

PERMIT-Subsurface Sewage Disposal



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Idaho Public Health Districts

Panhandle Health District

8500 N. ATLAS
HAYDEN, ID 83835
(208) 415-5200

Permit # : 15-28-130504
Date : 04/06/2015
Parcel # : 0587000A0040
Doc ID # :

Applicant's Name: JOHN PARSON
Owners Name: JOHN PARSON
Property Address: 10556 E FAR CRY RD , ATHOL, ID 83801

Legal Description	Township 53N	Range 03W	Section 13
Subdivision: PEACEFUL ACRES	Lot 04	Block A	Size(acres): 10

Type of Installation	Type of System (check all that apply)			Water Supply
<input checked="" type="checkbox"/> New System <input type="checkbox"/> Expansion <input type="checkbox"/> Repair <input type="checkbox"/> Tank Only	<input type="checkbox"/> Absorption Bed <input type="checkbox"/> Capping Fill <input type="checkbox"/> Central System <input type="checkbox"/> Composting Toilet <input type="checkbox"/> Drip Distribution <input type="checkbox"/> ETPS <input type="checkbox"/> Experimental <input type="checkbox"/> Extra Drainrock <input type="checkbox"/> Evapotranspiration <input checked="" type="checkbox"/> Gravel Drainfield	<input checked="" type="checkbox"/> Gravelless Drainfield <input type="checkbox"/> Gray Water Sump <input type="checkbox"/> Gray Water System <input type="checkbox"/> Holding Tank <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Individual Lagoon <input type="checkbox"/> Intermittent SF <input type="checkbox"/> Intrench SF <input type="checkbox"/> LSAS <input type="checkbox"/> Pit Privy	<input type="checkbox"/> Pressurized DF <input type="checkbox"/> Pump to Gravity <input type="checkbox"/> Recirculating GF <input type="checkbox"/> RV Dump Station <input type="checkbox"/> Sand Mound <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Steep Slope Drainfield <input type="checkbox"/> Two Cell Lagoon <input type="checkbox"/> Vault Privy <input type="checkbox"/> Other (see below)	<input checked="" type="checkbox"/> Private <input type="checkbox"/> Shared <input type="checkbox"/> Public
<input checked="" type="checkbox"/> Basic System <input type="checkbox"/> Complex System				Water Source <input checked="" type="checkbox"/> Well <input type="checkbox"/> Spring

Condition of Approval:

This permit is for the installation of a septic tank and drainfield to serve a 3 bedroom single family dwelling. The drainfield must be located in the area of the approved test holes and as noted on the attached/ approved plot plan. Water Service lines must be double encased if located within 25 feet of a drainfield. Sewer lines/ effluent lines must be double encased under roadways. No parking, driving, structures or livestock over the drainfield or replacement area. Manufacturer's recommendations must be followed on all components. The drainfield must follow the contour of the native slopes. Drainfield must not exceed 48 inches in depth. If the septic system requires a pump to transport the effluent to the drainfield then the system must be installed by a complex licensed installer. Unless otherwise stated within this permit, all requirements of IDAPA 58.01.03 shall be met on system installation. **Per IDAPA 41.01.01.100.05.b.- A drainfield that is installed, inspected and approved shall be valid to be connected to under the conditions of the original permit for which it was issued, for five (5) years from the date of permit application, provided that the site and its surroundings are not substantially modified.**

Single Family Dwelling	3 Bedrooms
Design Flow	250 Gallons Per Day
Soil Type (USDA) A-2a	Loading Rate 1
The minimum septic tank capacity is:	1000 Gallons
The minimum effective drainfield absorption area is:	250 Square Feet
The drainfield can be no closer to permanent/intermittent surface water than:	300 Feet

Note: (Final approval of this permit requires inspection of the uncovered system.)

All plans, specifications, and conditions contained in the approved permit application are hereby incorporated into, and are enforceable as part of the permit. The permit will expire one (1) year from date of issuance. The permit may be renewed if the renewal is applied for on or before the expiration date.

