

# SEPTIC INFORMATION REQUEST

\_\_\_\_\_  
Property Owners Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Address Where System Installed

\_\_\_\_\_  
Year Installed

\_\_\_\_\_  
Original Owner's Last Name When Installed\*\*\*

Parcel ID # \_\_\_\_\_

GEO Code # \_\_\_\_\_

Section \_\_\_\_\_

Township \_\_\_\_\_

Range \_\_\_\_\_

Name of Subdivision/Phase: \_\_\_\_\_

Lot # \_\_\_\_\_

Block # \_\_\_\_\_

Any/all information you provide will speed our search; please allow up to two (2) business days for your request to be filled. Fill in all the information you have and return this form to Carbon County.

\*\*\*This is how our permits are listed in our database; therefore it is the most helpful information

## PLEASE RETURN TO:

Carbon County

PO Box 887, Red Lodge, MT 59068

Phone: 406-446-1220

Fax: 406-446-2640