

11-6-00

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5038

JURISDICTION 300 65 SOUTHEASTERN DISTRICT HEALTH DEPARTMENT
1901 ALVIN RICKEN DRIVE POCATELLO, ID 83201

FEE PD K Y N
PERMIT #150062

TRAVEL TIME: 60
INSPECTION TIME: 60

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

NAME <u>Bruce Kilgore</u>		PHONE <u>251-5438</u>	PROPERTY ADDRESS <u>Bennock Hwy 38</u>		
MAILING ADDRESS: <u>STREET/P.O. BOX 2950</u>		LEGAL DESCRIPTION: LOT SIZE (ACRES) _____			
CITY <u>Poc</u>		1/4 SECTION <u>SW</u> SECTION <u>8</u> TOWNSHIP <u>8</u> RANGE <u>35</u>			
STATE <u>Id</u>		LOT # _____ BLOCK # _____ SUBDIVISION _____			
ZIP <u>83206</u>		PARCEL # <u>R4059000600</u> FROM TAX ASSESSOR'S OFFICE			
SEPTIC TANK SIZE <u>1250</u> gal.	EST TYPE <u>232</u>	EFFECTIVE DISPOSAL AREA <u>778</u> SQ.FT.	SOIL TYPE <u>B-2</u>	MAXIMUM DEPTH BELOW GROUND SURFACE <u>4'</u>	# BEDROOMS <u>5</u>

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

EHS SIGNATURE <u>Craig Madison</u>	EHS # <u>65</u>	APPLICANT SIGNATURE <u>Madison</u>	DATE <u>9-26-00</u>
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REMARKS

INSPECTION

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

SEPTIC TANK SIZE <u>1250</u> gal	STANDPIPE: () YES (<input checked="" type="checkbox"/>) NO	MANHOLE DEPTH <u>8"</u>	DEPTH BELOW GROUND SURFACE <u>4'-3"</u>	ROCK UNDER PIPE <u>Intill tractors</u>
EFFECTIVE DISPOSAL AREA <u>778</u> sq. ft.	INSTALLATION APPROVED <input checked="" type="checkbox"/> DISAPPROVED _____	INSTALLER <u>American Heritage</u> INSTALLER # <u>8672</u>		

EHS SIGNATURE <u>Craig Madison</u>	DATE <u>11-6-00</u>	CODE <u>G</u>	EHS # <u>65</u>
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REMARKS Manhole location: 15' S of NW corner home + 28' from inner corner NW

WATER SYSTEM

PLANS APPROVED YES <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/>	
WELL (SPRING) APPEARS TO MEET CONSTRUCTION STANDARDS AT TIME OF INSPECTION () YES () NO	EHS SIGNATURE _____ EHS # _____		

REMARKS

APPROVED PLANS Mich Creek Rd - TN AS BUILT PLANS