Kristina Keating
EHS Signature

KRISTINA KEATING
EHS

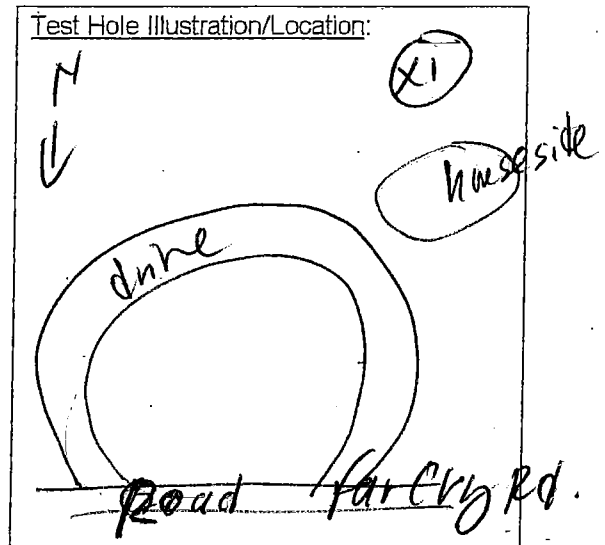
04/06/2015
Date

APPLICATION-Subsurface Sewage Disposal, Page 2

(Page 2 for Official Use)

Parcel #: 058700A0040
 Application #: 15-28-130504

Test Hole Data:	
TH, 18" top soil	
90" poorly graded Sands	A7a
some gravel	30%



<u>Application Contents:</u>		<u>Features of Concern/Observations:</u>	
Application Complete (Page 1)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Soil Type	A7a
Plot Plan Submitted	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Perm Surface Water	n/a
Zoning Documentation Submitted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	Temp Surface Water	n/a
Legal Documents, Easements	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	Normal Ground Water	n/a
O&M Documents Submitted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	Seasonal Ground Water	n/a
Building Plan Submitted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	Rock Outcrops	n/a
Plot Plan Approved	<input checked="" type="checkbox"/> Yes	Limiting Layer	n/a
	<u>3/27/15</u> Date	Nearest Well(s)	n/a

<u>Non-Residential Properties:</u>		Slopes	n/a
Letter of Intended Use Submitted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	Scarps	n/a
Wastewater Nature Established	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A		
Wastewater Flow Calculations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A		

Installation by: Basic Homeowner Basic Installer Complex Installer Public Works/P.E.
 Installer Name: _____ Installer Number: _____

Field Notes: Standard system approved A7a soils not over the aquifer

DATE				
TRAVEL				
INSPECT				
EHS				

K. Keatts
 EHS Signature
 EHS Code _____ Date 3/27/15




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Please draw an aerial view of the property showing the outline of buildings, property lines, well location(s), water lines, location of septic tank and drainfields, location of drainfield replacement area, ditches and streams, easements and right of ways, driveway and parking area, cut banks, and location of street or road. Indicate dimensions and separation distances of each from septic tank and drainfield.

PLOT PLAN

SCALE: 1" = _____'

		
<p><i>see Attached</i></p>		

SIGNATURE: *John Parsons*

DATE: *3-25-2015*

By my signature above, I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should evaluation disclose untruthful or misleading answers, my application may be rejected or my permit canceled. I understand that any deviation from the plans, conditions, and specifications, is prohibited unless it is approved in advance by the Director or his designee. I hereby authorize the Health District to have access to this property for the purpose of conducting a site-evaluation.

(Official Use Only)

