

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

Computer File #: 05-3895
 Permit #: 0-05-53

SITE EVALUATION NEW SYSTEM
 SEWAGE PERMIT REPLACEMENT

Fee Paid: \$ 350.00 CR
 Receipt #: 3006316
 Jurisdiction: 25
 Travel Time: 1-3-15
 Insp. Time: 4-10-17

EHS #: 60031 60031 6003
 Date: 1-31-05 3-4-05 4-29-05

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

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

Tank Size: <u>1000</u> gallons	Slope: <u>5</u> ft.	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>600</u> sq. ft. Dimensions: L. <u>200</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 _____
 Contractor _____
 Other _____
 Applicant Signature: John H. King Date: 3-4-05

Permit Issued By: John E. King Date: 3-4-05

Renewal Date: _____

John E. King

FINAL INSPECTION

Tank Size: <u>1000</u> gallons	Type of Tank: <u>Concrete</u>	Depth to Riser/Tank: <u>12"</u>
Distance from Septic Tank to: Dwelling Foundation: <u>19</u> ft.	Disposal Area: <u>6'</u> ft.	Nearest Well: <u>100'</u> ft.
Disposal Area: Effective Area: <u>600</u> sq. ft. Dimensions: L. <u>120</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>33</u> ft.	Nearest Well: <u>100</u> ft.
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved Date: <u>4-29-05</u> Inspected By: <u>John E. King</u>	Installer & #: <u>John McPherson</u>	

REMARKS: Domed Chamber System

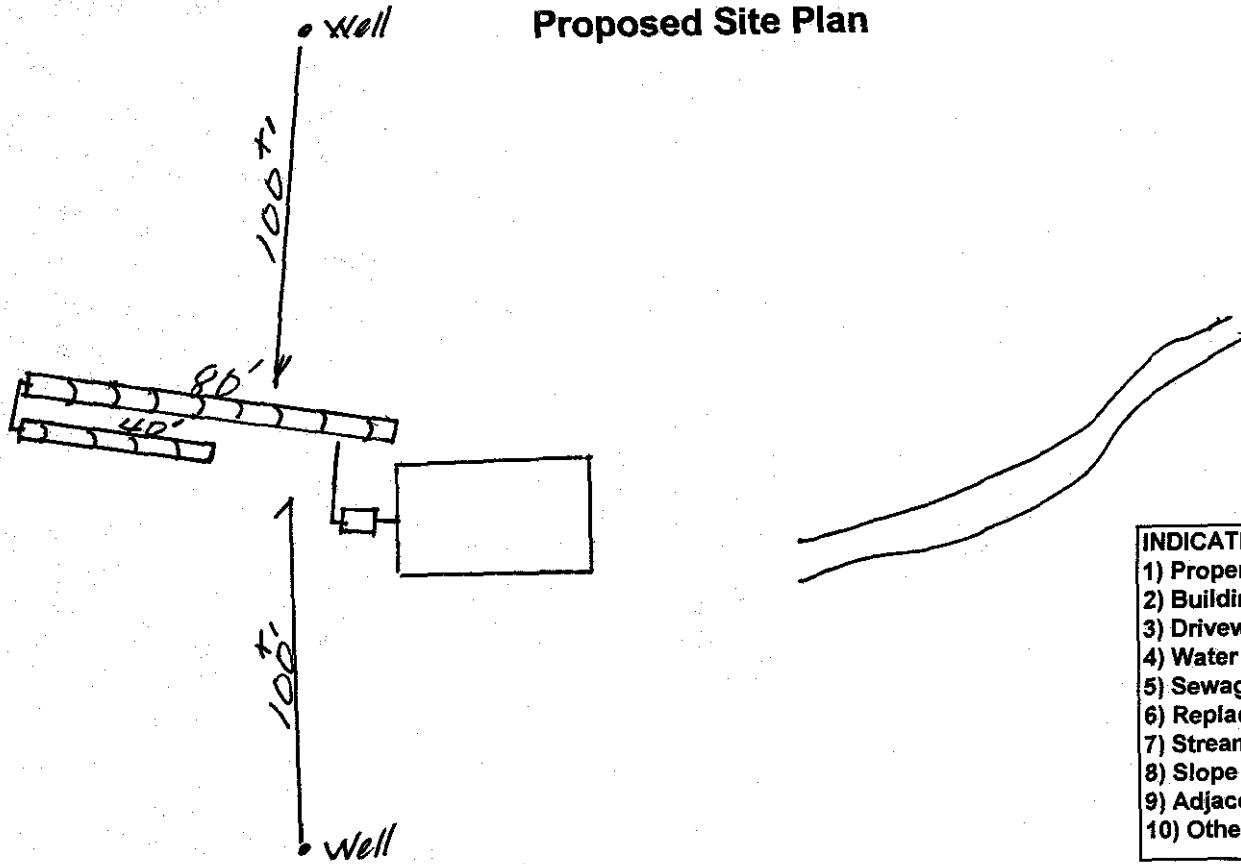
T33N R1E Sec. 32

Name: Riverdance Lodge

Date: 1-31-05

Permit # 0-05-53

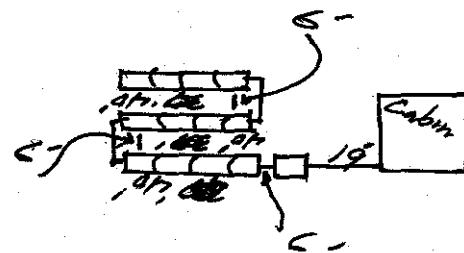
Proposed Site Plan



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



IDAHO COUNTY ENERGIZING AUTHORIZATION

Name: River Drive Lodge Phone: _____

Address: _____

has been issued Individual Sewer Permit No.: 0-05-53

by the North Central District Health Dept. (NCDHD) for the construction
of Cabin #6

at (location) Lynden 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.) C. D. King NCDHD Official. Date 3-4-85

Date of Energizing: _____

(Sig.) _____ Power Company Official
PRINTCRAFT