

JURISDICTION

SOUTHEASTERN DISTRICT HEALTH DEPARTMENT  
1901 ALVIN RICKEN DRIVE POCATELLO, ID 83201

9109  
FEE PD  Y  N  
PERMIT # 152925

TRAVEL TIME: 30 min  
INSPECTION TIME: 45 min

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

NAME: James Eborn		PHONE: 237-0842	PROPERTY ADDRESS		
MAILING ADDRESS: 4626 Targhee		LEGAL DESCRIPTION: LOT SIZE (ACRES) 2.77			
STREET/P.O. BOX		1/4 SECTION NE SECTION 8 TOWNSHIP 6 RANGE 34			
CITY: Chubbuck		LOT # _____ BLOCK # _____ SUBDIVISION _____			
STATE: IDAHO		ZIP: 83202		PARCEL # R3853014608 FROM TAX ASSESSOR'S OFFICE	
SEPTIC TANK SIZE: 1000 gal.	EST TYPE: 232	EFFECTIVE DISPOSAL AREA: 556 SQ.FT.	SOIL TYPE: B2	MAXIMUM DEPTH BELOW GROUND SURFACE: 4ft	# BEDROOMS: 3

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

EHS SIGNATURE: <i>[Signature]</i>	EHS #: 109	APPLICANT SIGNATURE: <i>[Signature]</i>	DATE: 04/12/01
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REMARKS: ~~Do not Flood Trigate near septic system. Enlarge system if have more than 3 bedrooms.~~

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

SEPTIC TANK SIZE (2): 1500 gal	STANDPIPE: ( ) YES (X) NO	MANHOLE DEPTH: 18 inches	DEPTH BELOW GROUND SURFACE: 4ft	ROCK UNDER PIPE: 6 inches
EFFECTIVE DISPOSAL AREA: 556 sq. ft.	INSTALLATION APPROVED: X	DISAPPROVED: _____	INSTALLER: Richard Nelson	INSTALLER #: 924

EHS SIGNATURE: Wendi Jane	DATE: 5-8-01	CODE: (B)	EHS #: 74
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WATER SYSTEM			
PLANS APPROVED: YES X NO _____	SAMPLE COLLECTED BY	DATE	STATE LAB INDICATES INTESTINAL BACTERIA WERE _____ WERE NOT _____ FOUND
MIN. DISTANCES PER STANDARDS/REGS. YES X NO _____	CHEMICAL PARAMETERS TESTED WITHIN LIMITS YES _____ NO _____		SYSTEM PUBLIC _____ PRIVATE X
WELL (SPRING) APPEARS TO MEET CONSTRUCTION STANDARDS AT TIME OF INSPECTION: (X) YES ( ) NO	EHS SIGNATURE: Wendi Jane		EHS #: 74

