

JURISDICTION

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

FEE PD X Y N  
PERMIT # 153592

TRAVEL TIME: 30  
INSPECTION TIME: 30/15

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

|                                |               |   |                                |  |               |
|--------------------------------|---------------|---|--------------------------------|--|---------------|
| NAME<br>Ryan Friedel           |               | PHONE<br>775-3740                               | PROPERTY ADDRESS<br>Inman Road |  |               |
| MAILING ADDRESS:<br>PO BOX 309 |               | LEGAL DESCRIPTION: LOT SIZE (ACRES)             |                                |  |               |
| STREET/P.O. BOX                |               | W SECTION 5                                     | SECTION 12                     | TOWNSHIP 7                             | RANGE 36      |
| CITY Idaho                     |               | LOT # _____ BLOCK # _____ SUBDIVISION _____     |                                |  |               |
| STATE IDAHO                    |               | PARCEL # R4015004902 FROM TAX ASSESSOR'S OFFICE |                                |  |               |
| SEPTIC TANK SIZE: 900 gal.     | EST TYPE: 232 | EFFECTIVE DISPOSAL AREA: 333 SQ.FT.             | SOIL TYPE: B2                  | MAXIMUM DEPTH BELOW GROUND SURFACE: 4F | # BEDROOMS: 1 |

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

|                                     |             |                                     |                  |
|-------------------------------------|-------------|-------------------------------------|------------------|
| EHS SIGNATURE<br><i>[Signature]</i> | EHS #<br>69 | APPLICANT SIGNATURE<br>Ryan Friedel | DATE<br>05/29/01 |
|-------------------------------------|-------------|-------------------------------------|------------------|

REMARKS

INSPECTION

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

|                                      |                           |                          |                                |                                   |
|--------------------------------------|---------------------------|--------------------------|--------------------------------|-----------------------------------|
| SEPTIC TANK SIZE: 1000 gal           | STANDPIPE: ( ) YES (X) NO | MANHOLE DEPTH: 12 inches | DEPTH BELOW GROUND SURFACE: 3F | ROCK UNDER PIPE: 15 IN. / 18 DEGS |
| EFFECTIVE DISPOSAL AREA: 444 sq. ft. | INSTALLATION APPROVED: X  | DISAPPROVED: _____       | INSTALLER: Dale Mathews        | EHS # 916                         |

|                                     |                  |           |             |
|-------------------------------------|------------------|-----------|-------------|
| EHS SIGNATURE<br><i>[Signature]</i> | DATE<br>11/14/01 | CODE<br>B | EHS #<br>69 |
|-------------------------------------|------------------|-----------|-------------|

REMARKS Pump Tank every 3 to 5 years. System can handle flows from a (2) bedroom home. No more.

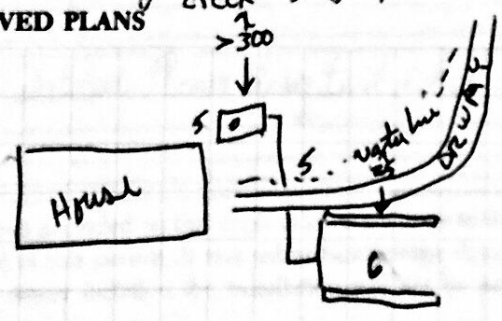
WATER SYSTEM

|   |   |                               |   |
|---|---|-------------------------------|---|
| PLANS APPROVED: YES X NO _____                        | SAMPLE COLLECTED BY   | DATE                          | STATE LAB INDICATES INTESTINAL BACTERIA WERE _____ WERE NOT _____ FOUND |
| MIN. DISTANCES PER STANDARDS/REGS. YES _____ NO _____ | CHEMICAL PARAMETERS TESTED WITHIN LIMITS YES _____ NO _____ | SYSTEM PUBLIC _____ PRIVATE X |   |

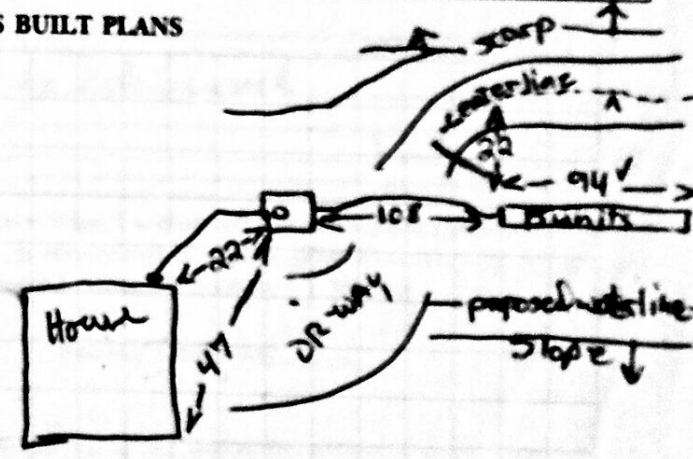
|  |               |       |
|--|---------------|-------|
| WELL (SPRING) APPEARS TO MEET CONSTRUCTION STANDARDS AT TIME OF INSPECTION ( ) YES ( ) NO <i>Spring not captured</i> | EHS SIGNATURE | EHS # |
|--|---------------|-------|

REMARKS Double check water line running parallel to drainfield to 25 ft extension from non stand. Your water line may be infringing upon the 25 ft setback to drainfields.

APPROVED PLANS



AS BUILT PLANS



- A: 200 ft to Surface water
- B: 100 ft to any wall
- C: 25 ft to water line
- D: 5 ft to prop. line



- No wells within 100 ft
  - property line > 5 ft
  - No water line
- measurements to tank are not from cleanout but from corners of House