MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY/
LOCAL GOVERNMENT JOINT APPLICATION FORM

PART I. GENERAL DESCRIPTION AND INFORMATION

1. Name of proposed development Silvertip Subdivision P.U.D.

2. Location: City and/or county Big Sky, MT Madison County
   Legal description: _____ 1/4 NE 1/4 of Section 24 Township 6S Range 2E

3. Is concurrent review by local governing body and DEQ requested? Yes X No _____

4. Type of water supply system
   - _____ Individual well
   - _____ Individual cistern
   - _____ Individual surface water supply or spring
   - _____ Shared well (2 connections)
   - _____ Multiple-user water supply system (3-14 connections and fewer than 25 people)
   - _____ Service connection to multiple-user system
   - _____ Service connection to public system
   - X Extension of public main
   - _____ New public system (15 or more connections or serving 25 or more people)

5. Type of wastewater treatment system
   - _____ Individual wastewater treatment system
   - _____ Number of bedrooms (3 bedrooms will be used if unknown)
   - _____ Shared wastewater treatment system (2 connections)
   - _____ Multiple-user system (3-14 connections and fewer than 25 people)
   - _____ Service connection to multiple-user system
   - _____ Service connection to public system
   - X Extension of public main
   - _____ New public system (15 or more connections or serving 25 or more people)

6. Name of solid waste (garbage) disposal site Gallatin County Landfill - Logan, MT

7. Nondegradation
   Yes X No _____ Is information included which substantiates that there will be no degradation of state waters or that degradation will be nonsignificant?
   Yes _____ No _____ If not, have you enclosed an Application to Degrade?

8. Descriptive Data
   - 23 Number of lots or rental spaces
   - _____ Total acreage in lots being reviewed
   - _____ Total acreage in streets or roads
   - _____ Total acreage in parks, open space, and/or common facilities
   - _____ Total gross acreage of subdivision
   - _____ Minimum size of lots or spaces
   - _____ Maximum size of lots or spaces

9. Indicate the proposed use(s) and number of lots or spaces in each.
   - 20 Residential, single family
   - _____ Residential, multiple family Number of units _____
   - _____ Type of multiple family structure (e.g. duplex)_____ Number of units_____
   - _____ Planned unit development Number of units _____
   - _____ Condominium Number of units _____
   - _____ Mobile home park Number of units _____
   - _____ Recreational vehicle park Number of units _____
   - _____ Commercial or industrial
   - 3 Other (please describe) Common

10. Provide the following information regarding the development.

Current land use Vacant

Depth to ground water at the time of year when water table is nearest to the natural ground surface within the drainfield area N/A

Depth to bedrock or other impervious material in the drainfield area N/A

Existing zoning or other regulations None

11. Include the following attachments, if applicable.

Yes ____ NA X An overall development plan indicating the intent for the development of the remainder of the tract, if a tract of land is to be subdivided in phases.

Yes X NA ____ Drafts of any covenants and restrictions to be included in deeds or contracts for sale.

Yes X NA ____ Drafts of homeowners' association bylaws and articles of incorporation, if applicable.

(Submitting a draft copy of a homeowners' association bylaws and articles of incorporation is adequate for DEQ to initiate and complete its review of sanitary facilities, but a copy of the fully executed documents must be submitted before DEQ can issue final approval.)

I understand that a person may not dispose of any lot within a subdivision, erect any facility for the supply of water or disposal of sewage or solid waste, erect any building or shelter in a subdivision that requires facilities for the supply of water or disposal of sewage or solid waste, or occupy any permanent buildings in a subdivision until the reviewing authority under the Sanitation in Subdivisions Act has issued a certificate of subdivision approval indicating that the subdivision is not subject to sanitary restriction, unless the subdivision is exempt from the Sanitation in Subdivisions Act under 76-4-125, MCA. I understand that a person may not construct or use a facility that deviates from the certificate of subdivision approval until the reviewing authority has approved the deviation.

I designate TD&H Engineering as my representative for purposes of this application.

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

Name: Kyle Scarr, P.E. Phone: 406-586-0277

Address: TD&H Engineering, 234 E. Babcock, Suite 3, Bozeman, MT 59715

Company, Street or P.O. Box, City, State, Zip Code

Owner

Name: _____ MB MT Acquisition LLC / Matthew E. Kidd

Signature of owner Print name of owner

Address : PO Box 160040, Big Sky, MT 59716

Street or P.O. Box, City, State, Zip Code

Date: _____ Phone: (406)219-0830

(The statement must be signed by the owner of the land proposed for subdivision or the responsible officer of the corporation offering the same for sale.)

Notice: The statutory time frame for each review is 60 days. Resubmittal of denied or incomplete applications restarts the time frame. The estimated time for the DEQ to act on a complete subdivision application is 10 days for subdivisions reviewed by a local department of health under contract to the DEQ. Local health departments review subdivisions within 50 days of receipt of a complete application. During non-peak times, a review may take 25 to 45 days. For peak times, the review may take 45 to 60 days.