

HEALTH OFFICER DECISION**Application Type: Building Site Application -
Alteration****Memo #: 45127**
Tax ID #: 102501-4-001-2005
RP ACCT ID: 1226158
Expiration: 06/08/2022**Property Information**12000 COURTER LN NW
Poulsbo WA 98370**Contractor of Record**Contractor Name: Dave's Septic Services
Contractor Phone #: (360) 830-9699**Applicant**COURTER KEVIN EARL & DENISE RENEE
795 NW WALKER RD
POULSBO WA 98370**Health Officer Decision for Onsite Sewage System**

Approved (See Conditions Below)	Name of Inspector: <i>ERIC EVANS, R.S.</i>	Date: <i>05/30/2019</i>
Processing kitchen is being approved for WSDA food processing only. Food preparation for public events or service to the public will require additional review and approval by the Health Districts Drinking Water, Onsite Sewage and Food Programs.		
Waste produced from WSDA processing kitchen may not exceed residential waste strength sewage disposed of into the septic system.		

Health Officer Decision for Water Supply

Approved (See Conditions Below)	Name of Inspector: <i>ERIC EVANS, R.S.</i>	Date: <i>05/28/2019</i>

Final Decision: Approved



345 6TH STREET, SUITE 300
BREMERTON, WA 98337-1866
(360) 337-5235

Building Site Application (BSA) Residential For Onsite Sewage System and Water Supply

Official Use Only	Submission Date: MAY 10 2019	Memo # 045127
	Fee: \$1070	SSI: mg

A. BUILDING SITE INFORMATION

Building Site Address - Street, City, Zip Code: 795 NW WALKER ROAD POULSBO 98370	Total Proposed Bedrooms: 3	Total Proposed Sewage Flow (Gallons): 500
Assessor Tax Account No.: 102501-4-001-2005	Lot No.:	Short Plat No.:
		Property Size (SqFt): 10.13 ACRES

B. OWNER/APPLICANT INFORMATION

Name: <input checked="" type="checkbox"/> Current Property Owner - OR - <input type="checkbox"/> Applicant DENISE COURTER	Phone #: 265-7374	E-Mail: APPROVED FOR SEWAGE AND WATER ONLY
Owner/Applicant Mailing Address - Street, City, State, Zip Code: 795 NW WALKER ROAD POULSBO WA 98370		

C. APPLICATION TYPE SUMMARY (Check all fields that apply)

Use/System Type	Application Type:	Type of Structures:
<input checked="" type="checkbox"/> Single Family <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Alternative	<input type="checkbox"/> New <input type="checkbox"/> Re-Design <input checked="" type="checkbox"/> Modification/Expansion <input type="checkbox"/> Repair <input type="checkbox"/> Repair/Replacement <input type="checkbox"/> Other (Describe Below)	<input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Accessory Dwelling Unit <input type="checkbox"/> Guest House <input type="checkbox"/> Other <input checked="" type="checkbox"/> Non-Habitable Structures with Plumbing (describe below): (WOOD PROCESSING Kitchen) (Garage 1/2 Bath) (old Homestead 1/2 Bath)
<input type="checkbox"/> Multi Family <input type="checkbox"/> Standard <input type="checkbox"/> Alternative		
<input type="checkbox"/> Waiver(s) Proposed		

D. WATER SUPPLY DETAIL (Attach Water Availability Letter if available)

<input type="checkbox"/> Proposed <input checked="" type="checkbox"/> Existing	<input type="checkbox"/> Public <input checked="" type="checkbox"/> Private <input checked="" type="checkbox"/> Individual <input type="checkbox"/> 2 Party	System Name: Assessor Tax Account Numbers for Properties Served by Well	System ID:
		Water Connection 1 (Parcel with Well):	Water Connection 2 (Parcel connected to Well):

E. OWNER, APPLICANT OR AGENT AND DESIGNER ACKNOWLEDGEMENT

I certify that (1) the information contained in this application is true and accurate to the best of my knowledge; (2) the application represents my intended use of this property; and (3) any related building permits that I apply for will be consistent with the plans and specifications contained in this application.

I acknowledge and understand that I, along with my contractors, are responsible for adhering to the conditions of approval of this application, and are responsible for conforming to Kitsap County Board of Health regulations for onsite sewage systems (Ordinance 2008A-01) and water supply (Ordinance 1999-6).

I acknowledge and understand that the design, location, and construction of my onsite sewage system and/or well is/are critical and of a sensitive nature, and I agree to protect these areas required by the regulations.

I understand that once this application is submitted and/or approved, any changes to, or variations from, the information or conditions related to this plan may require a revised application submittal and/or could result in the revocation, denial, or suspension of this application or a related building permit and that this application will fully expire within 3 (three) years and 30 (thirty) days from the original date of application submittal.

I understand that I have the right to appeal the Health Officer's decision concerning this application pursuant to the regulations, and that approval of this application does not guarantee that a building permit will be issued.

Signature: ☐ Owner ☐ Applicant ☒ Agent

Date

5-6-19

Designer/Engineer Stamp



Designer/Engineer Contact Phone Number:

360-830-9699

Designer/Engineer E-Mail Address:

F. RETURN CORRESPONDENCE (For Incomplete Applications Returned to Designer/Engineer)

Returned to
Designer Date:

Application
Re-submittal Date:

Permit Number: 19-01265



**KITSAP PUBLIC
HEALTH DISTRICT**

345 6TH STREET, SUITE 300
BREMERTON, WA 98337-1866
(360) 337-5235

**Onsite Sewage System Specification Sheet
For Residential Systems**

Tax ID: 102501-4-001-2005

Owner/Applicant: DENISE COURTER

G. SOIL EVALUATION PROFILES

Soil Evaluation Date:	Soil Log Numbers Must Correlate With Site Plan - Indicate Total Excavated Depth, Soil Types, Water Table Level & Depth of Restrictive Layer		
Soil Log #1	Soil Log #2	Soil Log #3	Soil Log #4
- Downslope Side Measurements - TYPE 4 SOIL 0-60" LIGHT BROWN TO GRAY FINE LOAMY SAND	- Downslope Side Measurements - TYPE 4 SOIL 0-60" LIGHT BROWN TO GRAY FINE LOAMY SAND	- Downslope Side Measurements - TYPE 4 SOIL 0-60" LIGHT BROWN TO GRAY FINE LOAMY SAND	- Downslope Side Measurements -

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H. DAILY FLOW - TANKAGE - TREATMENT

