97040

SUBSURFACE SEWAGE DISPOSAL SYSTEM PERMIT

DISTRICT SEVEN HEALTH DEPARTMENT

sepfm1 4/ 1/94

"THIS PERMIT IS ONLY VALID FOR ONE YEAR FROM DATE OF ISSUE"

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

Standard _____ Standard Large _____ Alternative X

Name [redacted] Address RT 1 BOX 151 SALMON ID 83467 PERMIT NO. 94-163

Legal description: T 21N R 22E Sect. _____ ¼ sect SD: COUNTY: 3000

MINIMUM SPECIFICATIONS FOR SEPTIC TANK (Tanks must be State approved)	MINIMUM SPECIFICATIONS FOR DISPOSAL AREA
Size of tank 1500 GALLONS	Type of system * SEE REQUIREMENTS
Size of dosing tank 700 GALLONS	Size of disposal area: *
Distance from:	Depth of system *
domestic water supply(well) 50 FT	Distance from :
water distribution line 10 FT	domestic water supply(well) 100 FT
permanent/intermittent surface water 50 FT	water distribution line 10 FT
temporary surface water 25 FT.	permanent/intermittent surface water 300 FT
downslope cut or scarp 25 FT	temporary surface water/irrigation canals/ditches 50 FT
building foundation 5 FT	downslope cut or scarp 75 FT
property line 5 FT	building foundation 10 FT
	property line 5 FT

Specific requirements:

SYSTEM DESIGN AND DEPTH IS TO BE DETERMINED BY GROUNDWATER MONITORING. DISPOSAL AREA WILL BE DETERMINED WITH SYSTEM DESIGN. INITIAL TESTHOLE ON DEC. 29, 1994 INDICATES WATER IS AT 4'5" - LOW GROUNDWATER PERIOD OF THE YEAR.

Issued by: Steve Alcorn Date: 12/29/94

THIS PERMIT IS ISSUED WITH THE UNDERSTANDING THAT THE SYSTEM WILL BE INSTALLED AS PER THE PROPOSAL. ANY CHANGES MUST FIRST BE SUBMITTED TO THE HEALTH AUTHORITY FOR APPROVAL.

EXPIRATION DATE 12/29/95

INSPECTION

[X] System is in substantial compliance with the regulations and the permit specifications.

[ ] System has minor deficiencies that could decrease the life of the system.

[ ] System has major deficiencies that must be corrected.

Comments:

Reviewed by: SA [X] Approved [ ] Disapproved Date: 10/18/95

T-CODE 234 TRAVEL TIME 60 MIN INSPECTION TIME 40 MIN ACTION CODE L

SEWAGE SYSTEM APPLICATION

DISTRICT SEVEN HEALTH DEPARTMENT

DEPARTMENT #163-94

"THIS IS AN APPLICATION FOR A PERMIT ONLY". A SEWAGE DISPOSAL PERMIT IS STILL NEEDED BEFORE YOU START CONSTRUCTION. A NON-REFUNDABLE FEE OF $150.00 IS TO BE SUBMITTED WITH YOUR PROPOSAL. PAYMENT OF THIS FEE DOES NOT NECESSARILY GUARANTEE ISSUANCE OF A PERMIT. THIS FEE WILL BE IN EFFECT FOR ONE YEAR FROM THE DATE OF ISSUANCE. COST TO RENEW THE PERMIT BEFORE ISSUE DATE IS $45; AFTER ONE YEAR THE FULL FEE IS DUE AGAIN.

TO OBTAIN A SEPTIC PERMIT, PLEASE BRING THIS COMPLETED FORM TO DIST. 7 HEALTH DEPT. IF YOUR PROPOSAL MEETS THE REGULATIONS, A PERMIT TO START CONSTRUCTION WILL BE ISSUED.