Plot Plan Approval Date: *3/27/15* EHS Name: *J. Keats*

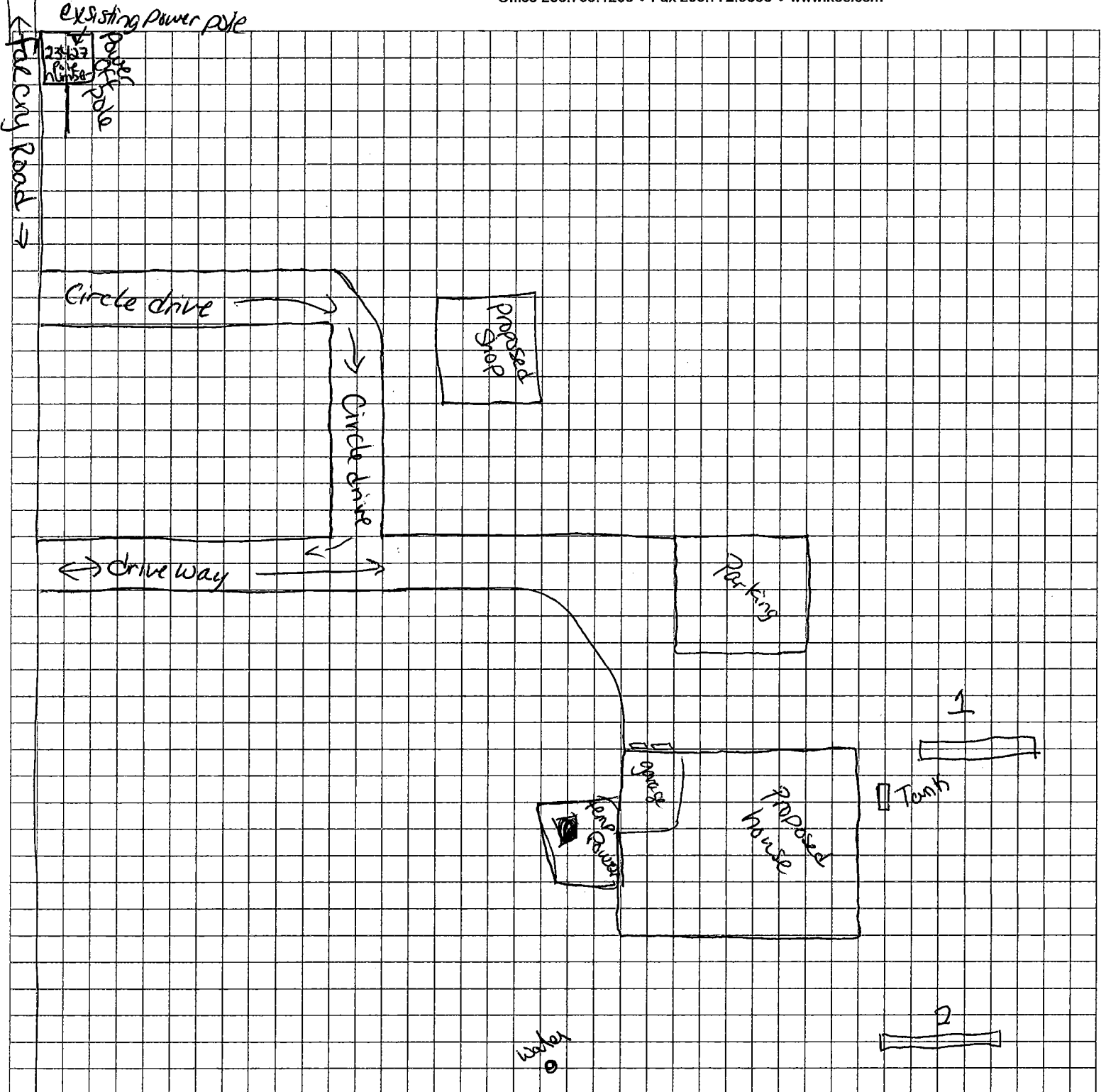
EHS # : _____

Revision Date: 06/22/2010

Site Drawing Worksheet

Please use the space below to provide a drawing of your construction site. Show existing and proposed structures, landmarks, roads, nearest neighbors, house site, driveway, powerlines, etc.

2451 W. Dakota Ave. • Hayden, ID 83835
 Office 208.765.1200 • Fax 208.772.5858 • www.kec.com



Notes: Property is located at 10556 E Far Cry Rd Athol IDaho 83801. Go North on Hwy 95 towards Athol. Turn Right onto Hwy towards Bayview. Turn Right onto Lewellen Creek Rd. Then Right onto Far Cry Rd. (there is no sign saying Far Cry Rd). At the end of Far Cry Rd is our 10-acre lot. The existing Power Pole ends where our property begins. Need Box and temporary power to start construction of new home.

2 green sales stay left → power line on each side all