Design Flow	Tankage			Advanced Treatment
Total Proposed Sewage Flow/Day: <u>500</u> Gallons	Type	Size (gal)	QTY	<input type="checkbox"/> Aerobic Treatment Unit <input type="checkbox"/> Sand Filter (includes bottomless) <input type="checkbox"/> Other: _____ Model/Size (Optional): _____ Manufacturer (Optional): _____
Minimum Treatment Level	<input checked="" type="checkbox"/> Septic Tank	<u>1000</u>	<u>2</u>	
Proposed Treatment Level: <u>E</u>	<input type="checkbox"/> Trash Tank	_____	_____	
	<input type="checkbox"/> Pump Tank	_____	_____	

I. DISPERSAL COMPONENT CONSTRUCTION

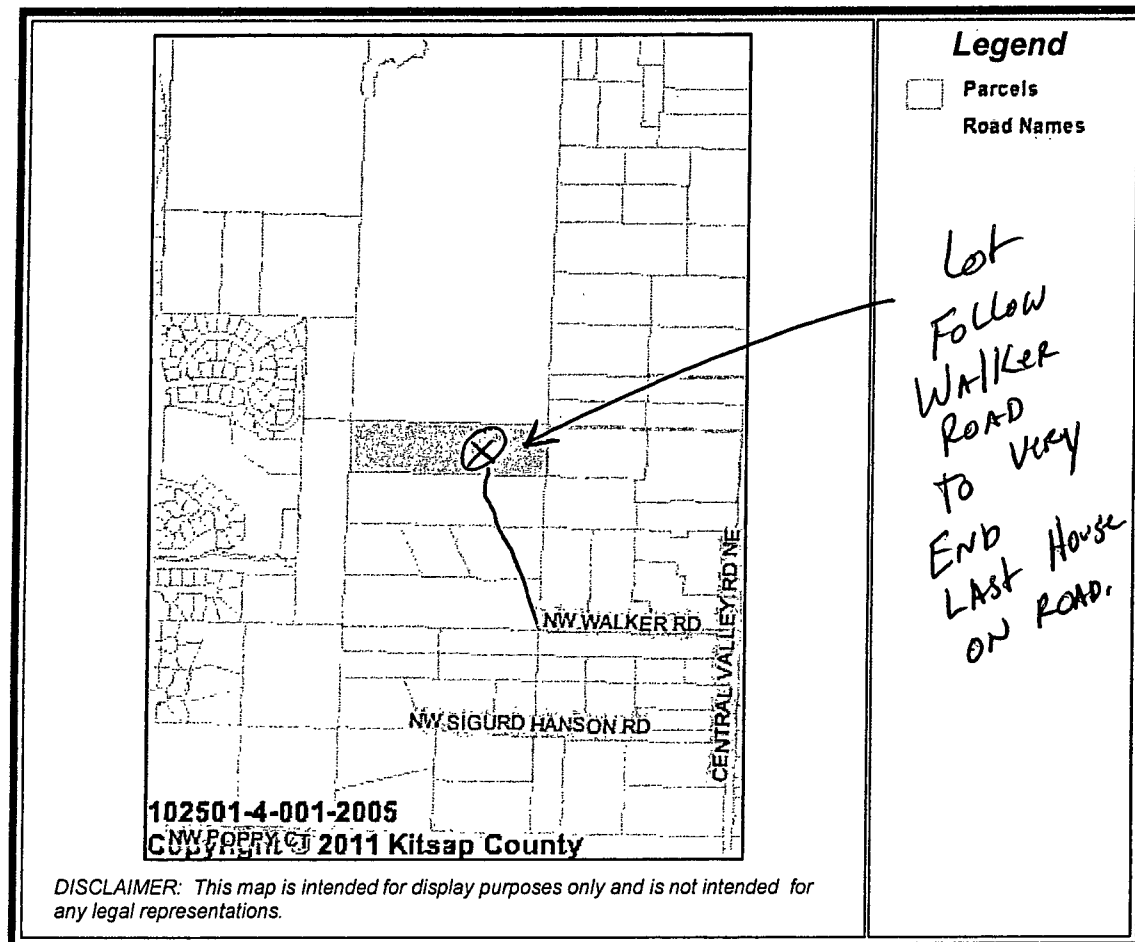
Dispersal Component Sizing Hydraulic Loading Rate of Dispersal Area: <u>.6</u> Minimum Dispersal Area (Sq. Ft.) In Primary: <u>900</u> ^{ft} <u>600</u> ^{ft} <u>200'</u> New Trench Minimum Linear Feet or Dimensions: Distribution <input checked="" type="checkbox"/> Gravity Distribution <input type="checkbox"/> Pressure Distribution <input type="checkbox"/> Drip Irrigation <input type="checkbox"/> Other: _____	<p>A. Slope in Primary: <u>10-18</u> %</p> <p>E. Additional Cover Required: <u>0</u> inches</p> <p>D. Trench Width: <u>36</u> inches</p> <p>B. Maximum Trench depth: <u>24</u> inches</p> <p>C. Vertical Separation: <u>36</u> inches</p> <p>Native Soil, Restrictive Layer, OR Seasonal Water Table</p>	Trench Construction Profile A. Percent Slope In Primary: <u>10-18</u> Percent B. Maximum Trench Depth: <u>24</u> inches - Downslope Side Measurements - C. Vertical Separation: <u>36</u> inches D. Trench Width: <u>36</u> inches E. Additional Cover Required: <u>0</u> inches
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J. SITE WATER MITIGATION

<input type="checkbox"/> Curtain Drain Designated	<input type="checkbox"/> Storm Water Control Designated
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Permit Number: 19-01265

Kitsap County Parcel Search



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Easements, Buffers and Open Spaces

Indicate the location and dimensions of all easements, buffers and open spaces in relation to property lines, structures and OSS components.

SHOW ALL PROPOSED PROPERTY IMPROVEMENTS

Structures and/or Building Envelopes

Indicate the location, dimensions, and clearing limits of all proposed structures and/or building envelopes in relation to property lines, other structures, easements, wells, and OSS components. Include all required setbacks from property lines and other structures.

Wells and 100' Well Radii

Indicate the location of all proposed wells and their respective 100' well radii. Include all primary and reserve drainfield areas on adjacent properties within the 100' well radius.

On-Site Sewage System (OSS) Components

Indicate the location and dimensions of all proposed OSS components, including septic tanks, pump tanks, pre-treatment units, primary drainfields and reserve drainfields. Indicate the direction and degree of slopes of the primary and reserve drainfield areas, and identify the 10-foot "no-build" zones surrounding them include at least two reference distances to property lines.

Storm/Surfacewater Drainage Systems

Indicate the location and dimensions of all proposed infiltration systems, stormwater ponds, drainage ditches, below grade pipes and easements.

