

JURISDICTION 300
 TRAVEL TIME: 30
 INSPECTION TIME: 60

SOUTHEASTERN DISTRICT HEALTH DEPARTMENT
 465 MEMORIAL DRIVE
 POCATELLO, ID

GW, 6W
 FEE PD Y N
 PERMIT # 23314
4/4/92

****APPLICATION AND PERMIT VALID FOR ONE YEAR FROM DATE OF ISSUANCE**

NAME <u>Mike G. Sakelaris</u>	PHONE <u>232-7217</u>	PROPERTY ADDRESS <u>13498 W. Meadowlark Ln.</u>
MAILING ADDRESS: <u>13498 W. Meadowlark</u>	LEGAL DESCRIPTION: LOT SIZE (ACRES) <u>10.0</u>	
STREET/P.O. BOX	1/4 SECTION _____ SECTION <u>33</u> TOWNSHIP <u>6S</u> RANGE <u>34E</u>	
CITY <u>Pocatello</u>	LOT # _____ BLOCK # _____ SUBDIVISION _____	
STATE <u>ID</u> ZIP <u>83204</u>	PARCEL # <u>R3853029802</u> FROM TAX ASSESSOR'S OFFICE	
SEPTIC TANK SIZE <u>1000 Existing gal.</u>	EST TYPE <u>233</u>	EFFECTIVE DISPOSAL AREA <u>556</u> SQ.FT.
	SOIL TYPE <u>B2</u>	MAXIMUM DEPTH BELOW GROUND SURFACE <u>4' possible</u>
		# BEDROOMS <u>3</u>

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

EHS SIGNATURE <u>Angela T. Markham</u>	EHS # <u>72</u>	APPLICANT SIGNATURE <u>Mike G. Sakelaris</u>	DATE <u>7/23/97</u>
REMARKS			

INSPECTION

THE DISTRICT HEALTH DEPARTMENT SHALL BE NOTIFIED OF INSTALLATION 48 HOURS PRIOR TO BACKFILLING

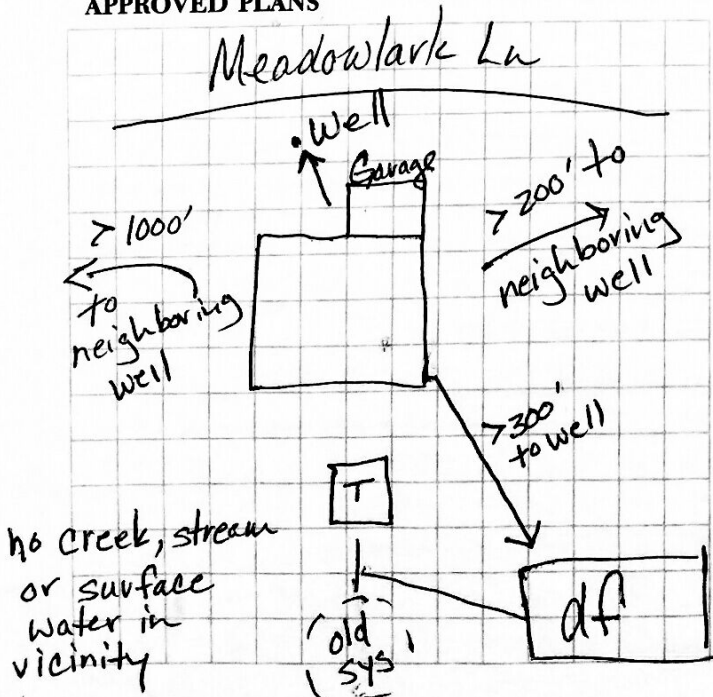
SEPTIC TANK SIZE <u>1000</u> gal	STANDPIPE: () YES (<input checked="" type="checkbox"/>) NO	MANHOLE DEPTH <u>8"</u>	DEPTH BELOW GROUND SURFACE <u>4'</u>	ROCK UNDER PIPE <u>infill</u>
EFFECTIVE DISPOSAL AREA <u>556</u> sq. ft.	INSTALLATION APPROVED <input checked="" type="checkbox"/> DISAPPROVED _____	INSTALLER <u>Skip Yancy</u>	INSTALLER # <u>981</u>	

EHS SIGNATURE <u>Angela T. Markham</u>	DATE <u>10-15-97</u>	EHS # <u>72</u>
REMARKS <u>Code = G</u>		

WATER SYSTEM

PLANS APPROVED YES <input checked="" type="checkbox"/> NO _____	SAMPLE COLLECTED BY _____	DATE _____	STATE LAB INDICATES INTESTINAL BACTERIA WERE _____ WERE NOT _____ FOUND
MIN. DISTANCES PER STANDARDS/REGS. YES <input checked="" type="checkbox"/> NO _____	CHEMICAL PARAMETERS TESTED WITHIN LIMITS YES _____ NO _____	SYSTEM PUBLIC _____ PRIVATE <input checked="" type="checkbox"/>	
WELL (SPRING) APPEARS TO MEET CONSTRUCTION STANDARDS AT TIME OF INSPECTION (<input checked="" type="checkbox"/>) YES () NO	EHS SIGNATURE <u>Angela T. Markham</u>	EHS # <u>72</u>	
REMARKS			

APPROVED PLANS



AS BUILT PLANS

