CENTRAL DISTRICT
HEALTH
DEPARTMENT

Rezone # \_\_\_\_

Conditional Use # CAR13-0007

## CENTRAL DISTRICT HEALTH DEPARTMENT

## **Environmental Health Division**

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NT	Return to:	
	☐ ACZ	
	Boise	
	Eagle	
	Garden City	
	☐ Kuna	
	Meridian	
< S. al-	Ctor 1	

Preliminary /	Final / Short Plat Pub 13 - 00002  Barbermi U Estates Sub. Star
<b>1</b> .	We have No Objections to this Proposal.
2.	We recommend Denial of this Proposal.
<b>3</b> .	Specific knowledge as to the exact type of use must be provided before we can comment on this Proposal.
4.	We will require more data concerning soil conditions on this Proposal before we can comment.
<b></b> 5.	Before we can comment concerning individual sewage disposal, we will require more data concerning the depth of:  high seasonal ground water waste flow characteristics bedrock from original grade other
<b>G</b> 6.	This office may require a study to assess the impact of nutrients and pathogens to receiving ground waters and surface waters.
7.	This project shall be reviewed by the Idaho Department of Water Resources concerning well construction and water availability.
<b>×</b> 8.	After written approval from appropriate entities are submitted, we can approve this proposal for:  central sewage  central water  individual sewage  individual water
9.	The following plan(s) must be submitted to and approved by the Idaho Department of Environmental Quality:  central sewage  central sewage dry lines  central water
<b>1</b> 0.	This Department would recommend deferral until high seasonal ground water can be determined if other considerations indicate approval.
<b>1</b> 1.	If restroom facilities are to be installed, then a sewage system MUST be installed to meet Idaho State Sewage Regulations.
<b>1</b> 2.	We will require plans be submitted for a plan review for any: ☐ food establishment ☐ swimming pools or spas ☐ child care center ☐ beverage establishment ☐ grocery store ☐ child care center
<b>1</b> 3.	Infiltration beds for storm water disposal are considered shallow injection wells. An application and fee must be
<b>1</b> 4.	submitted to CDHD.  Reviewed By: Reviewed By:
	Date: 5/29/13