Roads, Driveways, Parking Areas and Sidewalks

Indicate the location, dimensions, surfacing materials, and clearing limits of all proposed roads, driveways, parking areas, sidewalks and easements.

Water and Utility Lines

Indicate the location of all proposed water lines, sewer lines, and utility lines.

QUESTIONS?

If you have any questions regarding these Site Plan Requirements, please contact the Kitsap County Department of Community Development, at

(360) 337-5777; or

The Kitsap Public Health District at

(360) 337-5285.

Figure 1: Site Plan Requirements Checklist

All site plans shall be clearly and accurately drawn to 1"=20', 30', 40' or 50' scale on paper no larger than 11" x 17" and must indicate all of the following information. For each item below, mark either "Shown" or "N/A" as appropriate for your project. This checklist must be completed and included on all site plans. Any site plan without this checklist will be rejected and returned to the applicant for correction.

Shown N/A	Parcel Number <u>102501-4-001-2005</u>
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A General Property Information:

<input checked="" type="checkbox"/>	Tax ID Number and Property Address
<input checked="" type="checkbox"/>	Property lines and dimensions
<input checked="" type="checkbox"/>	Elevations of property and the direction of natural drainage
<input checked="" type="checkbox"/>	Slopes that exceed 15%, including any cut banks greater than 4' in height
<input checked="" type="checkbox"/>	North arrow and site plan scale
<input checked="" type="checkbox"/> <input type="checkbox"/>	Marine waters, lakes and ponds and their associated high water lines
<input checked="" type="checkbox"/> <input type="checkbox"/>	Streams, creeks & wetlands and their associated buffer areas

B Existing Property Improvements:

<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all existing structures, including the locations of existing structures on adjacent waterfront properties
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all existing wells and their well radii, including those wells on adjacent properties within 100' of property lines
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all existing drainfields, including the 10' "No Build Zone" as well as the locations of existing drainfields on adjacent properties within 100' of any well
<input type="checkbox"/> <input checked="" type="checkbox"/>	Location of existing drainage facilities, including all sub-surface infiltration systems
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all existing and abutting roadways, driveways, easements, buffers and required open spaces
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all existing water, sewer and utility lines.

C Proposed Property Improvements:

<input checked="" type="checkbox"/> <input type="checkbox"/>	Location and dimensions of all proposed structures or building envelopes in relation to property lines, other structures, etc.
<input type="checkbox"/> <input checked="" type="checkbox"/>	Location of all proposed wells, including their 100' well radii and all water lines
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all proposed septic tanks, pump tanks, pre-treatment units, and drainfields, including the 10' "no build" zone
<input type="checkbox"/> <input checked="" type="checkbox"/>	Location and dimensions of all proposed drainage and infiltration systems (I-Pits)
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location, dimensions, surfacing materials, and clearing limits of all proposed parking areas, driveways, sidewalks, & road app'rs.
<input checked="" type="checkbox"/> <input type="checkbox"/>	Location of all proposed water, sewer and utility lines.

