Flathead County

Planning & Zoning

1035 1st Ave W, Kalispell, MT 59901
Telephone 406.751.8200 Fax 406.751.8210

APPLICATION FOR LAKE AND LAKESHORE CONSTRUCTION PERMIT

Submit this application, and appropriate fee to the Planning & Zoning office at the address listed above.

Filing Fee:

Administrative Permit/Renewals: **	
Base Fee for one activity:	$270
Each additional activity:	$110
Standard Permit:	
Base fee for one activity:	$375
Each additional activity:	$110
Variance - Minor:	$485
Variance - Major:	$1,190

***These activities include:*

1. *Single Residential Docks and Gangways*
2. *Shore Stations & Watercraft Lifts*
3. *Rip Rap above the high water mark*
4. *Residential water lines (a DNRC License is required)*
5. *Decks, Walkways, and Stairways*
6. *Free-standing pilings adjacent to dock*

OWNER/APPLICANT

Owner: _____ Applicant: _____

Address: _____ Address: _____

City/State/Zip: _____ City/State/Zip: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Note: If applicant is not owner, the attached authorization form must be filled out and signed.

CONTRACTOR (or person responsible for doing the work, if other than above)

Name: _____ Address: _____

City/State/Zip: _____ Phone: _____

Email: _____

LOCATION OF THE PROJECT

Lot: _____ Section: _____ Township: _____ Range: _____

Street Address: _____

Lake: _____ How many feet of Lakeshore frontage do you own? _____

ROAD DIRECTIONS TO REACH SITE: ***(Please include a gate code if applicable)***

_____

_____

EXISTING STRUCTURES ON THE SITE: (Describe and give the dimensions of all structures, i.e., docks, boat ramps, boat shelters, buildings, retaining walls, etc., that exist on the lake or within 20 horizontal feet of the average high water line of the lake.)

_____

_____

_____

NATURE OF PROPOSED WORK: (Describe in words what you propose to build, demolish, install, dredge, or fill. ***Give dimensions, materials and list heavy equipment, if any.)***

_____

_____

_____

WILL THE USE OF THE PROPERTY BE: (Check one)

- ☐ Individual Lot Owner
- ☐ Joint Use (Adjoining Properties)
- ☐ Commercial
- ☐ Homeowners Association
- ☐ Other (specify)

DESCRIBE, IN FULL, ANY ADVERSE ENVIRONMENTAL IMPACTS THAT MAY OCCUR AS A RESULT OF THE PROPOSED ACTIVITY: (e.g., impacts on water quality or fish and wildlife habitat, increased sedimentation, discharge of toxic chemicals)

_____

_____

_____

WHAT MEASURES WILL BE TAKEN TO REDUCE OR ALLEVIATE ANY ADVERSE IMPACTS LISTED ABOVE?

_____

_____

_____

PROJECT INFORMATION: (Maps and drawings must be attached. See Pages 3 and 4 for directions)

A. Is Vicinity Plan Attached? ☐ Yes ☐ No

B. Is Site Plan Attached? ☐ Yes ☐ No

C. Is Project Drawing Attached? ☐ Yes ☐ No

SANITATION INFORMATION: Does the proposed activity involve a structure connected to a private well and/or septic system? ☐ Yes ☐ No

If yes, the following section is to be completed by the Flathead City/County Environmental Health Office:

Does the proposed development comply with the Flathead County Regulations for Onsite Sewage treatment systems?

☐ Yes ☐ No ☐ N/A

Sanitarian _____ Date _____

****

AFFIDAVIT

I hereby certify and say that to the best of my knowledge and belief, the statements contained in this Application, together with the plan and other data submitted, are a true and complete statement of all proposed work to be done and its effect or probably effects on the lake and lakeshore.

Applicant Signature _____ Date _____

Notes:

a. The signing of this application signifies approval for Flathead County Planning & Zoning staff to be present on the property for routine monitoring and inspection during the approval and development process.
b. Work will be inspected for conformity with Permit.
c. Permit expires one (1) year from date of issuance, unless renewed by governing body upon written request of the Applicant.

