

Application is For: ☐ New System ☐ Conversion Permit ☐ Replacement Of Entire System ☐ Disposal Area Only
☒ Expanded System ☐ Experimental System

Application For Subsurface Sewer Disposal Permit

This is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Street, Road, Etc. **RE. 175** Plumbing Permit No. **19778 EP** Date Of Plumbing Permit **2-1-99**

Brooksville

Owner's Name **Peter Ebeling** Tel. No. **213-596-2210** Name Of Applicant Owner's Agent **Sune** Tel. No.

164 Schooner Way

Seal Beach State **Ca.** Zip Code **90740** Town State Zip Code

Signature **Peter Ebeling** Date Applicant's Signature Date

Lot **1.5** ☐ Sq. Feet ☒ Acres Is Lot Zoned? ☐ Yes ☒ No Type Of Zoning Subdivision Name Lot No.

Water Supply For This Property Is: ☐ Dug Well, depth ☐ Drilled Well, depth ☒ Spring, depth **UNKNOWN**

ice water ☐ Body ☐ Course ☐ with disinfection ☐ without disinfection. Public Utility, name

E INVESTIGATION Show Location Of Pits on Site Plan on Page 2

Soil Profile No. 1	Soil Profile No.	Soil Profile No.	Soil Profile No.
☐ Pit ☒ Boring	☐ Pit ☐ Boring	☐ Pit ☐ Boring	☐ Pit ☐ Boring
Organic Strata	Organic Strata	Organic Strata	Organic Strata
Humus 1"			
1st Strata Olive brown fine sandy loam 42	1st Strata	1st Strata	1st Strata
Inches	Inches	Inches	Inches
2nd Strata	2nd Strata	2nd Strata	2nd Strata
Inches	Inches	Inches	Inches
3rd Strata	3rd Strata	3rd Strata	3rd Strata
Inches	Inches	Inches	Inches
4th Strata	4th Strata	4th Strata	4th Strata
Inches	Inches	Inches	Inches
Total Depth of Observation Hole Inches 42	Total Depth of Observation Hole Inches	Total Depth of Observation Hole Inches	Total Depth of Observation Hole Inches
Max. Seasonal Water Table Mottling 18 Inches ☐ None Evident	Max. Seasonal Water Table Mottling Inches ☐ None Evident	Max. Seasonal Water Table Mottling Inches ☐ None Evident	Max. Seasonal Water Table Mottling Inches ☐ None Evident
Impervious Layer Clay, Etc. 24 Inches ☐ None Evident	Impervious Layer Clay, Etc. Inches ☐ None Evident	Impervious Layer Clay, Etc. Inches ☐ None Evident	Impervious Layer Clay, Etc. Inches ☐ None Evident
Bedrock ☒ None Evident Type of Bedrock	Bedrock ☐ None Evident Type of Bedrock	Bedrock ☐ None Evident Type of Bedrock	Bedrock ☐ None Evident Type of Bedrock
Surface Slope 7 %	Surface Slope %	Surface Slope %	Surface Slope %
Soil Group 3 Soil Condition C	Soil Group Soil Condition	Soil Group Soil Condition	Soil Group Soil Condition
Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II

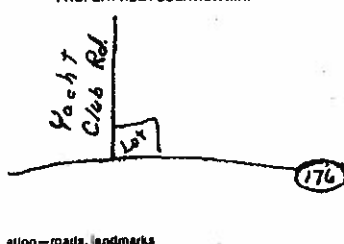
10/3/78 (date), a site investigation for this project was completed. I located this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature **Gregory Perkins** Site Evaluator License Number: **96**
 Date Signed **Oct. 24, 1978**

SEWAL SYSTEM PROPOSED Show Location of System and Details on Disposal Plan on Page 2

