

2-19-99

GW

JURISDICTION 0390 **H65 SOUTHEASTERN DISTRICT HEALTH DEPARTMENT**
 1901 ALVIN RICKEN DRIVE POCATELLO, ID 83201

FEE PD Y N
 PERMIT # 133976

TRAVEL TIME: 60 / 60 / 60
 INSPECTION TIME: 60 / 60 / 60

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

NAME <u>Pam Howell-Schmidt</u>		PHONE <u>234-0688</u>	PROPERTY ADDRESS <u>2706 N Main</u>		
MAILING ADDRESS:		LEGAL DESCRIPTION: LOT SIZE (ACRES) <u>0.3</u>			
STREET/PO BOX <u>2706 N Main</u>		1/4 SECTION _____ SECTION <u>22</u>		TOWNSHIP <u>6</u>	RANGE <u>34</u>
CITY <u>Pocatello</u>		LOT # _____ BLOCK # _____		SUBDIVISION _____	
STATE <u>Id</u> ZIP _____		PARCEL # <u>RPCPP055400</u> FROM TAX ASSESSOR'S OFFICE			
SEPTIC TANK SIZE <u>1000</u> gal.	EST TYPE <u>Precast</u>	EFFECTIVE DISPOSAL AREA <u>444</u> SQ.FT.	SOIL TYPE <u>B-2</u>	MAXIMUM DEPTH BELOW GROUND SURFACE <u>Replacement</u>	# BEDROOMS <u>2</u>

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

EHS SIGNATURE <u>Craig Maden</u>	EHS # <u>65</u>	APPLICANT SIGNATURE <u>Pam Howell-Schmidt</u>	DATE <u>2/19/99</u>
REMARKS			

INSPECTION

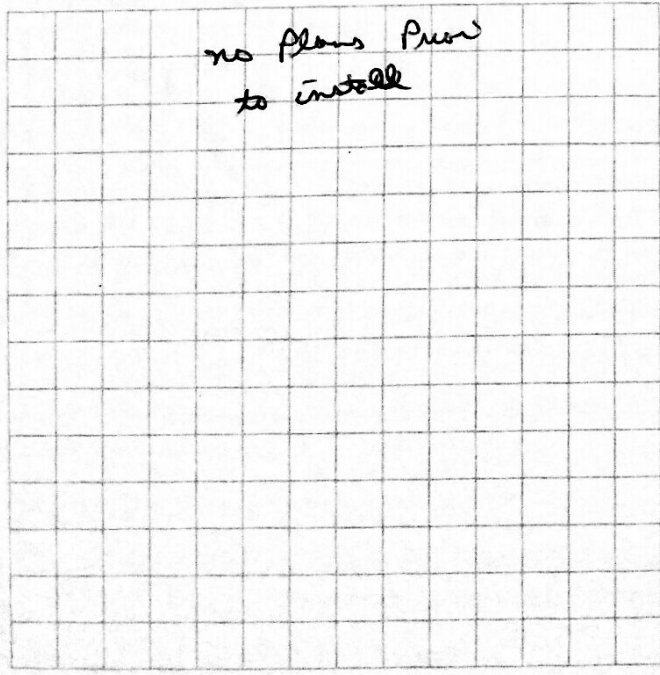
THE DISTRICT HEALTH DEPARTMENT SHALL BE NOTIFIED OF INSTALLATION 48 HOURS PRIOR TO BACKFILLING

SEPTIC TANK SIZE <u>1000</u> gal	STANDPIPE: (<input checked="" type="checkbox"/>) YES () NO	MANHOLE DEPTH <u>6"</u>	DEPTH BELOW GROUND SURFACE <u>7'</u>	ROCK UNDER PIPE <u>None</u>
EFFECTIVE DISPOSAL AREA <u>556</u> sq. ft.	INSTALLATION APPROVED _____ DISAPPROVED <input checked="" type="checkbox"/>	INSTALLER <u>Blaine Halder (not licensed)</u> INSTALLER # _____		

EHS SIGNATURE <u>Craig Maden</u>	DATE <u>2-19-99</u>	CODE <u>G</u>	EHS # <u>65</u>
REMARKS <u>* Driveway too close to foundation & unlicensed installed</u>			

PLANS APPROVED <u>no plans prior to install</u>	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 <input checked="" type="checkbox"/> PRIVATE _____	
WELL (SPRING) APPEARS TO MEET CONSTRUCTION STANDARDS AT TIME OF INSPECTION () YES () NO	EHS SIGNATURE <u>cm</u> EHS # _____		
REMARKS			

APPROVED PLANS



AS BUILT PLANS