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Phone: (360) 337-5777

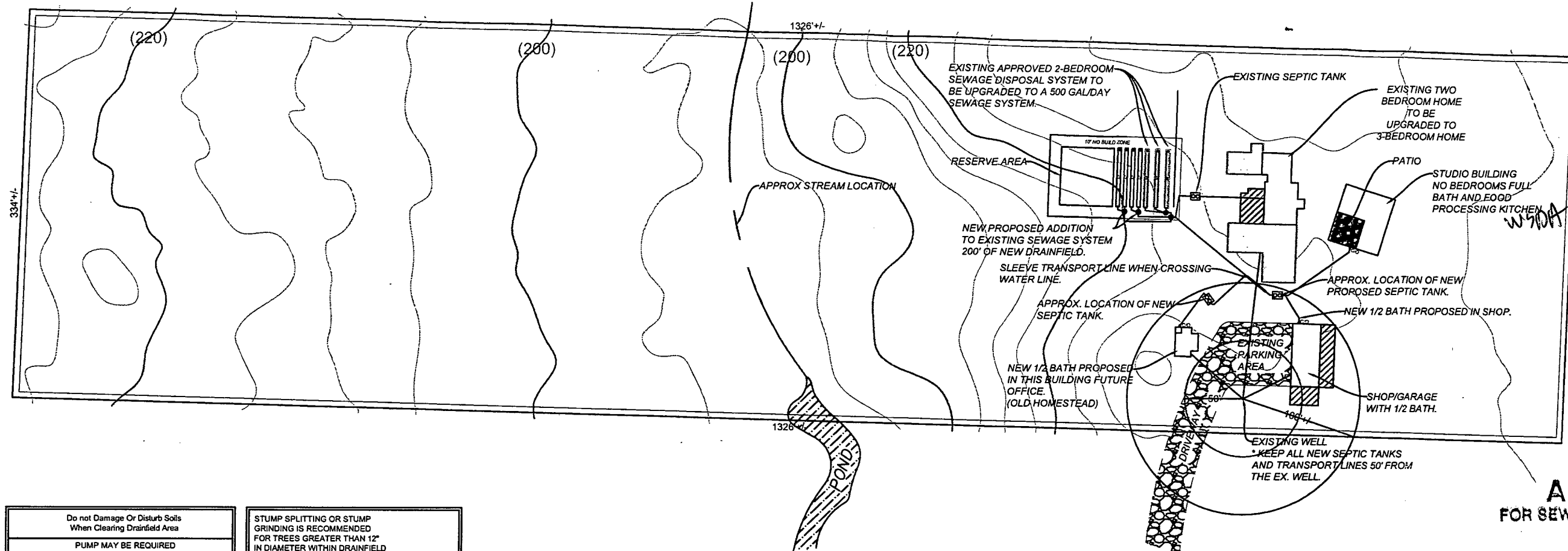
Fax: (360) 337-4925

Form Number: 2102B

Email: Kitsap1@co.kitsap.wa.us

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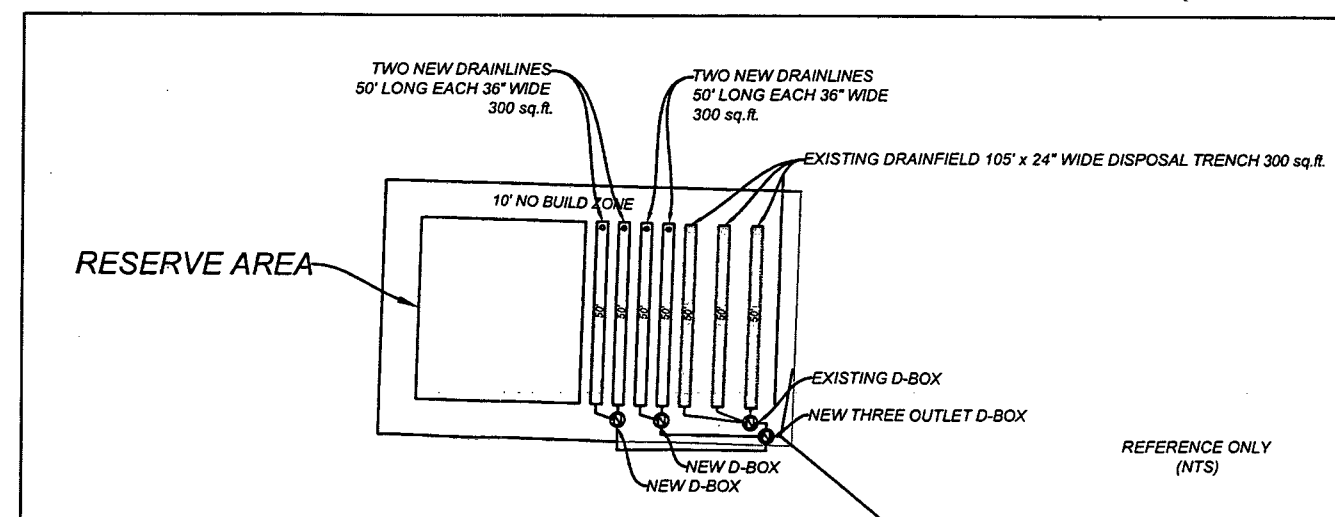


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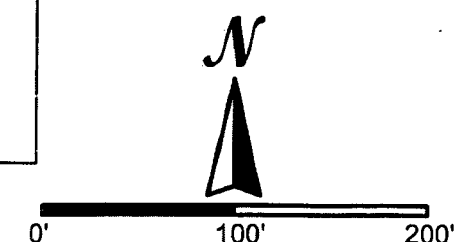
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Do not Damage Or Disturb Soils When Clearing Drainfield Area
PUMP MAY BE REQUIRED DEPENDING ON FINAL ELEVATION
INSTALLER TO ENSURE ALL ON-SITE SEWAGE TANKS/COMPONENTS MUST BE WATERTIGHT TO SURFACE
Tank location may vary but must meet K.P.H.D. regulations
DISCLAIMER This map does not represent a survey nor does it purport to show all easements or encroachments, if any.
Additional Drains May Be Required To Divert Surface Or Subsurface Water Problems
INSTALLER MAY USE GRAVEL OR SUBSTITUTE WITH INFILTRATORS FOOT FOR FOOT. <u>SEE ATTACHED NOTES!</u>

STUMP SPLITTING OR STUMP GRINDING IS RECOMMENDED FOR TREES GREATER THAN 12" IN DIAMETER WITHIN DRAINFIELD AREA. PROTECT SOILS WHEN CLEARING	
Building envelope area location and size may vary. Do not cross no building zone lines with buildings	
NO WELLS WITHIN 100' •	
ALL COVER TO BE ≤ 5 MIN/INCH	
DIVERT ALL SURFACE WATER AWAY FROM DRAINFIELD AREA.	
PREPARE SITE & INSTALL DRAINFIELD DURING DRY CONDITIONS	
Normal usage must meet the following criteria or be lower	
Biochemical oxygen demand	130-174 MG/L
TSS:	47-71 MG/L
FOG:	10-20 MG/L
DO:	0-1.0 MG/L
PH:	6.5-7.2
TEMP:	48-70°
*With microscopic life forms present	
**Higher waste strengths will result in premature failure of the septic system.	

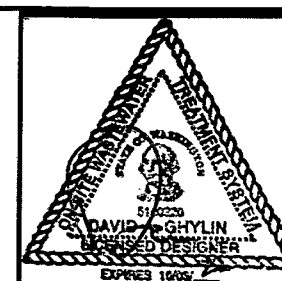


REFERENCE ONLY
(NTS)



OWNER:

DENISE COURTER
795 NW WALKER RD
POULSBO, WA.
TAX ID: 102501-4-001-2005



DAVE'S SEPTIC SERVICES INC.

P.O. BOX 826
SEABECK, WA 98380
(360) 830-9699

SCALE:
1" = 100'

DATE:
11-28-2018

REVISED DATE:
5-9-2019

Permit Number: 19-01265

A = A
1326'+/-

(200)

(220)

EXISTING APPROVED 2-BEDROOM
SEWAGE DISPOSAL SYSTEM TO
BE UPGRADED TO A 500 GAL/DAY
SEWAGE SYSTEM.

EXISTING SEPTIC TANK

EXISTING TWO
BEDROOM HOME
TO BE
UPGRADED TO
3-BEDROOM HOME

RESERVE AREA

PATIO

STUDIO BUILDING
NO BEDROOMS FULL
BATH AND FOOD
PROCESSING KITCHEN

W90A

APPROX STREAM LOCATION

NEW PROPOSED ADDITION
TO EXISTING SEWAGE SYSTEM
200' OF NEW DRAINFIELD.

SLEEVE TRANSPORT LINE WHEN CROSSING
WATER LINE.

APPROX. LOCATION OF NEW
SEPTIC TANK.

APPROX. LOCATION OF NEW
PROPOSED SEPTIC TANK.

NEW 1/2 BATH PROPOSED IN SHOP.

NEW 1/2 BATH PROPOSED
IN THIS BUILDING FUTURE
OFFICE.
(OLD HOMESTEAD)

EXISTING
PARKING
AREA

SHOP/GARAGE
WITH 1/2 BATH.

EXISTING WELL
* KEEP ALL NEW SEPTIC TANKS
AND TRANSPORT LINES 50' FROM
THE EX. WELL.