SYSTEM:	TREATMENT TANK	SUBSURFACE ABSORPTION AREA/TYPE	SIZE	SITE MODIFICATION
combined System	☐ Aerobic Tank	☒ Bed System No. of Beds 2	☐ Small	Fill will be: 0 in. uphill 30 in. downhill
separated System	☒ Septic Tank	Length 40 ft Width 20 ft	☐ Medium	DETAILS
separated system—se of human waste disposal system to be used:	☐ Concrete	☐ Chamber System Number	☒ Med.-Large	☒ A Distribution Box is required (3)
separated Vault Privy	☐ Fiberglass	☐ Type A ☐ Single File	☐ Large	Pumping is ☐ required ☒ is not required
separated Pit Privy	☐ Metal	☐ Type B ☐ Cluster	☐ Extra-Large	The dose will be _____ Gallons
separated Toilet	Size In Gallons Existing 1000 Gall	☐ Special System Length _____ ft Width _____ ft	Design Flow 800 GPD	DISTANCES
separated Toilet	Number of Bedrooms	☐ Laundry System Type A _____ Type B _____	Name and type of establishment if other than private home	☒ Yes ☐ No: The proposed subsurface absorption will be located at least 100 feet from any and all wells, springs, surface water bodies and courses (lake, pond, stream, brook, stream, river, swamp, marshes, and bay).
separated Toilet		Maximum design for 8 bedroom inn.		☐ Yes ☐ No: The proposed subsurface absorption will be located at least 300 feet from any and all wells, springs producing 2000 gallons or more of water per day and any public water supplies.

PROPERTY/LOT LOCATION MAP



WAIVER ☐ State Variance Required ☐ Replacement Variance Required ☒ None Required

FOR THE USE OF LPI ONLY

☐ Denial: Application is denied for the following reasons; portions of the Code II are cited.
 Form is incomplete (pg.) as to ☐ General info. ☐ Site investigation. ☐ System Proposed, ☐ Site Plan, ☐ Disposal System Plan, ☐ Cross-Section, ☐ Statement. See section 4.1
☐ Site investigation indicates site is ☐ unsuitable for disposal system. ☐ Unsuitable for system proposed.
☐ System Proposed does not conform to Code.
☐ Site investigation indicates site modifications are necessary.
☒ Acceptance: Application for permit is approved ☐ with condition specified, comply with Section _____ ☐ without condition.

Signed LPI

Gregory P. Allen

Date **2-1-78** FHE 200

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

Page 1

Street, Road, etc.

Rt. 176

Owner of Property

Peter Eberling

If on water body, give name

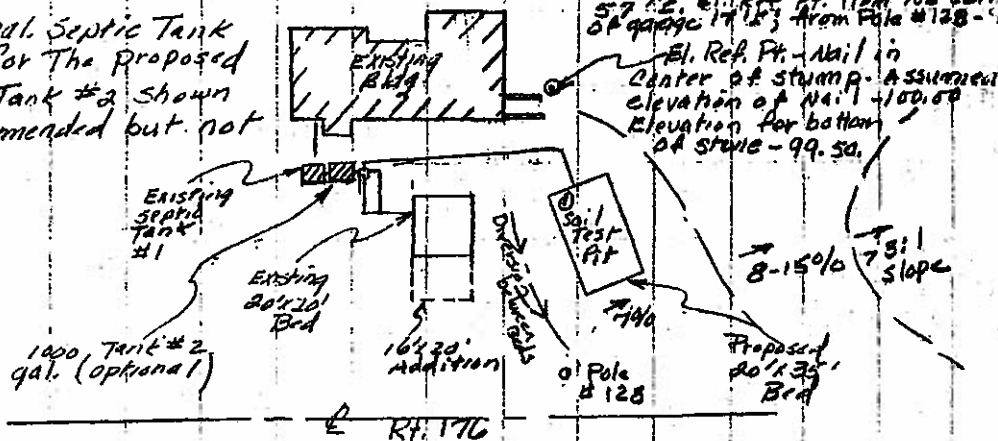
Scale 1" = 50'

Brooksville

Site Plan

NOTE:

A 1000 gal. Septic Tank required for the proposed system. Tank #2 shown is recommended but not required.



