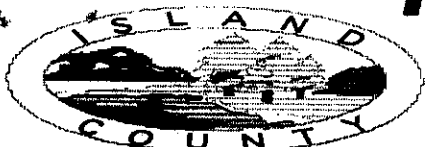


ASBUILT



Receipt #

144209

As Built #

643-04

Island County Health Department
PO Box 5000 Coupeville WA 98292**PERMIT TO CONSTRUCT A SEWAGE DISPOSAL SYSTEM**

RECEIVED

NOV 16 2004

ISLAND CO HEALTH DEPT.

Applicant Name: DAVID WINDOWS

Phone #: 425 222 5659

Owner Name: 35723 S.E. 47th PLACE

Mailing Address: FALL CITY WA 98024

Tax Parcel Number: R23432-305-0470 Twp: 34 Rge: 02 Sec: 32

Off-site Drainfield Parcel Number (if applicable): NA

Address of Construction Site: BAKER VIEW ROAD

Property Length: ± 315 Property Width: 374' to 420' Area: ± 2.9

Name of Water System: Apple View

Private Well []

Are there any critical areas within 100 feet of the property? [X] No Yes [] (attach report)

Are there any bluffs or banks within 100 feet of the project? [X] No Yes [] (attach report)

Is property in an archeologically significant area? [X] No Yes [] (attach report)

Is property within 800 feet of protected species area or on the shoreline? [X] No Yes [] (attach report)

Type of Use: Residential: [X] Restaurant [] Other: (attach narrative)

Number of Bedrooms: 3 Projected Gallons per day: 450

Soil Type: 2B Site Registration # 98-121, 87692

Drainfield Size: 450 sq feet Length: 150 TOTAL ft Width: 3 ft

Trench Depth: 17 in Septic Tank Size: 1000 gal Pump Chamber Size: NA gal

Designer Comments:

Health Department Comments:

* System must be installed per designers specifications (See sheets #1 Through #8)

We understand that changes to this site such as grading, filling or clearing, or any deviation from the original plan (as depicted on back) such as, but not limited to: (a) dwelling location, (b) placement of wells, drainfields, curtain drains, tanks, etc. without first receiving approval from the Island County Health Department, automatically voids this permit.

Owner Signature: David Windows

Date:

Designer's / Agents Signature: [Signature]

Date: 11-1-04

This permit is issued with the understanding that the property owner will allow, in perpetuity, a Health Department representative to enter onto this property during reasonable hours, for the sole purpose of monitoring the performance of the sewage disposal system.

A permit to construct a sewage disposal system shall be valid for three years from the date of issuance. Permits are transferable with property ownership provided the new owners accept the permitted plan. If the system is not installed within three years, a new permit may be applied for based on current standards and requirements.

For Health Department Use Only

System Type: Conventional [X] Alternative [] Commercial / Community []

Water Approved? No [] Yes [X] By [Signature] Restrictive Covenant: No [] Yes [] AF#

Drainfield Easement: No [] Yes [] AF# O&M Required: No [] Yes [] AF#

Plan Approved [Signature] Plan Disapproved Date: 12-28-04

Permit Number: 643-04 Expiration Date: 12-28-07

System Installed by: Reed Tacia Construction inspection date(s):

Final Inspection: Approved: Martell Rejected: Date: 12/6/07

Not within a bald eagle
habitat area: 11/17/04

ASBUILT



Property Owner: PAUL FRADALE As-Built #: 643-04

Island County Health Department
PO Box 5000 Coupeville WA 98239

Parcel # R23432-305-0470 Part of 315'

Septic System As-Built

Provide Accurate Plot Plan to Scale Including but not Limited to:

Drainfields, wells, tanks, banks, buildings, roads, utilities, easements, property lines, critical areas, etc.

Scale 1 Inch = 30 ft

North Arrow

RECEIVED

DEC 07 2007

IS.CO.HEALTH DEPT.

2" PVC MARKERS INSTALLED TO EACH CORNER OF THE DRAINFIELD.

10" PIT BOX RISERS COVER 4" INSPECTION PORTS ON EACH LATERAL BOTH ENDS.

SHADED AREA = REDUCTION

*Tank permit will be required for septic system completion and installation of septic tank.

EW 12/13/07

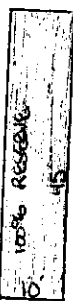
30-40%

NOTES:

- DRAINFIELD ONLY INSTALLED AT THIS TIME.
- 4 LATERALS X 34' EACH X 3' WIDE = 408 sq. ft. INSTALLED. UTILIZING INFILTRATORS = 11% REDUCTION.
- TRENCH DEPTH 17" LOW SIDE ~ 19" HIGH SIDE.
- INSPECTION PORTS + RISERS INSTALLED ON EACH END OF EACH LATERAL
- 4" PVC PIPE IS CONNECTED TO THE INLET OF THE "D" BOX & STUBBED ABOVE THE GROUND FOR EASY FUTURE LOCATION + GRADE/ELEVATION IDENTIFICATION.
- REASSEMBLE THE ENTIRE SEPTIC SYSTEM ONCE THE STRUCTURE IS ERECTED AND THE SEPTIC TANK IS INSTALLED AND CONNECTED TO THE DRAINFIELD.

BAKERVILLE ROAD

183'



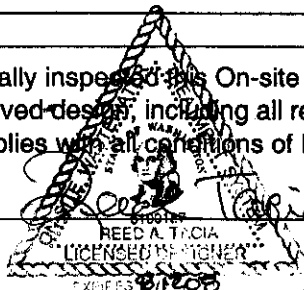
Part of 419'

Comments:

THIS SYSTEM WILL REQUIRE ROUTINE MONITORING AND REGULAR MAINTENANCE.

I, the undersigned, personally inspected this On-site Sewage Disposal system and certify that it was installed in accordance with the approved design, including all requirements deemed necessary by all proprietary devices and this system fully complies with all conditions of I.C.C 8.07.

Installers Signature: _____



(REED'S
CONST)

Date Installed: 12-6-07

WITH ERICA/ICHD

ASBUILT