Updated 12/16/15

LAKE AND LAKESHORE PERMIT APPLICANT/CONTRACTOR AUTHORIZATION

Landowner: _____

Address: _____

City/State/Zip: _____

Phone: _____

Applicant: _____

Location of Project: _____

_____

Lake: _____

Contractor: _____

Address: _____

City/State/Zip: _____

Phone: _____

I authorize the release and transmittal of the required on-site Lake & Lakeshore Permit and file copy to the above-named applicant/contractor. The original shall be transmitted to the owners address as listed on the Flathead County Lake & Lakeshore Permit.

_____ _____

Landowners Signature Date

U.S. Army Corps of Engineers, Nationwide Permit 19 - MINOR DREDGING

Applicant: _____

Location of Project: _____

_____

Lake: _____

Contractor: _____

Address: _____

City/State/Zip: _____

Phone: _____

I hereby verify that I have read and understand the conditions of Nationwide Permit 19, and that all activities conducted in the execution of this Permit are in compliance with, or are not subject to, the specifics said permit.

A copy of this affidavit and the FACT SHEET - NATIONWIDE PERMIT 19 shall remain on file with the application.

_____ _____

Applicant Signature Date

_____ _____

Contractor Signature Date

GUIDELINES FOR PREPARING VICINITY MAP, SITE PLAN AND PROJECT DRAWING

A. Vicinity Map

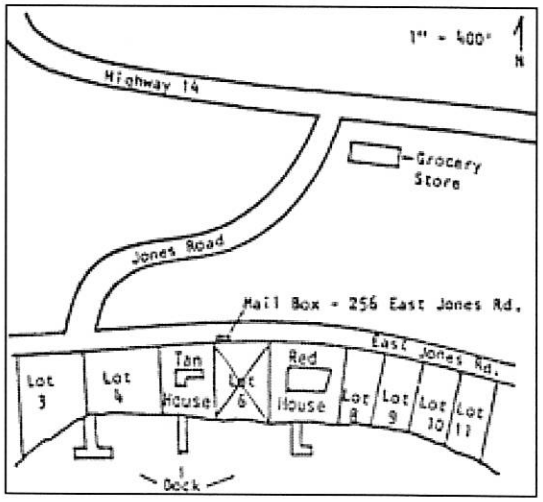
The purpose of the vicinity map is to identify the location of the property and to show surrounding lake and lakeshore development. The map shall clearly show the following;

1. The location of the proposed site in relation to the nearest roads, highways and other landmarks;

2. All existing lakeshore facilities (docks, ramps, improvements, etc.) within 100 feet of both sides of the property on which the proposed work will occur;

3. North point and map scale.

This is an example of what you should present. (Note: A plat map from the County Courthouse Plat Room can be used.



B. Site Plan

The purpose of a site plan is to show the location of the project in relation to any existing structures/facilities on the lot, to the Applicant's property line, the lake, lakeshore and all land within 20 horizontal feet of the mean annual high water elevation of the lake. The site plan shall clearly show the following:

1. Dimensions of the property on which the proposed project is located;

2. Location of the project on the property. All distances from property lines should be indicated;

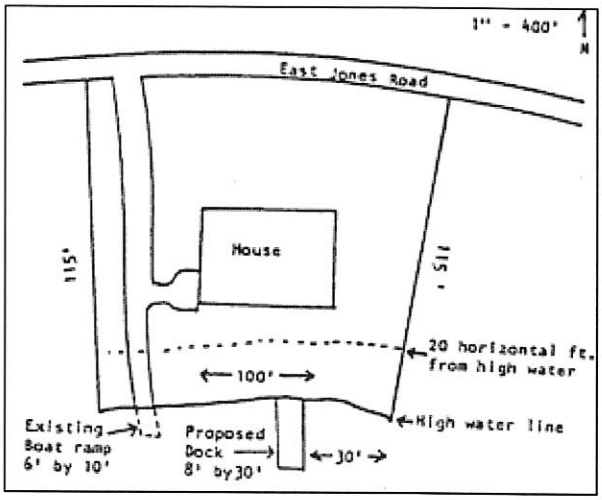
3. Location of the average annual high water line;