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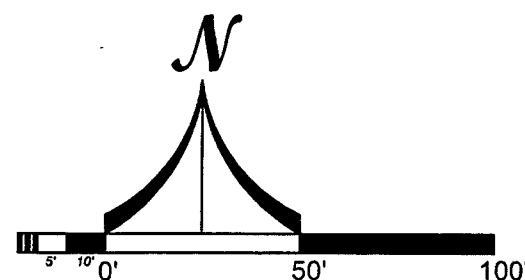
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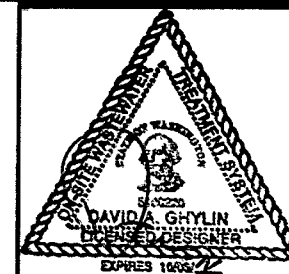
1326'+/-
B = B

POND



OWNER:

DENISE COURTER
795 NW WALKER RD
POULSBO, WA.
TAX ID: 102501-4-001-2005



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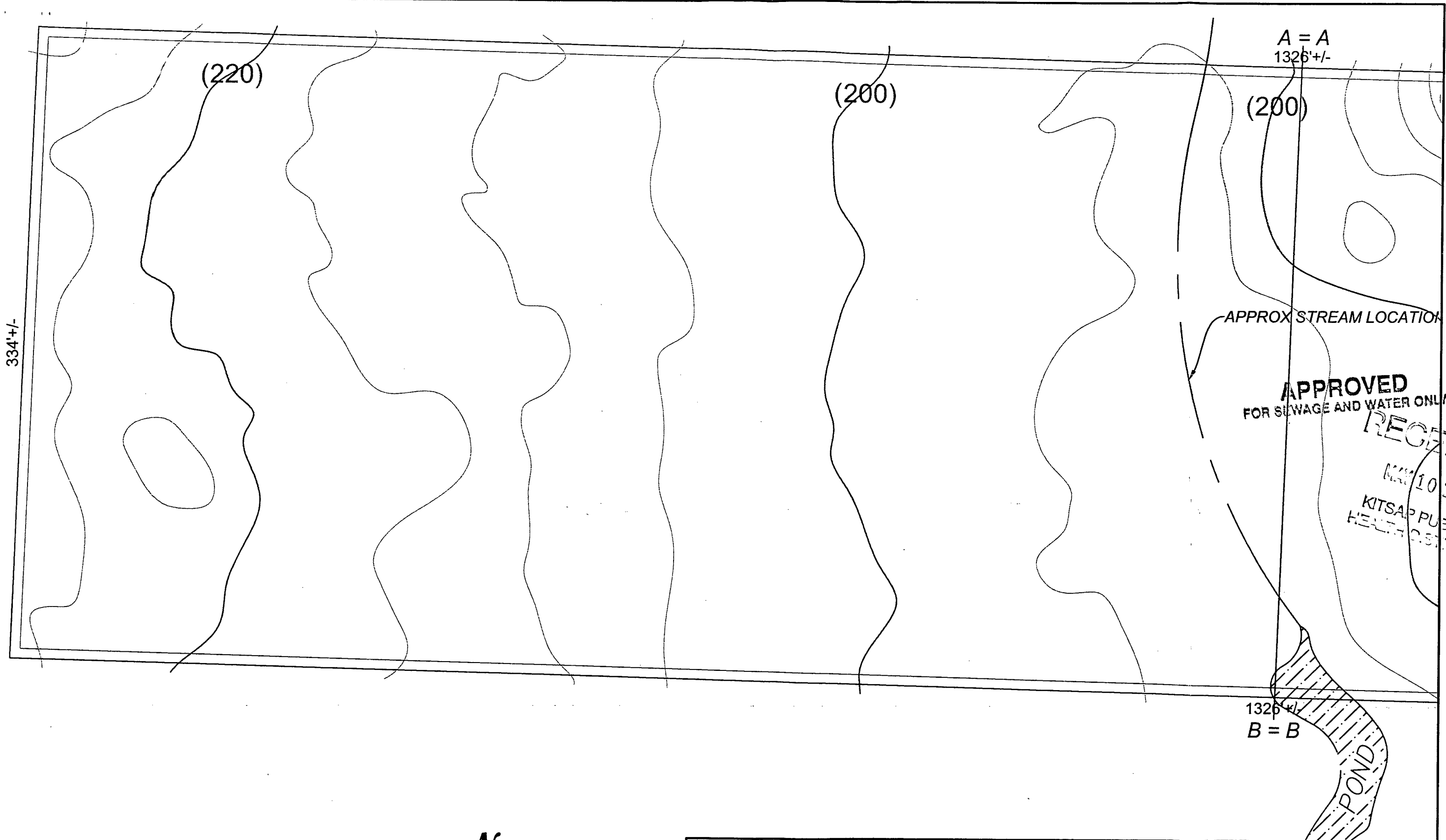
P.O. BOX 826
SEABECK, WA 98380
(360) 830-9699

SCALE:
1" = 50'

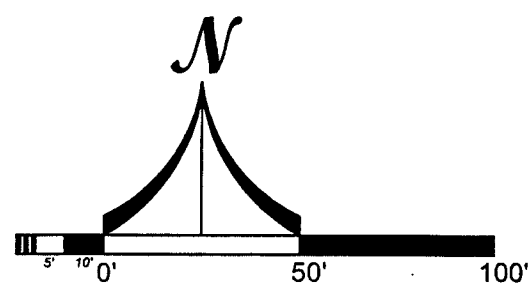
DATE:
11-28-2018

REVISED DATE:
5-9-2019

Permit Number: 19-01265

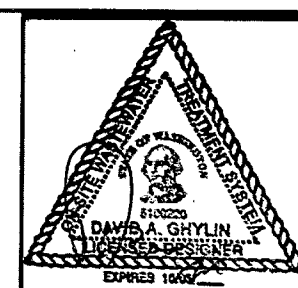


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OWNER:

DENISE COURTER
795 NW WALKER RD
POULSBO, WA.
TAX ID: 102501-4-001-2005



DAVE'S SEPTIC SERVICES INC.

P.O. BOX 826
SEABECK, WA 98380
(360) 830-9699

SCALE:
1" = 50'

