

WATER AND SEWER PERMIT

(R) T65 R34E S21T10  
Southeastern District Health Department

PLANNING & ZONING APPROVAL

3-1937 - work

Name <b>GERALD S Call</b>	Phone <b>232-3121</b>	Property Address <b>8728 Kraft Rd 83204</b>
Address <b>Rt 1 NORTH Box 129 Kraft Rd T65 R34 S21</b>		Legal Description <b>Rt 1 NORTH Box 129 KRAFT Rd</b>
Report To <b>Drama Call same address and phone</b>	Funding <input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Governmental <input type="checkbox"/> Conventional <input type="checkbox"/> Existing

SEWAGE SYSTEM

Installation shall comply with all requirements of Health District and/or State of Idaho sewage disposal rules, regulations and standards. Permit No. **2107**

SIZE No. Bedrooms: <b>1</b> (see attached note 5/23/05) Septic Tank: <b>1000</b> gal.	Disposal Area <b>500</b> sq. ft.	TYPE <input checked="" type="checkbox"/> Trench <input type="checkbox"/> Bed	<input type="checkbox"/> Pit <input type="checkbox"/> E.T.	<input type="checkbox"/> Sand Filter <input type="checkbox"/> Modified	Permit Fee <b>30</b>
Dimensions <b>4' high x 40'</b>	Maximum Depth below Ground Surface <b>3-4'</b>	PLOT PLAN <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <b>Fred Hoffman</b>	Date <b>5/23/03</b>	
Remarks <b>*Complaint invest. result on a system that has failed.</b>	Applicant's Signature <b>X Gerald S Call</b>		Permit Fee <b>pd.</b>		

INSPECTION

The District Health Department shall be notified of installation \_\_\_\_\_ prior to installation

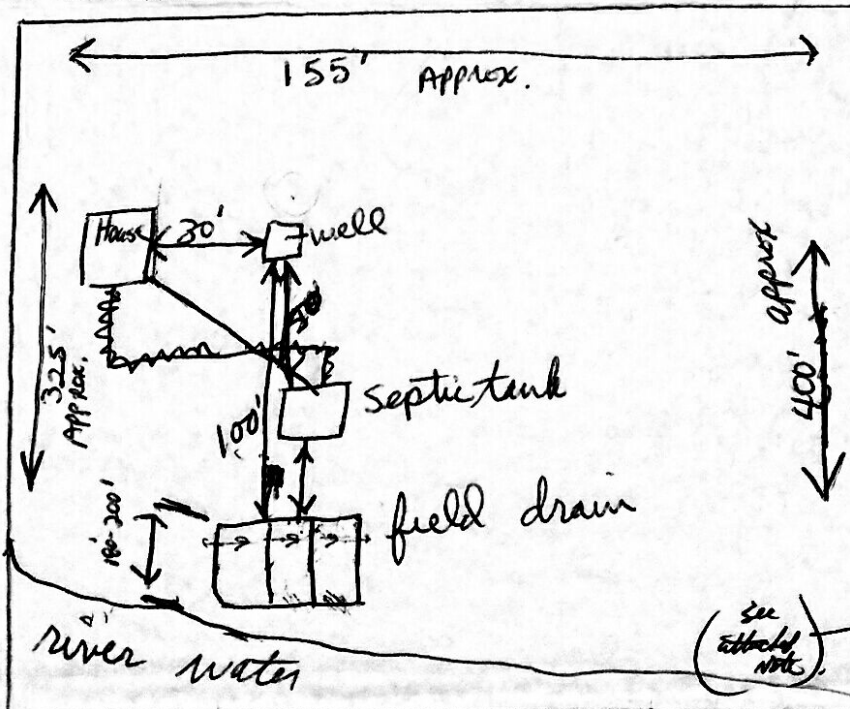
SEPTIC TANK Size: <b>1000</b> gal.	STANDPIPE <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Manhole Depth	DEPTH OF Ground Water	Bedrock	Gravel	Rock Under Pipe <b>6"</b>
Minimum Distances as per Regulations <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Approved Aggregate <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Effective Disposal Area <b>525</b> sq. ft.	Installer <b>Richard Nelson</b>		Date <b>8-9-83</b>	
EXISTING SYSTEM Appears to meet Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No	INSTALLATION <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <b>X David G. Snyder</b>	Date <b>8-9-83</b>			
Remarks <b>As per installer report of same</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 type="checkbox"/> Disapproved	By <b>X</b>	Date	
Remarks				

**X** DIAGRAM

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



\* This is the replacement of an existing system that has failed. Due to the slow perc rate (30 min perc) and the lack of another suitable area, drainfield approved to be 130-140' from the Portneuf River. 5/23/05 - approved for addition of 1 B.R. mobile home. FH