

Maurice L. Anderson,

Director

· Surface Mining

707 Nevada Street, Suite 5 Susanville, CA 96130-3912 Phone: 530 251-8269 Fax: 530 251-8373

email: landuse@co.lassen.ca.us website: www.co.lassen.ca.us

Zoning & Building

Inspection Requests Phone: 530 257-5263

**Environmental Health** Messages: 530 251-8528 email: EHE@co.lassen.ca.us

Maurice Anderson, Director

Lassen County Planning and Building Services

Department

From:

To:

June 29, 2023

Sara Chandler, Division Manager

Lassen County Environmental Health

RE:

Use Permit #2023-005, Benson

### The Environmental Health Division of the Lassen County Planning and Building Services Department finds as follows:

#### SANITARY SEWAGE DISPOSAL

The operator would like to install a new onsite wastewater treatment system for the commercial kitchen. The permit application is included.

#### WATER SUPPLY AVAILABILITY:

Water in this area is provided by private wells. The operator already performs regular water quality testing for their cottage food license, which will need to continue for the retail food facility operation.

## The Environmental Health Division of the Lassen County Planning and Building Services Department recommends the following conditions be placed on the project if approved:

- 1. The applicant must submit plans for the commercial kitchen for plan check and approval prior to operation. The commercial kitchen must comply with the requirements of the California Retail Food Code.
- 2. The onsite waste disposal system for the kitchen must be installed and approved prior to operation of the kitchen.
- 3. According to the applicant's proposal permits are required from Lassen County Environmental Health for the retail food facility prior to operation and a permit may also be required from the California Department of Public Health - Food and Drug Branch for the canning processes.

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# LASSEN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

1445 PAUL BUNYAN ROAD, SUITE B, SUSANVILLE, CA 96130 Phone: (530) 251-8528

### APPLICATION for SEWAGE DISPOSAL PERMIT

NOTE: THIS IS NOT A PERMIT TO INSTALL A SEPTIC SYSTEM. You must go to Lassen County Planning and Building Services at 707 Nevada Street, Susanville, CA 96130, to pay the required fee and obtain your permit.			
ASSESSOR'S PARCEL NUMBER PHYSICAL ADDRESS		PERMIT NUMBER	
129-440-623 712-960 Sunnyside Rd. SUBDIVISION UNIT BLOCK LOT		LOT SIZE	
JUNION CHIL	BLOCK LOT	LOT 312L	
To Be Completed By Owner Or Authorized Agent Permit Expires One (1) Year from Date of Issue			
Dancedo		OWNER'S PHONE NUMBER	
Ben Son			
CONTRACTOR  CONTRACTOR'S LIC. NUMBER  1028187			
TYPE OF PREMISE		WATER SUPPLY	
☑ Commercial Specify: Kitchen ☐ Other Specify: ☐ Pub		☐ Public Specify:	
	rooms: Baths:	Private Type: Well	
For Health Department Use Only			
SEWAGE DISPOSAL SYSTEM REQUIREMENTS			
PERCOLATION		SEPTIC TANK	
Percolation Test Performed: ☑ No ☐ Yes By:	Tank Size in Gallons:	500	
Results: min./in. Date:		Material Constructed of : Poil	
SEWAGE DISPOSAL FIELD			
	eet Length of Each Line:	2 <u>240</u> Feet	
Distance from Water Source:	eet Total Length of Leach Lin		
	eet Width of Trench:		
Distance from Centerline of County Road: 254F	eet Depth of Trench:		
☐ Chambers ☐ Rock and Pipe ☐ Other Specify:	Depth of Gravel Beneath	1	
Required Distribution Box must be set in Concrete Ves N/A Depth of Gravel Over Leach Pipe: N/A Inches			
NOTE: All leach lines must be installed using a transit level, engineer's level, laser level, or equivalent. Leach gravel must be graded $1\frac{1}{2}$ - 3 inches washed.			
Leach graver must be graded 1 /2 - 5 mches washed.			
THIS APPLICATION MUST BE ACCOMPANIED BY AN ACCURATE TO SCALE PLOT PLAN			
(8 ½ X 11 OR 8 ½ X 14 WITH APN WRITTEN ON THE PLOT MAP)			
NOTE: In the event that unsuitable conditions (i.e., excessive or consolidated rock, hardpan, water, etc.) or questionable material is encountered during excavation; STOP WORK IMMEDIATELY and contact the Health Department.			
I hereby certify that I have prepared this application and that the installation will be done and inspected in accordance with the Lassen County Ordinances and State Laws.			
Signed: Al Q Fix lance Monath Title	: Contractor	Date: <u>6/13/23</u>	
DO NOT FILL IN BELOW THIS LINE			
NOTE: APPROVAL OF THE HEALTH DEPARTMENT IS NOT A GUARANTEE THAT THE PROPOSED INSTALLATION WILL OPERATE SUCCESSFULLY,			
BUT MERELY THAT THE SYSTEM MEETS THE MINIMUM REQUIREMENTS OF THE HEALTH DEPARTMENT.			
APPROVED APPROVED WITH CONDITIONS			
ssued By:	, E.H.S.	Date: 6/13/23	
Final Inspection By:		Date:	
Remarks/Conditions: System for commercial kitchen only			