Date _____ New X Replacement _____

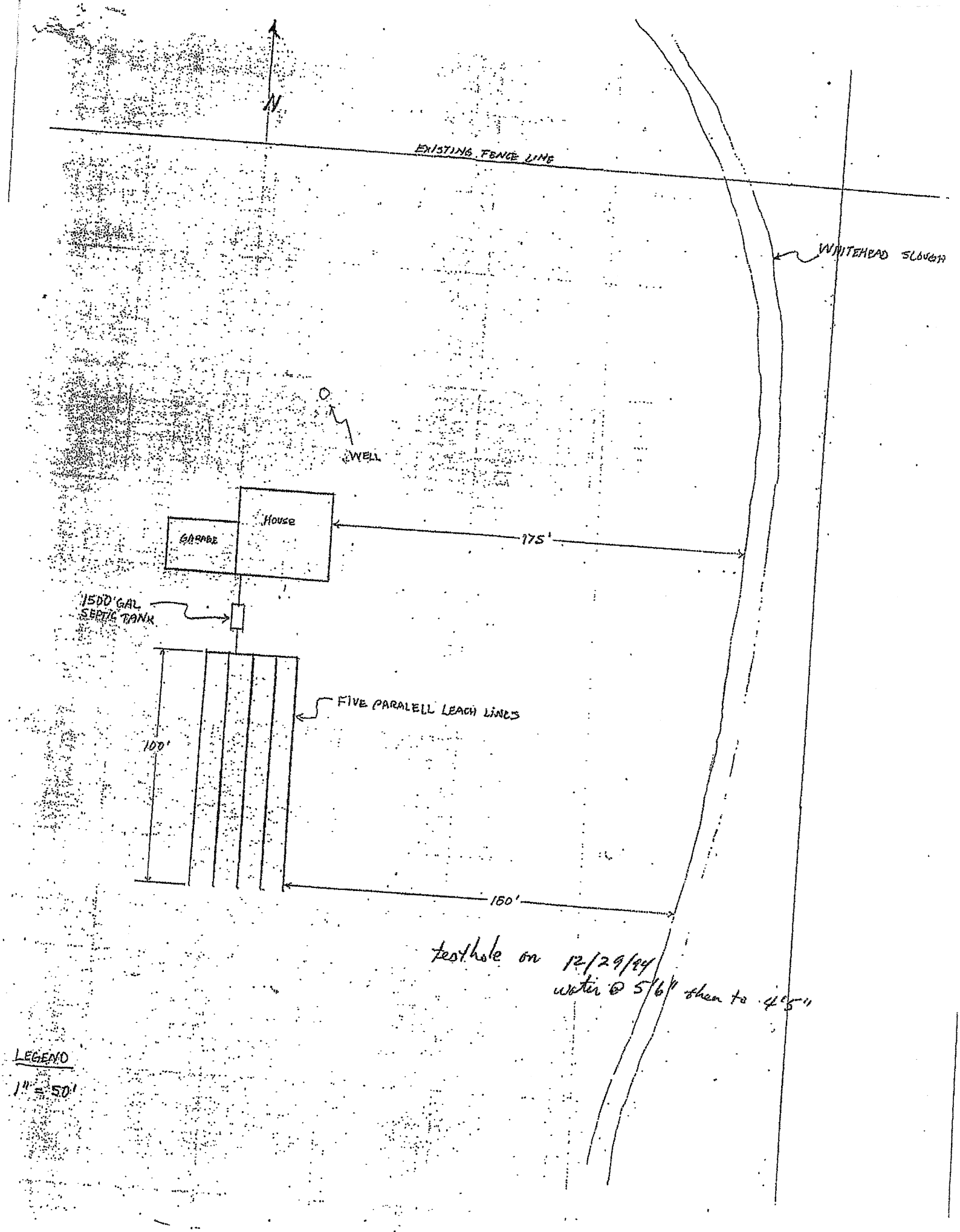
Applicant's name L. Van & Celeste Whitehead		Home phone 756-3263	Work phone Same
Complete Current mailing address Rt. 1 Box 157 Salmon Id			
PROPERTY INFORMATION			
Legal description SE¼, NW¼, SE¼, Sec. 18 T 21 N	Township 21 N	Range 22 E	Section 1/4 sect. 1
Subdivision name None		Lot	Block
Address of property South Saint Charles St.			
Directions to property 2 miles South on Saint Charles Street			
WATER SUPPLY			
Is this water supply: Private X or Public _____ If public, name of system _____			
STRUCTURE INFORMATION			
Will this be a single family dwelling? yes Is there a basement? NO			
Commercial systems require separate application.			
If dwelling, number of bedrooms 6 number of people served 8			

SEE REVERSE FOR DIRECTIONS ON DRAWING A PROPOSED PLOT PLAN.

