

WATER AND SEWER PERMIT (4)

Southeastern District Health Department

PLANNING & ZONING APPROVAL

Name J.R. Simplot Co.	Phone 232-6620	Property Address H₂SO₄ Acid Plant #4
Address P.O. Box 912 - 83206		Legal Description Sec 7 T 6 S R 34 E 4m
Report To	Funding <input type="checkbox"/> Governmental <input type="checkbox"/> Individual	<input type="checkbox"/> Conventional <input type="checkbox"/> Existing Loan No.

SEWAGE SYSTEM

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

Permit No. 3020					
No. Bedrooms 12 Persons / 24hr	Septic Tank 1000 gal.	Disposal Area 400 sq. ft.	TYPE <input type="checkbox"/> Trench <input type="checkbox"/> Bed <input checked="" type="checkbox"/> Pit <input type="checkbox"/> E.T.	<input type="checkbox"/> Sand Filter <input type="checkbox"/> Modified	Permit Fee \$50.00
Dimensions 12 x 12 x 12 x 9'	Maximum Depth below Ground Surface 18'-0	PLOT PLAN <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By Tom Hopkins	Date 5-1-85	Remarks Backfilling
Applicant's Signature X Roy E. Rhodes			Permit Fee Ad Chg 39736		

INSPECTION

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

SEPTIC TANK SIZE 1000 gal.	STANDPIPE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Manhole Depth 18"	DEPTH OF Ground Water Bedrock Gravel Rock Under Pipe 12"
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 576 sq. ft.	Installer A & C CONSTRUCTION
EXISTING SYSTEM <input type="checkbox"/> Yes <input type="checkbox"/> No	INSTALLATION <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By X Tom Hopkins	Date 5/30/85
Remarks File in folder labeled Simplot.			

TER SYSTEM

Plans Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	State Labels <input type="checkbox"/> were	Sample Collected By	Date	Permit Fee
Min. Distances as per Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No	imits <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 X	Date	
Remarks				Permit Fee

DIAGRAM

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

Note: This Permit is issued to serve 12 employees per 24 hours at the Turbo Generator Building.

12 employees x 35 gallons/person = 420 GALLONS.

Percolation TEST = 4 min/in.

See Attached PLOT PLAN.

Note: Seepage Pit Dimension - 12'-0 square x 12'-0 below inlet

3- 4'-0 Concrete Perforated Cores.