

Elden Young 357-7144

# WATER AND SEWER PERMIT

(R)

Southeastern District Health Department *ll*

PLANNING & ZONING APPROVAL

Name <b>W. H. EHRSTROM</b>	Phone <b>232-4962</b>	Property Address <b>City Water Tank Rd. West side</b>
Address <b>2145 So. Grant st.</b>		Legal Description <b>T6 R34 S35</b>
Report To <b>Same</b>	Funding <input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Governmental <input type="checkbox"/> Conventional <input type="checkbox"/> Existing
		Loan No. <b>—</b>

## SEWAGE SYSTEM

Installation shall comply with all requirements of Health District and/or State of Idaho sewage disposal rules, regulations and standards

Permit No. **2287**

SIZE <b>2</b>	No. Bedrooms	Septic Tank <b>1000 gal.</b>	Disposal Area <b>270 sq. ft.</b>	TYPE <input checked="" type="checkbox"/> Trench <input type="checkbox"/> Pit <input type="checkbox"/> Bod <input type="checkbox"/> E.T.	<input type="checkbox"/> Sand Filter <input type="checkbox"/> Modified	Permit Fee <b>50</b>
Dimensions <b>135ft in 2 lengths (30' each)</b>	Maximum Depth below Ground Surface <b>4ft</b>		PLOT PLAN <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <b>Herald Campbell</b>	Date <b>Dec 9, 1983</b>	
Remarks				Applicant's Signature <b>X W.H. Ehrstrom</b>	Permit Fee	

## INSPECTION

The District Health Department shall be notified of installation **48 hr** prior to installation

SEPTIC TANK <b>1000 gal.</b>	Size	STANDPIPE <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Manhole Depth <b>18"</b>	DEPTH OF <b>N.A.</b>	Ground Water	Bedrock <b>13'</b>	Gravel <b>12"</b>	Rock Under Pipe <b>6"</b>
Minimum Distances as per Regulations <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Approved Aggregate <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Effective Disposal Area <b>300 280 sq. ft.</b>		Installer <b>OWNER</b>		
EXISTING SYSTEM Appears to meet Standards/Regs <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		INSTALLATION <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		By <b>X Herald R Campbell</b>		Date <b>Dec 12, 1983</b>		
Remarks <b>Gravel used was quite dirty. Mr. Ehrstrom indicated that grade from septic tank to drainfield was 1" to level.</b>								

## WATER SYSTEM

Plans Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	State Laboratory indicates intestinal bacteria <input type="checkbox"/> were <input type="checkbox"/> were not found in water.	Sample Collected By	Date	Permit Fee
Min. Distances as per Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No	CHEMICAL TOLERANCES Acceptable Limits <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Chk'd	System <input type="checkbox"/> Public <input type="checkbox"/> Private	Complies with Health Dist. and/or State of Idaho Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No	
Existing System appears to comply with all requirements of Health Dist. and State of Idaho Drinking Water Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No		INSTALLATION <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Disapproved	By <b>X</b>	Date
Remarks <b>Public water supply</b>				Permit Fee

## DIAGRAM

Where applicable, diagram shall include orientation of components of water and sewage systems

