

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

Computer File #: <u>15-3894</u>	(<input checked="" type="checkbox"/>) SITE EVALUATION (<input checked="" type="checkbox"/>) SEWAGE PERMIT	(<input checked="" type="checkbox"/>) NEW SYSTEM () REPLACEMENT	Fee Paid: \$ <u>350.00</u> <u>IK</u> Receipt #: <u>3006315</u> Jurisdiction: <u>23</u>
EHS #: <u>6003</u> <u>6003</u> <u>6003</u> Date: <u>1-31-05</u> <u>3-4-05</u> <u>4-29-05</u>	Travel Time: <u>1</u> : <u>5</u> : <u>5</u> Insp. Time: <u>1</u> : <u>5</u> : <u>7</u>		

Name: <u>Riverdance Lodge - Cabin #3</u>		Mailing address: <u>P.O. Box 579</u>	
Phone: _____		City: <u>Coeur d'Alene</u> State: <u>Id</u> Zip: <u>83816</u>	
1/4 Sec.: _____	Section: <u>32</u>	Township: <u>33N</u>	Range: <u>6E</u>
Address/location of property: <u>Syringa - Riverdance</u>			
Lot: _____	Block: _____	Subdivision: <u>Cabin #5</u>	
Parcel # (from Tax Assessor's Office): _____		Lot size: _____	
Water supply: (<input checked="" type="checkbox"/>) Public () Private (<input checked="" type="checkbox"/>) Well () Spring			

Type of Dwelling	(<input checked="" type="checkbox"/>) Gravelless Drainfield	() Absorption Bed	() Pit/Vault Privy	() Intrench SF
() Single Family () Multiple Family # Bedrooms: _____	() Gravel Drainfield	() Steep Slope Drainfield	() Sand Mound	() Recirculating SF
() Commercial (<input checked="" type="checkbox"/>) Other: <u>Cabin - 1 Room</u>	() Capping Fill	() 2 Cell Lagoon	() Intermittent SF	Other: _____

Tank Size: <u>1000</u> gallons	Slope: <u>Handicap Acc</u>	Critical Setbacks:	
Distance From Septic Tank to: Dwelling Foundation: <u>5</u> ft.	Disposal Area: <u>6</u> ft.	Nearest Well: <u>50</u> ft.	
Disposal Area: Effective Area Required: <u>300</u> sq. ft.	Dimensions: L. <u>100</u> W. <u>3</u> D. <u>3</u> ft.	Distance to Surface Water: <u>200</u> ft.	
Property Lines: Front: <u>5</u> ft. Back: <u>5</u> ft. Side: <u>5</u> ft.	Dwelling Foundation: <u>10</u> ft.	Nearest Well: <u>100</u> ft.	

No. 1 Test Hole	No. 2 Test Hole	No. 3 Test Hole
<u>0-72</u> <u>B2</u>		

Size of absorption system based on Soil Type: B2

Site Evaluation: (☒) Approved () Approved with Conditions () Disapproved EHS Initials: O.E.K. Date: 1-31-05

REMARKS: 40 % REDUCTION IN SQUARE FEET OF DRAINFIELD IF DOMED GRAVELLESS CHAMBER MATERIAL IS USED.

The information provided on this application is accurate to the best of my knowledge. I understand that any false statements may result in disapproval of this permit. The subsurface sewage disposal installation must be constructed by the homeowner or a sewer installer, Section 1-3006.01 - 1-3007.01.	
Owner: _____	I hereby authorize the health authority to have access to this property for the purpose of performing the requested services and I certify that all the above information is accurate.
Contractor: _____	
Other: _____	
Applicant Signature: <u>[Signature]</u>	Date: <u>3-4-05</u>

Permit Issued By: [Signature] Date: 3-4-05

Renewal Date: _____

FINAL INSPECTION

Tank Size: <u>1000</u> gallons	Type of Tank: <u>Concrete</u>	Depth to Riser/Tank: <u>18</u>
Distance from Septic Tank to: Dwelling Foundation: <u>75</u> ft.	Disposal Area: <u>15</u> ft.	Nearest Well: <u>100+</u> ft.
Disposal Area: Effective Area: <u>300</u> sq. ft.	Dimensions: L. <u>60</u> W. <u>3</u> D. <u>3</u> ft.	Distance from Disp. Area to Surface Water: <u>200</u> ft.
Property Lines: Front: <u>5+</u> ft. Back: <u>5+</u> ft. Side: <u>5+</u> ft.	Dwelling Foundation: <u>25</u> ft.	Nearest Well: <u>100+</u> ft.
(<input checked="" type="checkbox"/>) Approved () Disapproved Date: <u>4-29-05</u> Inspected By: <u>[Signature]</u>		Installer & #: <u>Cole McPherson</u>

REMARKS: Domed Chamber system

T33N R 6E Sec. 32 b. card

IDAHO COUNTY ENERGIZING AUTHORIZATION

Name: River Dance Lodge Phone: _____

Address: _____

has been issued Individual Sewer Permit No.: 0. 05-52

by the North Central District Health Dept. (NCDHD) for the construction

of Cabin #5

at (location) Spring Sec. 32 Twp. 33N Rge. 6E

The requirements of Idaho County Ordinance #32 having been complied with, the above-described structure may now be energized by

the Idaho County Power Company.

(Sig.) Carl E. King NCDHD Official. Date 3-4-05

Date of Energizing: _____

(Sig.) _____ Power Company Official

PRINTCRAFT

Name:

Rivardance Lodge

Date:

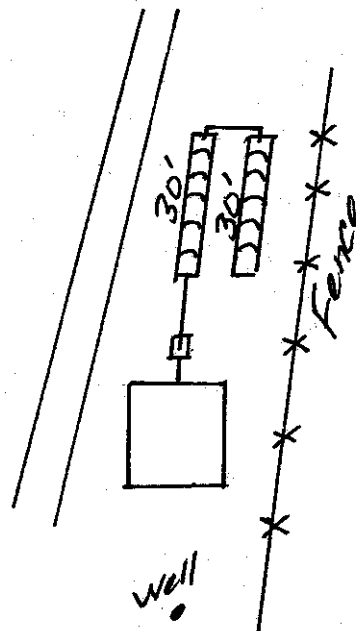
1-31-05

Permit #

0-05-52

Proposed Site Plan

Well



INDICATE ON SKETCH

- 1) Property lines
- 2) Buildings
- 3) Driveways & patios
- 4) Water system, pipes
- 5) Sewage system
- 6) Replacement area
- 7) Streams within 300'
- 8) Slope of lot
- 9) Adjacent roads
- 10) Other drainfields

As-Built

