

Line # 2949 - please contact

# WATER AND SEWER PERMIT

Southeastern District Health Department

## NAME & ZONING APPROVAL

Name <b>Edwin R. Mann</b>	Phone <b>232-7161</b>	Property Address <b>AMERICAN Rd</b>
Address <b>2949 AMERICAN Rd</b>	Legal Description <b>167' X 140'</b>	<b>0.3880 sq. ft.</b> <b>2 ACRES</b>
Report To	Funding <input type="checkbox"/> Governmental <input checked="" type="checkbox"/> Individual	Loan No. <b>6 35 31</b>
	<input type="checkbox"/> Conventional <input type="checkbox"/> Existing	

### SEWAGE SYSTEM

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

SIZE <b>3</b>	No. Bedrooms <b>3</b>	Septic Tank <b>1000 gal.</b>	Disposal Area <b>453 sq. ft.</b>	TYPE <input checked="" type="checkbox"/> Trench <input type="checkbox"/> Pit <input type="checkbox"/> Bed	<input type="checkbox"/> Sand Filter <input type="checkbox"/> Modified <input type="checkbox"/> E.T.	Permit Fee <b>None</b>
Dimensions <b>3' x 75'</b>	Maximum Depth below Ground Surface	PLANT PLAN	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <b>Jack E. Bennett</b>	Date <b>3/19/79</b>	Permit Fee <b>None</b>
Remarks <b>Do Not Backfill Without Prior Notice</b>				Applicant's Signature <b>Edwin Mann</b>		

### INSPECTION

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

SEPTIC TANK SIZE <b>1000 gal.</b>	STANDPIPE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Manhole Depth <b>13"</b>	DEPTH OF Ground Water	Bedrock	Gravel	Rock Under Pipe
Minimum Distances as per Regulations <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved Aggregate <input type="checkbox"/> Yes <input type="checkbox"/> No	Effective Disposal Area <b>450 sq. ft.</b>	Installer <b>Self</b>			
EXISTING SYSTEM <input type="checkbox"/> Yes <input type="checkbox"/> No	Appears to meet Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No	INSTALLATION <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <b>Jack E. Bennett</b>	Date <b>12/28/79</b>		
Remarks <b>2 lines 3' x 65' with 15' x 3' ends</b>						

### 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	Date	Permit Fee
Min. Distances as per Standards/Regs <input type="checkbox"/> Yes <input type="checkbox"/> No	CHEMICAL TOLERANCES <input type="checkbox"/> Yes <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 <b>X</b>	Date	Permit Fee
Remarks				

### DIAGRAM

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

11-1-79 -  
Septic Tank inspected and approval given to cover on 11-1-79 +H

SLOPE ↓

