: _____ **Relationship to owner:** _____

POST March 1st Enrollment Acknowledgement: SIGN _____

*Groundwater Monitoring Fee: \$150.00(one test pipe); additional Pipes: \$30.00 each;
See fee schedule for one time mileage fees.
**Office Use Only: EAR Tag Numbers: _____ Office to Property Distance: _____