

Hawson Section 33 T6 R34  
**WATER AND SEWER PERMIT**  
 Southeastern District Health Department

PLANNING & ZONING APPROVAL

Name <i>Lane Clezie</i>	Phone	Property Address <i>13542 W. Trailcreek</i>
Address <i>PO Box 1674 Pocatello 83204</i>		Legal Description <i>SW 1/4, SW 1/4 sec 28 T6 R34</i>
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. <b>138</b>						
SIZE	No. Bedrooms <b>4</b>	Septic Tank <i>existing*</i> <del>900</del> gal.	Disposal Area <del>778</del> <b>667</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
Dimensions	Maximum Depth below Ground Surface <b>4"</b>	PLOT PLAN <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		By <i>Margaret M. Somers</i>		Permit Fee <b>30.00</b>
Remarks <i>Will pump up to drain field and gravity flow into field</i>				Applicant's Signature <i>Lane Clezie</i>		Date <b>6-15-90</b>

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

SEPTIC TANK <i>Existing 1000</i> gal.	STANDPIPE <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Manhole Depth <b>1'</b>	DEPTH OF <b>N/A</b>	Ground Water <b>N/A</b>	Bedrock <b>N/A</b>	Gravel <b>N/A</b>	Rock Under Pipe <b>6-12"</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>675</b> sq. ft.	Installer <i>Rex Browning</i>			
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 <i>Richard Gallun</i>		Date <b>8/14/90</b>	
Remarks <i>House on section 33 T6 R34</i>							

SOIL TYPE **B2**

**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 <b>NO Sample Collected</b>	Date	Permit Fee
Min. Distances as per Standards/Regs <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CHEMICAL TOLERANCES <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Chk'd	System <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	Complies with Health Dist. and/or State of Idaho Standards/Regs <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No		INSTALLATION <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <i>Richard Gallun</i>	
Remarks <i>hole where wires enter well head should be sealed</i>				Date <b>8/14/90</b>

**DIAGRAM**

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

