

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

[illegible]

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT

REIBER PIN 52N04W-22-3860



229 52N04W-22-3370 ENTERED JAN 15 1990
 PANHANDLE HEALTH DISTRICT I
 APPLICATION AND PERMIT FOR ON-SITE SEWAGE SYSTEM

INDIVIDUAL SEWAGE DISPOSAL SITE EVALUATION

Pay: Cash ☐ Check ☒ No Fee ☐

Fee: _____

Date: _____

Site Eval. # _____

Applicant's name: Leonard RohrbachLegal description of property: N $\frac{1}{2}$, SW $\frac{1}{4}$, NW $\frac{1}{4}$, NW $\frac{1}{4}$ Sec. 22, T 52N, R 4W (split has not beenLocation: off Atlasrecorded as of 1/3/90
J.R.M. 1/3/90Size of lot: 5 acres ft. x _____ ft.

Applicant's signature: _____

Applicant is: _____ Owner _____ Other _____

Mailing Address: _____

Phone: _____

Appriser type A SITE EVALUATION

Testhole #1

Testhole #2

Testhole #3

Testhole #4

Remarks:

First 1/3/90
 This is the second of two possible permits
 available for SW $\frac{1}{4}$, NW $\frac{1}{4}$, NW $\frac{1}{4}$ Sec. 22, T 52N, R 4W, B.M.
 for on site sewage disposal (single family dwelling)

Valid for one year from date: _____

By: _____

Environmental Health Specialist

INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT

INDIVIDUAL SEWAGE DISPOSAL PERMIT

Permit # 3061

Fee: \$100.00

Date: December 29, 1989

PLOT PLAN ATTACHED (show house, other buildings, etc.)

No. Living Units 1 Bedrooms 1 People served 3 Other 1 Bath MOBILE HOMESeptic Tank: 1,000 Gallons, Distance to dwelling foundation: 5 ft. min.(Well: 50 ft. min.) Water Line: 10 ft. min. Surface Water: 50 ft. min.Type of tank: Cement ☒ Other _____Disposal area: Drainfield ☒ Ab. Bed _____ Other _____ Dimensions 300 sq. ft.Component separations: Property lines 5 ft. min. Dwelling foundation 20 ft. min. Well 100 ft. min. Surface water 300 ft. min. Neighbor's well 100 ft. min. Septic tank 5 ft. min. Water service lines 25 ft. min. Water suction line 100 ft. min.Remarks and/or conditions: cistern set backs are the same as
a wells

I understand that this permit is non-transferable and is valid for 1 year from date of application. Drainfield must not exceed 4 feet in depth.

Applicant's Signature: Leonard RohrbachMailing address: 8245 RAUSEY Rd Cold Id 83811Plot plan submitted: must meet separation distance req.Permit issued by: Sharon M. Miller EHS 1/3/90Phone: 172-5836Date: 1/3/90Approved: ☒

Disapproved: _____

Environmental Health Specialist

THIS OFFICE MUST BE NOTIFIED FOR FINAL INSPECTION 24 HOURS BEFORE COVERING SYSTEM

Inspection: System covered _____

Approved: _____

Not approved: _____

Inspected by: _____

Installed by: _____

Remarks: _____

RECEIVED

Date: 1/9/90

Reference: Rules & Regulations for Individual and Subsurface Sewage Disposal Systems

KOOTENAI COUNTY
ASSESSOR