

Septic

APPLICATION FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

Application is hereby made to the Humboldt County Health Officer for a permit to construct or repair a sewage disposal system as described below in compliance with the laws and standards of Humboldt County and the State of California.

Legal Conformance <i>2d 9 Dec 81</i>	Fee <i>10.00</i>	Receipt No. <i>41290</i>	Permit No. A.P. # <i>308-231-02</i>
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Owner's Name *Cisco Lunsford*

On attached sheet, applicant is to draw TO SCALE the appropriate septic tank system, location on property, and all pertinent setbacks.

Mailing Address *P O Box 239*

DETAILED DIRECTIONS TO PARCEL: *off 101 on Kalata exit, on Eel River Dr, right on Table Bluff Rd, left on Hawkins Hill Rd.*

City *Lolita* Co. *95551* Telephone # _____

Installer _____

Assessor's Parcel No. *308-231-02*

NOTE: WAIVER GRANTED TO START OF WINTER TIME PERCOLATION TESTING

General Area *Hawkins Hill Rd. off Table Bluff Rd.*

PERIOD, TESTS DONE PRIOR TO 1 January 1982

Previous Application: New System Repair
YES NO Existing System

RECEIVED
NOV 10 1981
HUMBOLDT CO. HEALTH DEPT.

Installation will serve: Residence Commercial

Multiple Housing Mobilehome Park Mobilehome

Other - Specify: _____

IMPORTANT: 24 HOUR NOTICE REQUIRED BEFORE FINAL INSPECTION

No. of Units <i>1</i>	No. of Rooms Usable as Bedrooms <i>3</i>	Garbage Disposal Unit YES <input type="checkbox"/> NO <input type="checkbox"/>
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Septic Tank Size <i>1800</i>	No. of Lines <i>6</i>	Length of Lines <i>50'</i>	Trench Depth <i>3'</i>
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Water Supply: Private Public Lot Size: *873' X 600'*

Layout Plan Prepared by _____ Date _____

I agree to obtain inspection of installation prior to covering. I agree to construct this disposal system in accordance with all of the provisions of county and state law.

IMPORTANT: Any deviation in construction from the above plan must have prior approval in writing by the Health Department.

It is understood that the issuance of a permit in no way indicates that a guarantee of perfect and indefinite operation of this system is made by the Humboldt County Health Department.

HEALTH DEPARTMENT USE ONLY

Signature *Cisco Lunsford*

Layout Plan Approved By *James W. Clark* Date *12-8-81*

Date *11-4-81* Owner Owner's Agent

Construction Approved By *Richard A. Sherman RS* Date *11/24/82*

Expiration Date of Permit *9 Dec 82*

HUMBOLDT COUNTY HEALTH DEPARTMENT
Division of Environmental Health
529 "I" St., Eureka, CA 95501 445-7613

WHEN VALIDATED, THIS IS YOUR PERMIT.