DATE:
11-28-2018

REVISED DATE:
5-9-2019

General Designer Notes

Ref: Denise Walker 795 NW Walker Road Tax# 102501-4-001-2005

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- #1- Soil logs have been dug on this site and are the responsibility of the property owner or owners agent to have these soil logs buried after the inspection process has been completed.
- #2- If during the construction process, soil conditions are found that may lead to premature failure of the system, construction shall stop immediately and the designer shall be notified. Such soil conditions may include but not limited to ground water, surface water, fill material, clay soil, bedrock, or excessively permeable gravels.
- #3- Any substitutions or deviations from these plans shall be approved by the health department and the designer prior to construction. All changes of the system components shall be documented by the designer on the final as-built drawing.
- #4- Peak design flow is 500 g.p.d., recommended daily flow should not exceed 400 g.p.d. or premature failure may occur.
- #5- Backfill sewage disposal system immediately after final inspection process, cover soils should be loamy sand or better. Seed final cover with grass or shallow rooting ground cover.
- #6- Keep all maintenance access lids and ports accessible to ground surface.
- #7- Installer should rake the finished grade smooth and slope it to divert all surface water runoff away from tank and drainfield areas.
- #8- Setbacks from house foundation to drainfields and reserve areas are 10', septic tanks 5' and transport lines 2' unless otherwise stated within the design.
- #9- Driveways and parking areas must stay 5' from drainfield areas. Tanks may be located within parking areas and driveways if approved for this application.
- #10- Sewage waste strength should meet the following criteria or be lower Bod-5 = 130-174 mg/l, TSS = 47-71 mg/l, FOG = 10-20 mg/l, PH = 6.5-7.2 with microscopic life forms present.
- #11- Installer must adhere to all manufacturer installation requirements for all products used.
- #12- The attached septic design does not represent a survey nor does it purport to show all easements or encroachments, if any. Designer recommends property lines be located prior to any final installation occurs. Surveys may be required to accomplish this.
- #13- Property lines and corners have been represented by owner or owners agent, the designer is not responsible for errors due to inaccurate measurements from property lines or corners that are inaccurate.
- #14- If a curtain drain is required with this design it must meet all health department installation requirements.
- #15- Developers, homeowners and installers, installations of on-site sewage disposal systems should always be installed in dry weather conditions. Irreparable soil damage may occur if systems are installed in wet conditions. Planning the installation of system is very important and should be done as early in the building development stage as possible. Wet weather conditions have caused delays in final approval dates.
- #16- Maintenance is required with all sewage disposal systems. Owners will receive details of this in the designer manual with the final approval of the application.
- #17- Adhere to all designer notes located on design layout page.
- #18- If development exceeds 10,000 square feet of impervious surface a engineered drainage plan may need to be submitted. Options are available to reduce square footage requirements, such

as wagon wheel driveways, contact DCD for further details. Owners are responsible for any fees for redesigns or revisions that may be needed after BSA submittal not due to designer error.

#19- Low flow water fixtures are recommended within the home to help lower the hydraulic load to the system.

#20- Watertight components are a must for all onsite sewage systems. Installers are required to ensure all components are watertight, extreme care should be used during backfilling of these components to prevent settling and or water intrusion issues. If leaking components are not fixed in a timely manor the designers warranty may be void.

#19- Installation of this design must meet all health department regulations and all adopted policies by the Health Department that may apply. Installer is required to be versed in these regulations if any questions contact designer.

#20- All components used must be on state department of health approved products list for use with residential waste.

#21- Installer must inspect all tanks used at time of delivery and any tanks with defects must be rejected and not used. When using any existing tank the installer must due a 24 hour leak test to ensure all tanks used are watertight.

#22- All plumbing must be routed into the new sewage system that has been designed. It is the property owners responsibility to show the designer all plumbing stub outs and all gray and black water discharge points. A plumber may be needed on old homes to ensure that all stub out locations are connected to the new proposed sewage disposal system. An inside pump basin may be needed in some cases where plumbing is located in basements and elevations for a gravity discharge cannot be maintained.

#23- Do not use low profile chambers or the system will be red tagged. All lateral lines must be a minimum of 6" off the infiltrative surface. Lateral ends must be secured at the cleanout and must be in the center of the port.

#24- Gravel trenches are recommended, but Arc 36" chambers are allowed.

Specific Designer Notes :

#1- This application is for an existing home with existing out buildings that are going to be upgraded or change of use as described below.

#2- The existing two bedroom home will be upgraded to a three bedroom home. Stay tied into the existing sewage system as shown on site plan.

#3- The utility building will contain a full bath , no bedrooms and a food processing kitchen. Will tie into new sewage system and a new septic tank required for this building.

#4- A outdoor wash station is proposed to wash raw just out of the garden produce. (rinsing off dirt only) not to tie into sewage system.

#5- The old homestead will have no bedrooms , no kitchen but will have ½ bath. Will have to tie into new sewage system as shown on site plan. A new septic tank is required.

#6- The existing garage will have ½ bath only.

#7- A notice to document title will be required with this application for use of the structures proposed.

#8- The existing two bedroom sewage system is being upgraded to handle the new proposed flow. 200' of new 36" wide disposal trench is required. This must be broken into a three zone sewage disposal system by the use of a d-box. The new sewage system will be two 100'x 36" wide

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disposal trenches , 300 square feet each. The existing three 50' laterals that are 24" wide equal 300 square feet in disposal trench. A minimum total of 900 square feet of disposal trench is required. Additional disposal trench can be installed but must be done in equal lengths.

#9- All existing tanks used must be certified for use and have risers to grade.

#10- All sewer line and water line crossings must be sleeved per the health district requirements.

#11- A new reserve area is proposed.

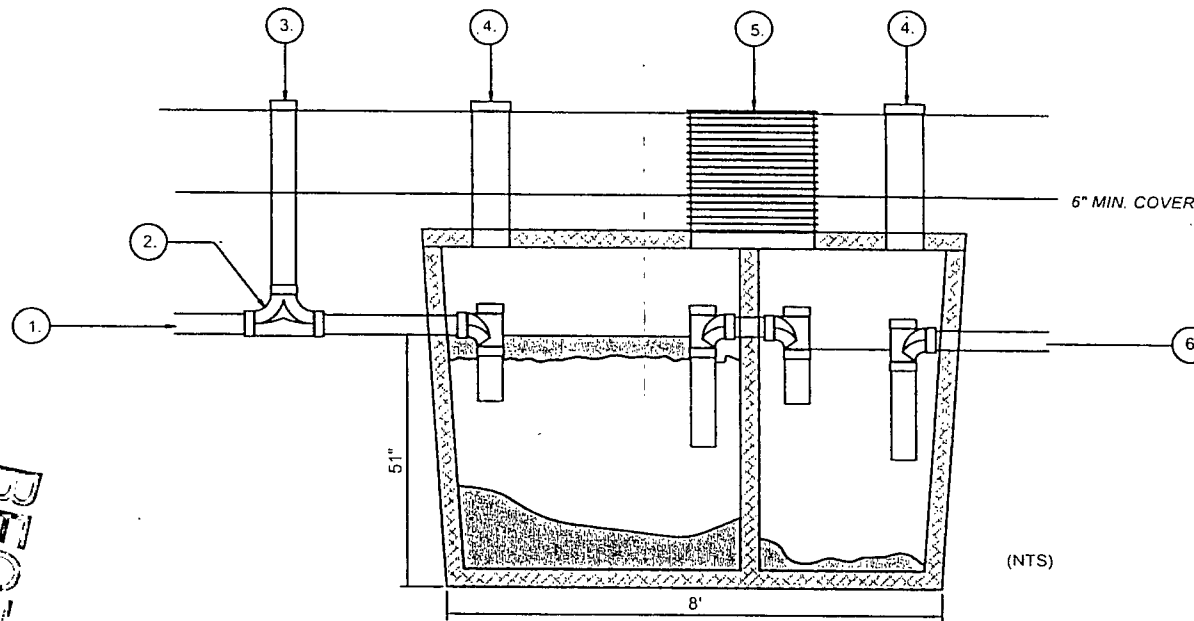
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GRAVITY ON-SITE SEWAGE SYSTEM WORKSHEET

