

# WATER AND SEWER PERMIT

Southeastern  
District Health Department

PLANNING & ZONING APPROVAL

Name <b>DAVID E HILDEBRANDT</b>	Phone <b>233-7000</b>	Property Address <b>4444 JOHNNY CREEK</b>
Address		Legal Description <b>Sec 12 T 7S R 3E</b>
Report To	Funding <input type="checkbox"/> Governmental <input type="checkbox"/> Individual	<input type="checkbox"/> Conventional <input type="checkbox"/> Existing Loan No.

## SEWAGE SYSTEM

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

Permit No. <b>3176</b>	
No. Bedrooms: <b>4</b> Septic Tank: <b>1000 gal.</b> Disposal Area: <b>600 sq. ft.</b>	TYPE: <input type="checkbox"/> Trench <input checked="" type="checkbox"/> Pit <input type="checkbox"/> Bed <input type="checkbox"/> E.T.
Dimensions: <b>18'-0"</b> Maximum Depth below Ground Surface: <b>18'-0"</b>	Sand Filter: <input type="checkbox"/> Modified: <input type="checkbox"/>
PLOT PLAN: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By: <b>Tom Hopkins</b> Date: <b>12.12.85</b>
Remarks	Applicant's Signature: <i>[Signature]</i> Permit Fee: <b>\$293</b>

## INSPECTION

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

SEPTIC TANK Size: <b>1000 gal.</b>	STANDPIPE: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Manhole Depth: <b>3 feet</b>	DEPTH OF: <b>100-ft</b>	Ground Water	Bedrock	Gravel	Rock Under Pipe
Minimum Distances as per Regulations: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved Aggregate: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Effective Disposal Area: <b>600</b> sq. ft.	Installer: <b>FRASURE CONST</b>				
EXISTING SYSTEM: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Appears to meet Standards/Regs: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	INSTALLATION: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By: <b>G. J. Munnell</b>		Date: <b>12.19.85</b>		
Remarks: <b>Existing pit needs replaced I think 8-9" sewer rock under system</b>							

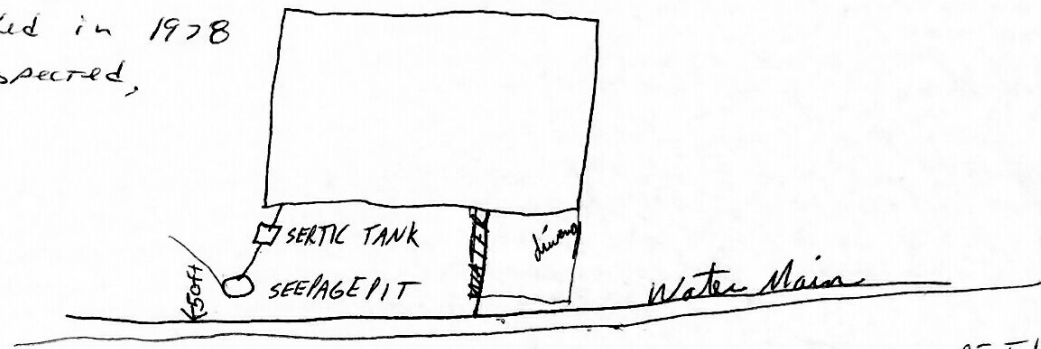
## WATER SYSTEM

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	
Remarks				Permit Fee

## DIAGRAM

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

**NOTE: Replacement system for one that has failed. Primary system was installed in 1978 but not inspected,**



**Note: system replacement 13'w x 13'd x 14' length. JOHNNY CREEK Rd. as inspected 12.19.85.**