

Lauri Feindell

Subject:

FW: TUP Referral - Vacation Rental Use - 4395 Mill Road | File No. E2024.007-TUP

Hi Ben

This proposal won't affect our service.

Thanks

Dennis Smith, Fire Chief
Naramata Volunteer FD

RESPONSE SUMMARY

TEMPORARY USE PERMIT NO. E2024.007-TUP

Approval Recommended for Reasons Outlined Below

Interests Unaffected

Approval Recommended Subject to Conditions Below

Approval Not Recommended Due to Reasons Outlined Below

Signature: 

Signed By: Janelle Rimell

Agency: Interior Health Authority

Title: Environmental Health Officer

Date: May 10, 2024



Province of British Columbia

Ministry of Health
PUBLIC HEALTH INSPECTION

APPLICATION FOR PERMIT TO CONSTRUCT A SEWAGE DISPOSAL SYSTEM

THE APPLICANT LISTED BELOW HEREBY MAKES APPLICATION FOR A PERMIT TO CONSTRUCT A SEWAGE DISPOSAL SYSTEM PURSUANT TO THE REQUIREMENTS OF THE SEWAGE DISPOSAL REGULATIONS AND AS DESCRIBED IN THE PLAN AND SPECIFICATIONS CONTAINED HEREIN AND/OR ATTACHED HERETO

PLEASE PRINT OR TYPE **REPAIR TO EXISTING, INADEQUATE SYSTEM MALFUNCTIONING CLOSE TO LAKE**

APPLICANT'S FULL NAME: [REDACTED] OWNER'S NAME: SCHUBERT

ADDRESS: [REDACTED] OWN: [REDACTED]

TYPE OF PREMISES SERVED: SINGLE FAMILY DWELLING DUPLEX OTHER SPECIFY

ESTIMATED TOTAL DAILY SEWAGE FLOW (REFER TO APPENDIX 1 OF REGULATIONS FOR MINIMUM FLOWS): [REDACTED] DIMENSIONS OF LOT: 36' x 60' LOT AREA: 5160 ft²

DEPTH OF SOIL TO HARDPAN OR BEDROCK HIGHEST WATER TABLE: [REDACTED] SEPTIC TANK (NAME IF PREFABRICATED): Double R MATERIAL: Concrete LIQUID CAPACITY: 600 Gal.

TYPE OF ULTIMATE DISPOSAL (NODAK LAGOON, SEEPAGE BED, CONVENTIONAL, ETC.): [REDACTED] TOTAL LENGTH OF DISPOSAL PIPE: [REDACTED] TYPE OF PIPE: [REDACTED] INSIDE DIAMETER OF PIPE: [REDACTED]

DISTANCES FROM SOURCES OF DOMESTIC WATER: FROM OWN: [REDACTED] FROM NEIGHBOURS: [REDACTED] FROM STREAM OR LAKE: [REDACTED]

IF A PACKAGE TREATMENT PLANT IS PROPOSED: MAKE AND MODEL: [REDACTED] TREATMENT CAPACITY: [REDACTED]

NOTE: A SITE PLAN MUST BE SUBMITTED WITH THIS APPLICATION (see below) AND PERCOLATION TEST RESULTS MUST ALSO BE PROVIDED RESULTS SHOULD BE RECORDED ON PLOT PLAN

THE SEWAGE DISPOSAL SYSTEM DESCRIBED ABOVE MUST BE CONSTRUCTED IN ACCORDANCE WITH THE REQUIREMENTS OF THE SEWAGE DISPOSAL REGULATIONS. THE MEDICAL HEALTH OFFICER OR HIS DELEGATE MUST BE NOTIFIED WHEN THE INSTALLATION IS READY FOR INSPECTION

April 27th 1982
DATE OF APPLICATION

PERMIT TO CONSTRUCT - PURSUANT TO THIS APPLICATION AND THE SEWAGE DISPOSAL REGULATIONS, PERMISSION IS HEREBY GRANTED FOR THE CONSTRUCTION OF A SEWAGE DISPOSAL SYSTEM

CONDITIONS OF PERMIT: Issued pursuant to Div. 8 of the Regs. for an alternate system. New septic tank, pump chamber, and absorption field to be installed. Field to be located as far from natural boundary/as practical, and at least 10' from the domestic water line.

All waste water from the house to be directed through the septic tank

April 27th 1982
DATE OF ISSUANCE

Tom Fleck
MEDICAL HEALTH OFFICER OR DELEGATE

NOTE: CONSTRUCTION MUST NOT COMMENCE UNTIL THIS PERMIT HAS BEEN SIGNED BY THE MEDICAL HEALTH OFFICER OR HIS DELEGATE. THIS SEWAGE DISPOSAL SYSTEM MUST BE INSPECTED BY THE AUTHORITY HAVING JURISDICTION BEFORE BACKFILLING. CHECK WITH YOUR LOCAL AUTHORITIES REGARDING BUILDING AND ZONING BY-LAWS. THIS PERMIT IS NOT TRANSFERABLE AND EXPIRES SIX MONTHS FROM DATE OF ISSUE.

COMMENTS: pump to be installed - present on site at final inspection.

BACKFILLING AND USE AUTHORIZED: YES NO DATE OF FINAL INSPECTION: April 30/82

Tom Fleck
MEDICAL HEALTH OFFICER OR DELEGATE

A PLOT PLAN SHOWING LOCATIONS OF BUILDINGS, SEPTIC TANKS, DISPOSAL FIELDS (YOURS AND YOUR NEIGHBOURS). ALL DRINKING WATER SOURCES, WATER LINES, PERCOLATION HOLES AND RESULTS, 4 FOOT TEST HOLES AND SURFACE WATERS MUST BE PROVIDED WITH THIS APPLICATION

○ INSERT NORTH ARROW

