

STEVENS COUNTY

POTABLE WATER CERTIFICATION

THE FOLLOWING INFORMATION MUST BE COMPLETED BY THE PERMIT APPLICANT AND SUBMITTED TO THE BUILDING DEPARTMENT TOGETHER WITH YOUR APPLICATION FOR A BUILDING/MANUFACTURED HOME PERMIT. STATE LAW (RCW 19.27.097) REQUIRES PROOF OF ADEQUATE AND POTABLE WATER PRIOR TO ISSUANCE OF A BUILDING PERMIT FOR A NEW HOME OR PLACEMENT OF A MANUFACTURED HOME. IF YOU HAVE QUESTIONS, PLEASE CONTACT THE STEVENS COUNTY BUILDING DEPARTMENT AT (509) 684-8325 OR WRITE TO: 215 SOUTH OAK STREET, COLVILLE, WA 99114.

PROPERTY OWNER _____			
ADDRESS: _____	_____	_____	_____
	City	State	Zip
SITE ADDRESS _____			
LEGAL DESCRIPTION _____			
TAX PARCEL # _____	SEC. _____	TWP. _____	RGE. _____

PLEASE NOTE: In the future, conditions may change which could affect the quantity and/or quality of the water. The test results to be identified on this form are for screening purposes only and do not imply that the water meets quality standards for **all** potential contaminants. If you have other concerns, please contact the N.E. Tri-County Health District, Environmental Health Department at (509) 684-2262 to discuss sampling and testing for specific contaminants.

WATER SOURCE			
_____ DRILLED WELL	_____ DUG WELL	_____ SPRING	_____ SURFACE
_____ FEET - DEPTH OF WELL			
_____ The Water Source is proposed to serve ONE RESIDENCE and does meet the private water supply well location and construction standards as required by "Chapter 173-160 WAC Minimum Standards for Construction & Maintenance of Wells" and listed on the attached Customer Service Bulletin B-7, "Guide to Residential Water Supply Development", Section #2 - Private Water Supply.			
_____ The Water Source does not meet the location standards referenced above for the following reason(s): _____			
_____ The Water Source is proposed to serve TWO RESIDENCES and does meet the attached requirements for two-party connections. Two party systems are waived from Washington State Dept. of Health Class B Public Water System requirements but must meet County requirements for quality and/or quantity. If required, an easement has been obtained and a copy of the recorded document is attached.			
WATER QUANTITY			
THE WATER SOURCE HAS _____ GALLONS PER MINUTE (GPM) AS SHOWN BY:			
_____	Pump Test, Air Test or Bailer Test		
_____	Well Log		
PLEASE INCLUDE A COPY OF THE TEST OR WELL LOG FOR VERIFICATION.			

WATER QUALITY

Please complete the information requested below. Water tests must have been collected within the last two years to be valid. PLEASE INCLUDE A COPY OF THE LAB TEST RESULTS FOR VERIFICATION.

TEST	RESULT	NAME OF LAB	DATE
TOTAL COLIFORM	_____	_____	_____
NITRATE	_____	_____	_____
LEAD	_____	_____	_____
ARSENIC	_____	_____	_____

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS "POTABLE WATER CERTIFICATION" IS CORRECT AND HEREBY ACKNOWLEDGE: That the above information will be used by the Stevens County Building Department solely for the purpose of reviewing the adequacy of the water system prior to issuance of a building permit for a new residence or placement of a manufactured home. In doing so, Stevens County does not provide any warranty, either expressed or implied, as to the accuracy of the information.

APPLICANT'S NAME (PLEASE PRINT) _____

APPLICANT'S SIGNATURE _____

MAILING ADDRESS _____

TELEPHONE # () _____ DATE _____

FOR OFFICE USE ONLY

INFORMATION REVIEWED BY: _____ DATE _____

Based upon the information provided by the applicant, it appears the water system -

COMPLIES DOES NOT COMPLY

with the Minimum Standards for Construction & Maintenance of Wells established by Ch. 173-160 WAC and the minimum standards for private water systems, which were established by the N.E. Tri-County Health District, Environmental Health Department, in March 1991. Neither the Stevens County Building Department nor the Health District has made an independent evaluation or inspection of the system.

Affidavit Required Affidavit Submitted Affidavit Recorded _____

COMMENTS:

TO OBTAIN SAMPLE BOTTLES FOR WATER TESTING, CONTACT:

INORGANIC & BACTERIAL	BACTERIAL ONLY
<p>Washington State Lab Environmental Lab Service 1610 N.E. 150th Street Seattle, WA 98155-7224 (206) 361-2910</p> <p>Anatek Labs, Inc. East 504 Sprague Ave. Suite D Spokane, WA 99202 (509) 838-3999</p> <p>AAA Superior Lab 16924 South Curtis Road Cheney, WA 99004 (509) 448-1740</p>	<p>Lincoln County Health Dept. P.O. Box 105 Davenport, WA 99122 (509) 725-2501</p> <p>Spokane County Health Dept. West 1101 College Avenue Spokane, WA 99201-2095 (509) 458-3667</p>

*THIS IS A PARTIAL LIST OF LABS CERTIFIED BY THE WASHINGTON STATE DEPARTMENT OF HEALTH.
A LISTING OF ALL CERTIFIED LABS IS AVAILABLE UPON REQUEST.*