TYPICAL TWO CHAMBER SEPTIC TANK

MINIMUM TANK SIZE FOR PROJECT 1000 minimum GALLONS



1. STUB OUT FROM HOME ELEVATION INDICATED ON SEPTIC DESIGN
2. DOUBLE SWEEP CLEANOUT
3. RISER TO FINISH GRADE WITH SLIP CAP
4. 6" MIN. PVC DIAMETER RISER TO FINISH GRADE
5. 24" DIAMETER RISER TO FINISHED GRADE W/LOCKING SCREWS
6. SEPTIC TANK STUB OUT TO ALTERNATIVE TREATMENT UNIT (ATU) / PUMP TANK OR DRAINFIELD

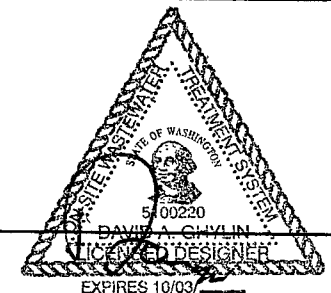
DAVE'S SEPTIC SERVICES INC.

P.O. BOX 826
SEABECK, WA 98380

PHONE # (360) 830-9699

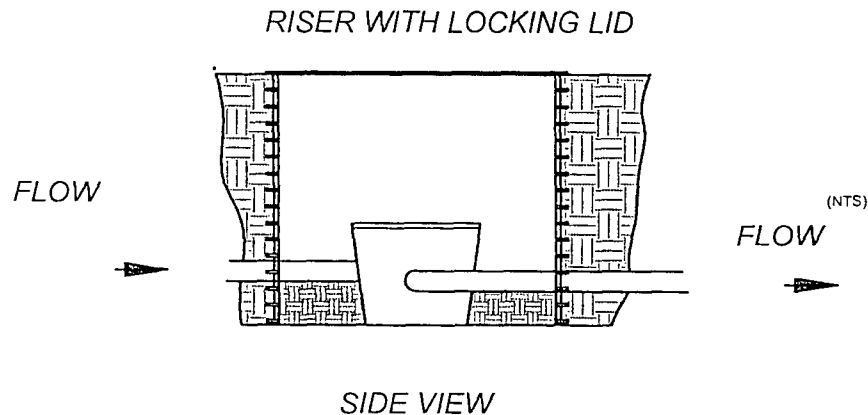
APPLICANT: Denise Courter

TAX PARCEL # 102501-4-001-2005



Permit Number: 19-01265

TYPICAL GRAVITY DISTRIBUTION BOX WITH RISER



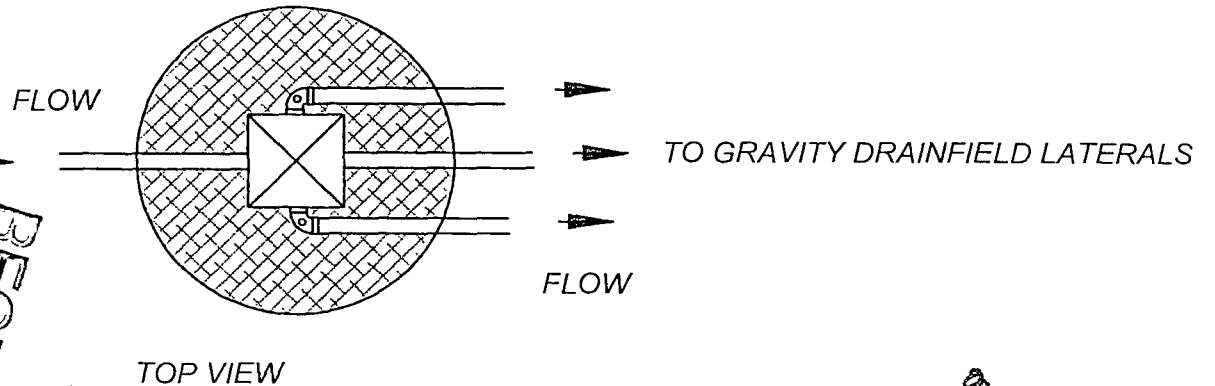
* NUMBER OF OUTLET PIPES FROM D-BOX MAY VARY BUT MUST EQUAL NUMBER OF LATERALS.

TRANSPORTATION PIPE FROM SEPTIC TANK, ATU OR PUMP CHAMBER

* SPEED LEVELERS ARE REQUIRED IN D-BOX.

*PLEASE LEAVE WATER AVAILABLE FOR INSPECTION TO CONFIRM PROPER DISTRIBUTION.

RECEIVED
MAY 10 2005
KITSAP PUBLIC
HEALTH DISTRICT



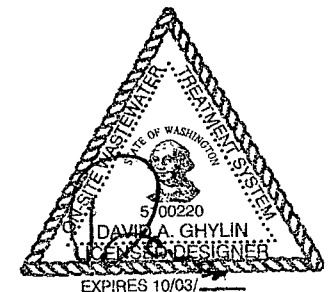
DAVE'S SEPTIC SERVICES INC.