FOR OFFICE USE ONLY:
Receipt # 53937 Amount 150.00 County 30 EHS 09

12/28/94

163-94


N
EXISTING FENCE LINE
WHITEHEAD SLOUGH
WELL
House
GARAGE
175'
1500 GAL SEPTIC TANK
FIVE PARALELL LEACH LINES
100'
160'
testhole on 12/29/84
water @ 5'6" then to 4'5"
LEGEND
1" = 50'

DISTRICT SEVEN HEALTH DEPARTMENT

ALTERNATIVE SYSTEM INSPECTION SUPPLEMENT

Permit # 94-163

Name Vaal Whitehead

PRESSURE DISTRIBUTION SYSTEM

INSTALLER Dahle

Septic 1500 gallon
DOSING TANK: Size 1000 Manufacturer Dahle Watertight/grouted? Yes

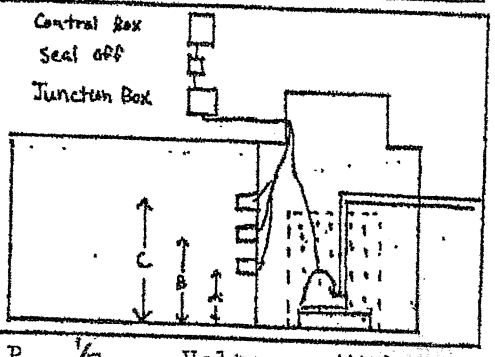
Septic tank filter or pump screen manufacturer 15" OST Model 15 X 60

ELECTRICAL: Visual/audio alarm on separate circuit? Yes Wires in conduit? Yes

Control box model S-1

Seal-off model

A =
B =
C =
DOSE = 40
18" TDH
14 GPM



PUMP: Mfr. Franklin Model 2445040117 H.P. 1/2 Voltage 115

For effluent? Yes Quick disconnect Yes Size of discharge 1"

Elevation difference between pump and laterals 5 ft

TRANSPORT PIPE: Type Sch 40 Size 2" Length 370

MANIFOLD: Type Sch 40 Size 2" Length 6

LATERALS: Type Sch 40 Size 1¼" Length 30

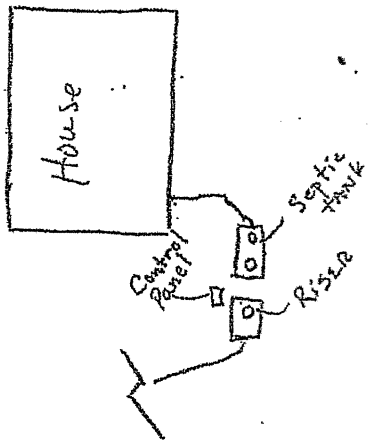
24 30' total

ORIFACES: Size ⅛" Spacing 2' oc. Oriented down

End caps or interconnected laterals? Caps

System tested for uniform distribution? Yes

SKETCH



INTERMITTENT SAND FILTER

ASTM C-33 Source Quantity

Container type Size

Watertight and meets all other requirements of the Technical Guidance Manual, and constructed according to approved plans?

INTRENCH SAND FILTER Pressure Gravity

ASTM C-33 Source Depth

SAND MOUND Dimensions 24 X 50

ASTM C-33 ✓ Source Dahle Quantity 30 yds.

Bed dimensions 10 X 33 Sand below bed 1'

Basal area ripped or scarified? Scarified

Pneumatic-tired vehicles used? No

Standpipe installed in bed? No