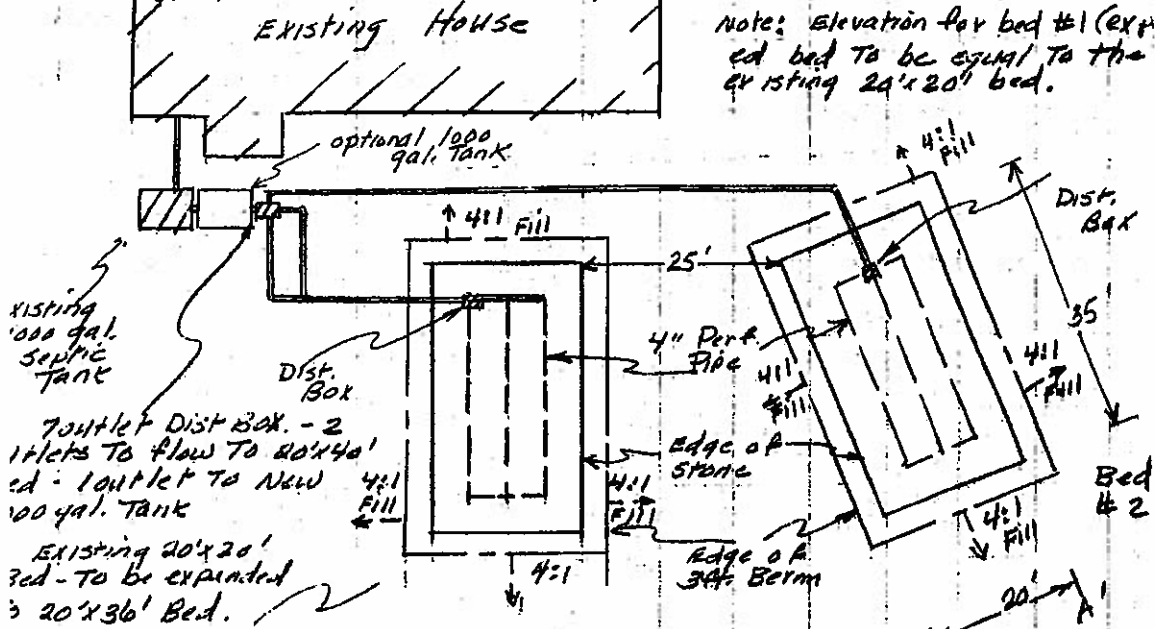
● Designates Elevation Reference Point

○ Designates Test Pit

Scale 1" = 20' or

Note: Elevation for bed #1 (expanded bed to be equal to the existing 20'x20' bed).

Private Sewage Disposal Plan



Subsurface Absorption Area Cross-section

Scale: Vertical - 1" = 5' or
Horizontal - 1" = 20' or

See attached Cross-section A-A'

Evaluator's Signature

Gregory Perkins 10/24/78

License Number

96

Signature Required

MHE

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit for a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its

Date:

Applicant:

Owner:

