

## **SEPTIC RECORDS REQUEST**

Date of Request:				
Printed Name of Request	er:			
Telephone Number:	Emai	l address: _		
Property Information:				
Street Address:				
Legal Description: Townsh	ip: Rar	nge:	Section:	
Name of Subdivision:			Lot #:	Block #:
Year home built:				
Year repairs made to sep	ic system:			
Name(s) of previous owner	ers:			
Dy signatura balaw, ragus	ster acknowledges the	following:		
<ul> <li>Per Idaho Code 9-348 or as otherwise prohib</li> <li>A fee of five cents (\$.0</li> <li>Per Idaho Code 9-338 if:</li> </ul>	the requested information wited by law  5) per copy page shall be characteristics, actual labor costs associate	vill not be used arged, generall ed with locating	y prepaid, before of and copying docu	copies are made
<ul> <li>Per Idaho Code 9-348 or as otherwise prohib</li> <li>A fee of five cents (\$.0</li> <li>Per Idaho Code 9-338 if: <ol> <li>the request is</li> <li>the request ir</li> <li>the actual lab</li> </ol> </li> <li>Prepayment of estimation</li> <li>Requester may be characteristics</li> </ul>	the requested information wated by law 5) per copy page shall be charactual labor costs associate for more than one hundred (includes records from which no or associated with locating and ed costs will be required arged for mailing costs	will not be used arged, generalled with locating (100) pages of conpublic informand copying reco	y prepaid, before of and copying docu paper records; or ation must be dele ords exceeds two	copies are made ments shall be charged eted; or (2) person hours.
<ul> <li>Per Idaho Code 9-348 or as otherwise prohib</li> <li>A fee of five cents (\$.0</li> <li>Per Idaho Code 9-338 if: <ol> <li>the request is</li> <li>the request ir</li> <li>the actual lab</li> </ol> </li> <li>Prepayment of estima</li> </ul>	the requested information wated by law 5) per copy page shall be charactual labor costs associate for more than one hundred (includes records from which no or associated with locating and ed costs will be required arged for mailing costs	will not be used arged, generalled with locating (100) pages of conpublic informand copying reco	y prepaid, before of and copying docu paper records; or ation must be dele ords exceeds two	copies are made ments shall be charged eted; or (2) person hours.
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\_\_\_\_No records were found in our files regarding the requested information

Completed records requests can be sent to recordsrequest@siph.idaho.gov.