4. Location of the line 20 horizontal feet landward of the mean annual high water elevation;

5. Other structures and/or facilities on the property. Dimensions of structures/facilities should be given only for those located on the lake or within 20 horizontal feet of the mean annual high water elevation;

6. North point and map scale.

This is an example of a site plan for a dock.



C. Project Drawing

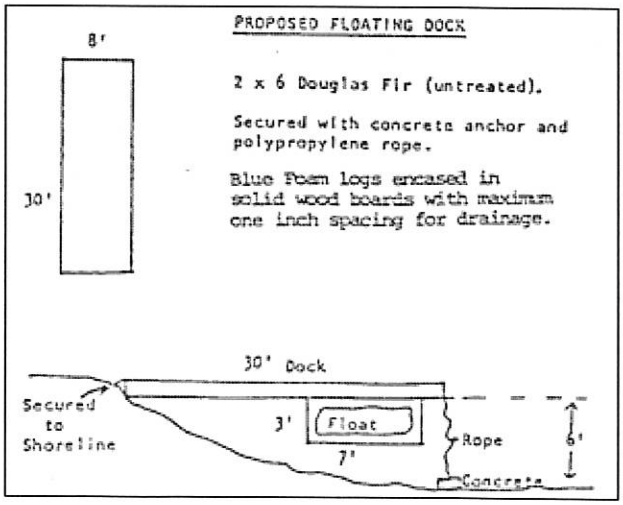
The purpose is to show specific details as to size and type of work proposed (elevations, cross-sections, materials, etc.). These drawings shall include the following:

1. All dimensions of the proposed projects;

2. Materials to be used for the project;

3. Any treatment (preservative, paint, etc.) to be applied to any of the structures. Where paint is proposed.

This is an example of a project drawing. In this case a floating dock is shown.



1035 First Ave West
Kalispell, MT 59901
OFFICE 406.751.8200
FAX 406.751.8210
EMAIL planningweb@flathead.mt.gov
WEB flathead.mt.gov/planning_zoning

CUSTOMER SERVICE SURVEY

Our mission is to provide you with the best possible service. Please help us serve you and others better by taking a few minutes to answer the questions below. Our office genuinely appreciates your time and your feedback.

What was the nature of your contact with us? (Please check all that apply)

General Information
Permitting (Lakeshore, Floodplain, Zoning, Subdivision)
Pre-application Conference
Other_____

Please Check as Appropriate:					
	Strongly Agree	**Agree**	**Disagree**	**Strongly Disagree**	**No Comment**
Staff was courteous and helpful					
Staff provided accurate information to me					
Staff response was considerate of my time					
My overall experience was positive					
Please complete the section below if your contact with us involved permitting:					
The permitting process was understandable					
The regulations were understandable					
Application instructions were understandable					
Terms and conditions of the permit were understandable					

We provide opportunities for staff to be recognized for exemplary customer service. Please indicate the names of any staff person(s) you would like to commend:

_____

_____

If you feel we fell short in meeting your service expectations, please describe the situation including the name of the staff person involved (if applicable) and the date the incident occurred:

_____

_____

_____

_____

As a result of your experience with us, what service-related improvement(s) can you recommend?

_____

_____

_____

_____

Contact Information (Optional)

Your name:_____

Email:_____ Daytime phone:_____

Mailing address:_____

Date submitted:_____

Please hand deliver, email, fax or mail form to:

Flathead County Planning and Zoning
1035 First Avenue West, Ste C200
Kalispell, MT 59901
Email: Planning.Zoning@flathead.mt.gov
Phone: (406) 751-8200
Fax: (406) 751-8210