

gwl, ccw
Southeastern District Health Department

Receipt # 7791

Fee PD Y N
 Permit # 169575

Jurisdiction 300

EHS # 58 / 65
 Date 5/19/06 / 5/24/06
 Travel Time 45 / 45
 Inspection Time 45 / 45

APPLICATION & PERMIT VALID FOR ONE YEAR FROM DATE OF ISSUANCE Exp. Date 5-10-2007

Name Paul B. Grayson Phone 233-8898 / 251-2686 Property Address 364 N. Bonneville Rd. Inkom ID.
 Mailing Address _____ Legal Description: Lot Size (Acres) 5
 Street/P.O. Box 144 Spence 1/4 Section _____ Section 31 Township 7 South Range 37 East
 City Pocatello Lot # _____ Block # _____ Subdivision _____
 State Idaho Zip 83201 Parcel # _____ From Tax Assessor's Office

Septic Tank Size 1000 gal. Est. Type 232 Effective Disposal Area 833 Sq. Ft. Soil Type C-1 Maximum-Depth-Below Ground Surface at 2' # Bedrooms 3

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

Date 5-10-2006 EHS Signature Ken Keller EHS # 58 Applicant Signature Paul B Grayson
 Remarks Drainfield must be minimum 100' from any well, 200' from creek. Septic tank must be minimum 50' from any well and 50' minimum from creek.

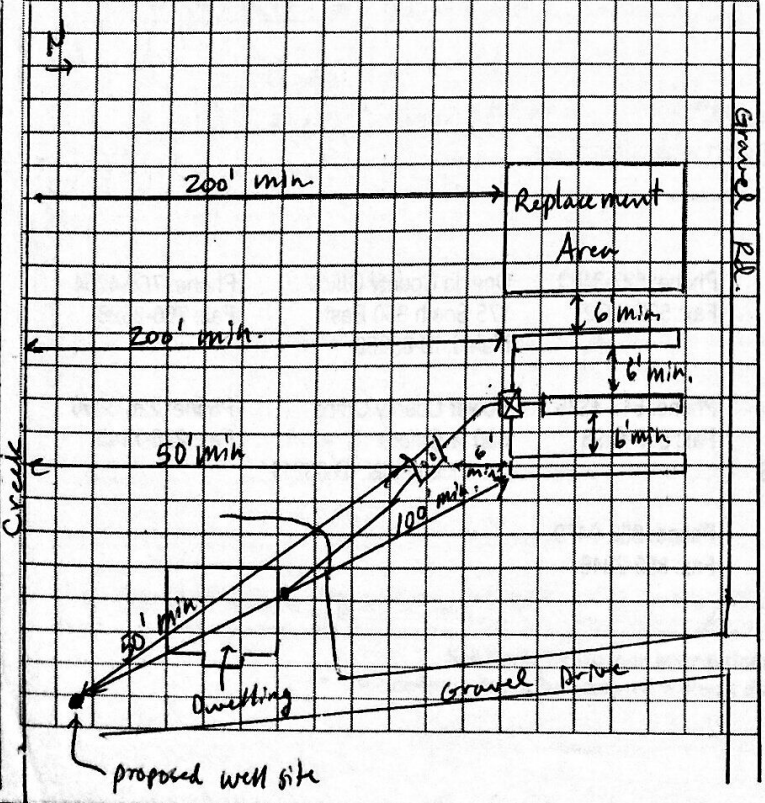
INSPECTION
 THE DISTRICT HEALTH DEPARTMENT SHALL BE NOTIFIED OF INSTALLATION 48 HOURS PRIOR TO BACKFILLING

Septic Tank Size 1000 gal. Standpipe Y 2' Manhole Depth 8" Depth Below Ground Surface 2' Rock Under Pipe 45 Quick 4 Infiltrators
 Effective Disposal Area 833 sq. ft. Code G **INSTALLATION** APPROVED DISAPPROVED Installer Dean Larsen Installer # 26801
 EHS Signature Chris Madison Date 5/24/2006 EHS # 65
 Remarks Soil type low tapered on Subgroup due to cobble/rocky conditions.

WATER SYSTEM

Min. Distances Per Regs. From Septic System Y N Water System Public _____ Private
 Remarks _____

APPROVED PLANS



AS BUILT PLANS