P.O. BOX 826
SEABECK, WA 98380

PHONE # (360) 830-9699

APPLICANT: DENISE COURTER

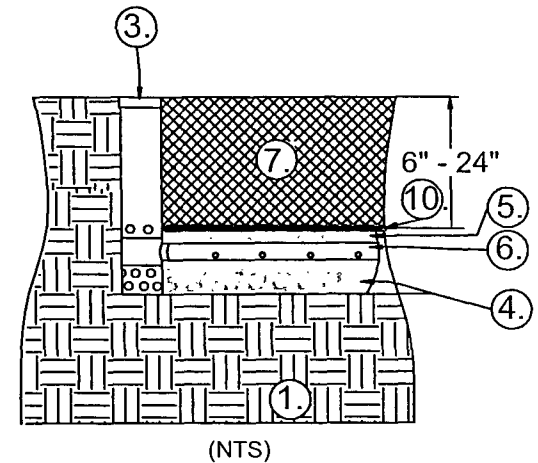
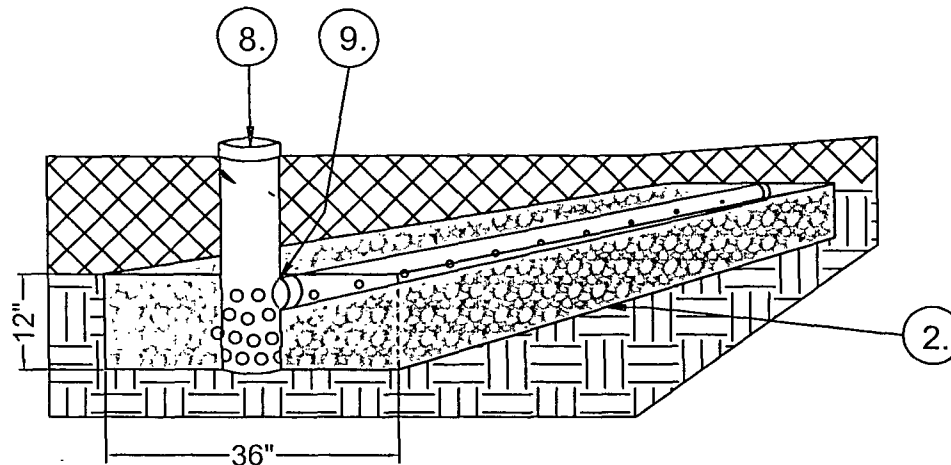
TAX PARCEL # 102501-4-001-2005



Permit Number: 19-01265

GRAVEL TRENCH DRAINFIELD

1. UNDISTURBED SOIL
2. INFILTRATIVE SURFACE
3. 4" PVC WITH DRAIN HOLES; EXTENDED TO THE BOTTOM OF GRAVEL TO MONITOR PONDING
4. DRAINROCK; 6" MIN. BELOW PIPE
5. DRAIN ROCK; 2" MIN. ABOVE PIPE
6. DRAIN TILE (PVC) 4" 3034.
7. COVER SOIL AS SPECIFIED ON DESIGN (Min. 6" - Max. 24")
8. INSPECTION PORT MIN. 4"
9. PVC 4 INCH "T".
10. FILTER FABRIC.
11. SEE DESIGN FOR LATERAL LENGTHS.



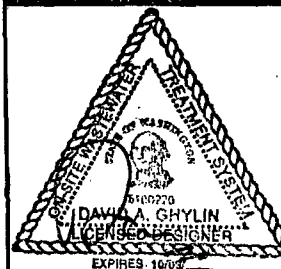
KITSAP PUBLIC HEALTH DISTRICT
102501-4-001-2005

OWNER:

Denise Courter

TAX ID:

102501-4-001-2005



DAVE'S SEPTIC SERVICES INC.

P.O. BOX 826
SEABECK, WA 98380
(360) 830-9699

SCALE:

NTS

DATE:

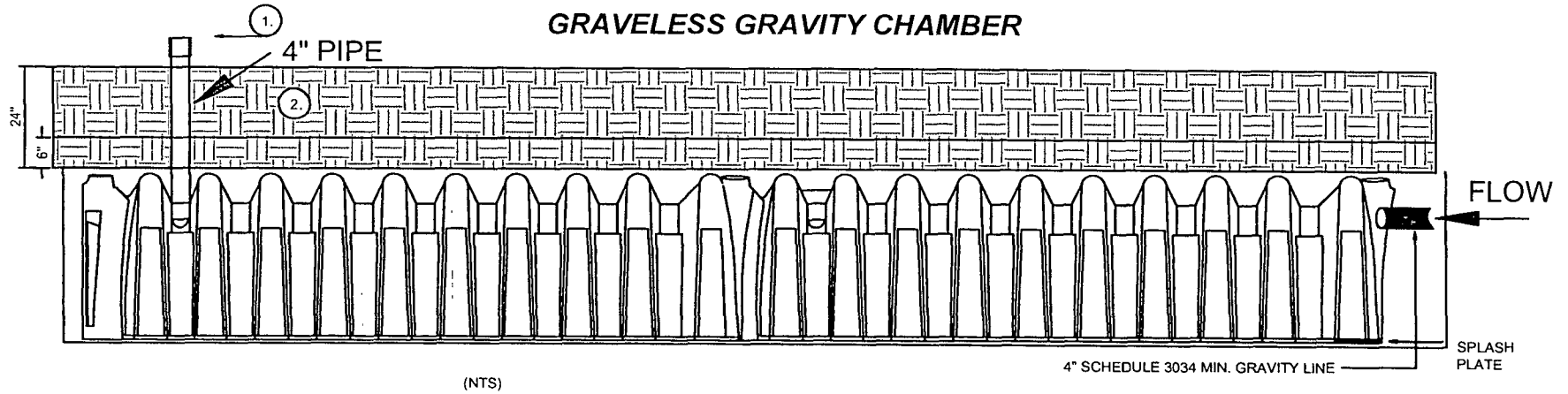
5-3-2018

REVISED:

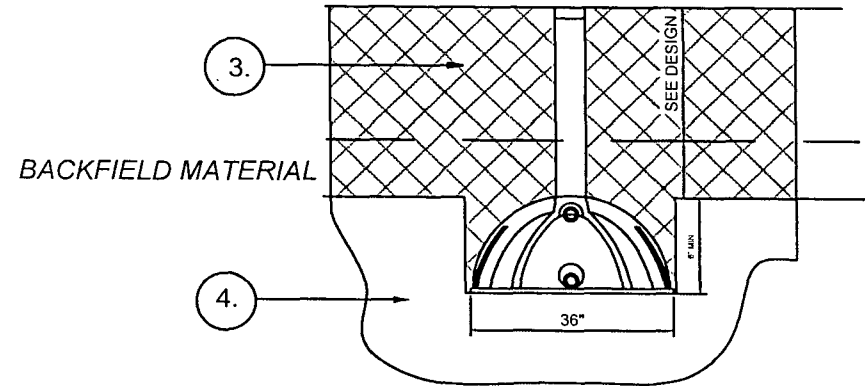
4-4-2019

Permit Number: 19-01265

GRAVELESS GRAVITY CHAMBER



1. OBSERVATION PORT 4"
2. BACKFILL SEE DESIGN FOR DEPTH OF COVER
3. COVER SOIL
4. NATIVE SOIL



RECEIVE
 MAY 10 2005
 KITSAP PUBLIC
 HEALTH DISTRICT

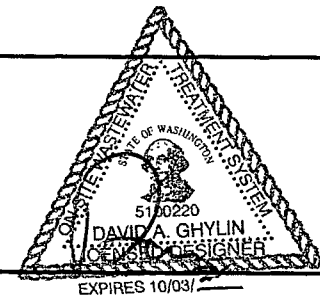
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APPLICANT: Denise Courter

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