Peter Eberling

Peter Eberling

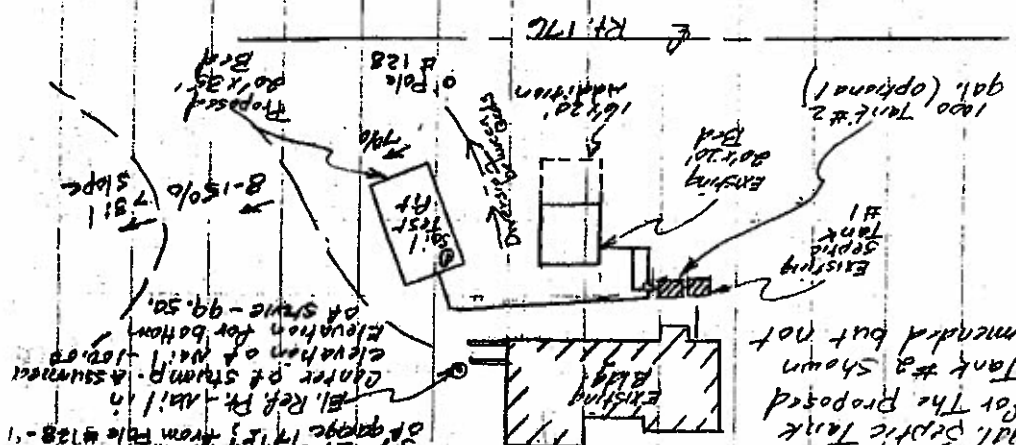
Owner of Property
Peter Eberling

Scale 1" = 50'

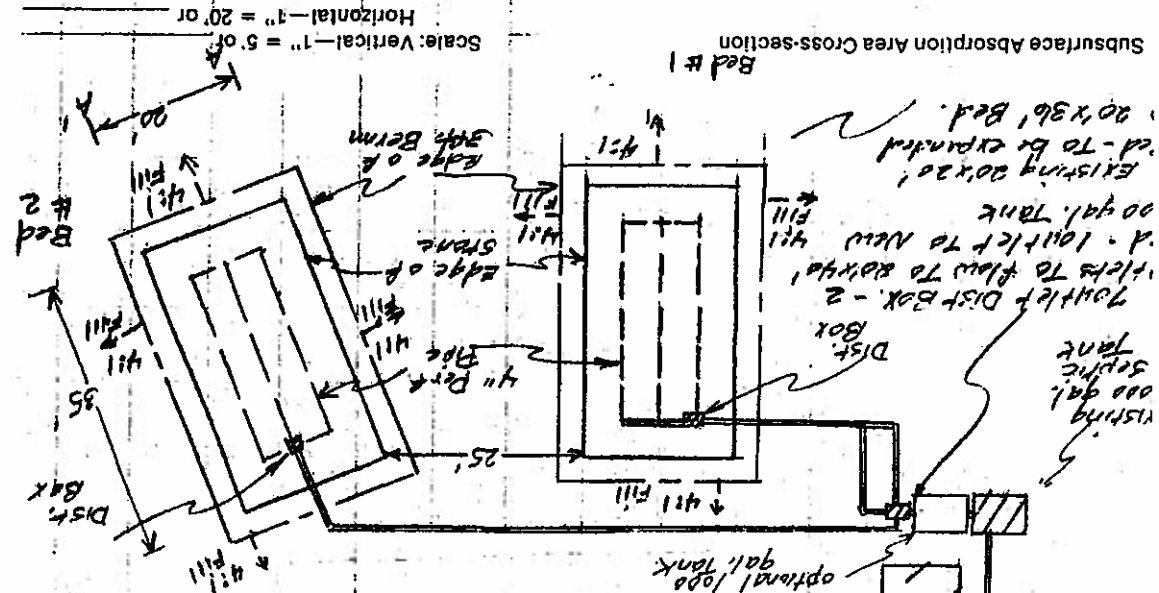
Location 5:
Twp 41 - from NE corner of
S7E - E. 1/4 Sec 6, T41N R4E Cor.
of Range 17 N.T.S. from file #128-1.

El. Ref. Pt. Abn. in
center of stump. Assumed
elevation of nail - 109.00
Elevation for bottom
of stem - 99.50.

Note:
A 1000 gal. Searcic Tank
required for the proposed
system. Tank #2 shown
is recommended but not
required.



Note: Elevation for bed #1 (ext
ed bed to be equal to the
existing 20' 20" bed.



See attached Cross-section A-A'

License Number 96 Date 10/24/78
 Signature [Signature] Date 10/24/78
 (No permit will be issued unless signed)

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