

**WATER AND SEWER PERMIT**

Southeastern District Health Department

PLANNING & ZONING APPROVAL

Name <b>ATTIBERRY, William C.</b>	Phone <b>232-8781</b>	Property Address <b>BARNOCK Hvy + PINE CREEK</b>
Address <b>4770 Comanche</b>	Legal Description <b>Platted W 1/2, NE 1/4, Sec 20, T7S, R35E</b>	
Report To	Funding <input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Governmental <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

Permit No. **3029**

SIZE No. Bedrooms <b>3</b>	Septic Tank <b>1000 gal.</b>	Disposal Area <b>375 sq. ft.</b>	TYPE <input checked="" type="checkbox"/> Trench <input type="checkbox"/> Pit <input type="checkbox"/> Bed	<input type="checkbox"/> Pn <input type="checkbox"/> E.T.	<input type="checkbox"/> Sand Filter <input type="checkbox"/> Modified	Permit Fee <b>50.00</b>
Dimensions	Maximum Depth below Ground Surface	PLOT PLAN <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By <b>Tom Perkins</b>		Date <b>5-6-85</b>	
Remarks			Applicant's Signature <b>x William C Attiberry Sr</b>		Permit Fee <b>50.00</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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Manhole Depth <b>12"</b>	DEPTH OF <b>&gt; 80"</b>	Ground Water	Bedrock <b>240</b>	Gravel <b>None</b>	Rock Under <b>3 1/2'</b>	
Minimum Distances as per Regulations <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved Aggregate <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Effective Disposal Area <b>360</b> sq. ft.	By <b>James J. Condit</b>					Date <b>6/3/85</b>
EXISTING SYSTEM Appears to meet Standards/Regs <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	INSTALLATION <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Disapproved		Remarks <b>(1) Aggregate in middle trench fill with soil (disapproval) (2) Depth of aggregate beneath drain tile (3 1/2' - 4') (disapproval) (3) Disposal area = 360 sq ft (disapproval)</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 checked="" type="checkbox"/> Disapproved		By <b>X</b>	
Remarks			Permit Fee	

**DIAGRAM**

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

