

**REQUEST FOR EXEMPTION REVIEW**

*Note to Applicant: The purpose of this review is to enable Butte-Silver Bow officials to determine whether or not the proposed use of an exemption would evade the Montana Subdivision and Platting Act and the local subdivision regulations.*

Submit a completed application to the B-SB Planning Department. Electronic submittals may be submitted to: [lcasey@bsb.mt.gov](mailto:lcasey@bsb.mt.gov) and [shess@bsb.mt.gov](mailto:shess@bsb.mt.gov)

**Part One - Applicant Information:**

Landowner(s):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

**Certification: I hereby certify that the purpose of this exemption request is NOT to evade the Montana Subdivision and Platting Act and the B-SB Subdivision Regulations.**

Signature(s) Required: \_\_\_\_\_ Date: \_\_\_\_\_

**Part Two – Legal Description:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Part Three – Basis for Exemption Request:**

What Exemption is being claimed, and what is the basis for your exemption claim?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has a previous exemption been utilized?

\_\_\_ Yes; COS# \_\_\_\_\_ \_\_\_ No

Does any lot/tract have an existing approved wastewater treatment system and well?

\_\_\_ Yes \_\_\_ No

**Part Four – Supporting Information:**

Please provide all pertinent information, including an accurate certificate of survey or amended subdivision plat, as applicable and where required.

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**FOR OFFICIAL USE ONLY**

Date Application Received: \_\_\_\_\_

Date of Review: \_\_\_\_\_

Determination:

- \_\_\_\_\_ Approved.
- \_\_\_\_\_ Approved with conditions outlined below.
- \_\_\_\_\_ Denied.
- \_\_\_\_\_ Submittal is incomplete. Return to applicant for revision.

Conditions/Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed by: