



Arkansas Department of Health
Environmental Health Protection

Received

MAY 01 2025

Benton Co Health Unit

Receipt Number
27571085

Individual Onsite Wastewater System Permit Application

Permit Type

- ☒ New Installation
☐ Alteration / Repair

DR Environmental ID #

7601089776

Fee Schedule for Structures		✓
Structures 1500 sq ft or less	\$ 30.00	☐
Structures more than 1500 sq ft and up to 2000 sq ft	\$ 45.00	☒
Structures more than 2000 sq ft and up to 3000 sq ft	\$ 90.00	☐
Structures more than 3000 sq ft and up to 4000 sq ft	\$120.00	☐
Structures more than 4000 sq ft	\$150.00	☐
Alteration and Repair	\$ 30.00	☐

Part 1 Application

Treatment Type (check one)

Disposal Method (check one)

- ☒ STD = Standard Septic Tank
☐ ISF = Intermittent Sand Filter
☐ PMF = Proprietary Media Filter
☐ OTH = Other (Describe)
☐ ATU = Aerobic Treatment Plant
☐ RSF = Re-circulating Sand Filter
☐ RGF = Re-circulating Gravel Filter
☐ HLD = Holding Tank
☒ STD = Standard Absorption Field
☐ SUR = Surface Discharge
☐ CPF = Capping Fill
☐ OTH = Other
☐ LPD = Low Pressure Distribution
☐ HLD = Holding Tank
☐ SRL = Serial Distribution
☐ DRP = Drip Irrigation

1. Owner's/Applicant's Name RG Construction Howard Dover
DRIVER BUILDERS LLC
2. Phone Number 217-316-0765 979-841-856

3. Mailing Address 7500 WESTMINSTER PL FORT SMITH AR 72903
4. County BENTON

5. Address of Proposed System (If a 911 address is not available, attach detailed directions or map)
LUTON LANE BELLA VISTA 72714

6. Subdivision Name BEDFORD LOT 23, BLOCK 5
7. Approval Date 1967
8. Date Recorded 1967
9. Lot Number LOT 23, BLK 5

10. Lot Dimensions 65.14' x 24.78' x 145.85' x 67.94' x 19.63'
11. Total Area (Acres) 0.275 ACRES
12. # Bedrooms # People 2 BEDROOMS
13. Daily Flow (GPD) 300

14. Parcel Number or Brief Legal Description of Property (Attach a separate sheet of paper, if necessary)
PARCEL # 16-03608-000
17-21-30

15. Water Supply (Specify supplier, if Public Water) BELLA VISTA
16. GPS Coordinates 34.487711 94.195737

17. Loading Rates	(gpd/ft ²)	18. System Specifications
Primary Area	<u>0.75</u>	a. Size of Septic Tank <u>1250 Comb</u> gal
Secondary Area	<u>NA</u>	b. Size of Dose Tank <u>250</u> gal
Percolation Test	(min/in)	c. Absorption Area <u>444</u> ft ²
Primary Area Avg	<u>NA</u>	d. Number of Field Lines <u>5</u>
Secondary Area	<u>NA</u>	e. Length of Field Lines <u>38, 42, 49, 47, 46</u> ft
f. Trench Depth	<u>18</u>	inches
g. Trench Spacing	<u>10</u>	feet
h. Trench Media (List Below)	<u>ASTM D2729</u>	i. Trench Width <u>24</u> in
	<u>EASY FLOW 1201</u>	<u>18</u> in

TO THE OWNER

The permit for construction may be deemed invalid by the local Environmental Health Specialist before the start of construction, if the site and/or soil conditions have changed after approval of this permit, or if the information within this permit is inaccurate or has been found to be misrepresented. Approval for operation does not constitute a guarantee that the system will function properly. The approval states that the system was designed and installed according to the Arkansas Department of Health, Rules Pertaining to Onsite Wastewater Systems, unless there are exceptions or deviations noted in the comments. A Permit for Construction is valid for one (1) year from the date of approval. The authorized agent must revalidate a permit more than one (1) year old prior to the start of any construction.

19. Utilization Verification

I hereby attest that item 12, the number of bedrooms (number of persons for commercial) and square footage of the structure that will utilize the designed individual onsite wastewater system in this permit application, is accurate. I have reviewed the permit application and understand the layout, installation, maintenance, operation and expense(s) that may be associated with this system.

[Signature] Date 4/25/25
Owner/Applicant/Developer/Designated Representative Signature

20. I certify that I have conducted the above tests and that the above listed information is in accordance with the latest requirements of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems.

[Signature] R.S. Soil Certified ☒ Yes ☐ No

Designated Representative Signature ELIZABETH ANDREWS
Print Name ELIZABETH ANDREWS
Date 4/30/25 Phone Number 479-531-6007

21. Approval of Health Authority

The information and specifications in this application have been reviewed and found to meet the requirements of the Arkansas Department of Health Rules Pertaining To Onsite Wastewater Systems. A PERMIT FOR CONSTRUCTION is hereby issued.

[Signature] 934 5/1/25
Environmental Specialist Signature EHS Number Date

Reval by Elizabeth Andrews

on 9-21-26 see ATCH.

Individual Onsite Wastewater System Permit Application

Receipt Number=

27571085

22. Soil Criteria (Primary Area)								Indicate the depth to items a-f, if observed in the soil (designate in inches)	
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (gpd/ft ²)		
NA	NA	36"	NA	36"	NA	MOD	0.75		
23. Soil Criteria (Secondary Area)								Indicate the depth to items a-f, if observed in the soil (designate inches)	
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (gpd/ft ²)		
NA	NA	NA	NA	NA	NA	NA	NA		
24. Seasonal Water Table (SWT) Classes Detail									
Primary Area			List Redoximorphic Features and/or Clay Content Restrictions						
Brief	in								
Moderate	36		CHROMA 2's						
Long	in								
Secondary Area			List Redoximorphic Features and/or Clay Content Restrictions						
Brief	in								
Moderate	in								
Long	in								
Comments									
HYDROSPITTER SOILS BY BUCHANAN MC #934 5/5/25 flags ✓ mapped Nixa. Agree with DR soils.									

Part 2 Installation Inspection

Septic tank manufacturer		Pump information	
Septic tank material		Trench media and width	
Dose tank manufacturer		Depth of interceptor drain	
Dose tank material		Depth of settled fill	
Name of Installer			License Number
Installation Inspected by ☐ Environmental Health Specialist ☐ Designated Representative (original submitter) (check one or installer signs System Installation Verification below)			
Signature		EHS / License Number	Date
System Installation Verification I have installed this system as designed and in compliance with all Rules and Regulations Pertaining to Onsite Wastewater Systems.			
Installer Signature		License Number	Date

Part 3 Permit for Operation

The information contained in Part 1 and 2 of this form has been reviewed and found to meet the requirements of the Arkansas Department of Health. THE PERMIT FOR OPERATION of this system is hereby issued.			
Environmental Health Specialist		Signature	EHS Number
			Date
Comments			
Site Revalidation conducted by ☐ Environmental Health Specialist ☐ Designated Representative (original submitter) (check one)			
Signature		EHS / License Number	Date

Bobbi Buchanan
14172 Dartmoor Drive
Bentonville, Ar. 72712
Ph# (479) 855-6314
Fax (479) 855-7490

November 14, 2024

Oliver Builders LLC
7500 Westminster Place
Fort Smith, AR 72903

Re: Lot 23 Block 5 Bedford
Bella Vista, AR
Parcel #16-03608-000

Dear Elizabeth,

A soil morphology pit was evaluated at the above referenced property on November 11, 2024. The results follow:

36" Moderate Seasonal Water Table
>36" Bedrock
.75 loading rate Gal/sq. Ft. (10' centers)
200 Linear feet will be required for a two-bedroom home
300 Linear feet will be required for a three-bedroom home

This is suitable soil for a septic system. This analysis is for the purpose of evaluating soil suitability for sewage disposal. The linear footage required for this soil is shown above. It is only the first step in determining what will fit on the property. The contours are somewhat limiting. As we discussed, a survey/topo should be done to determine what size home can be built.

There are many variables to planning a building and septic system including lot topography, size of the building and other additions and size of the lot. No system can be approved or installed without a valid permit from the local Health Department.

If I can be of further assistance, please contact me.

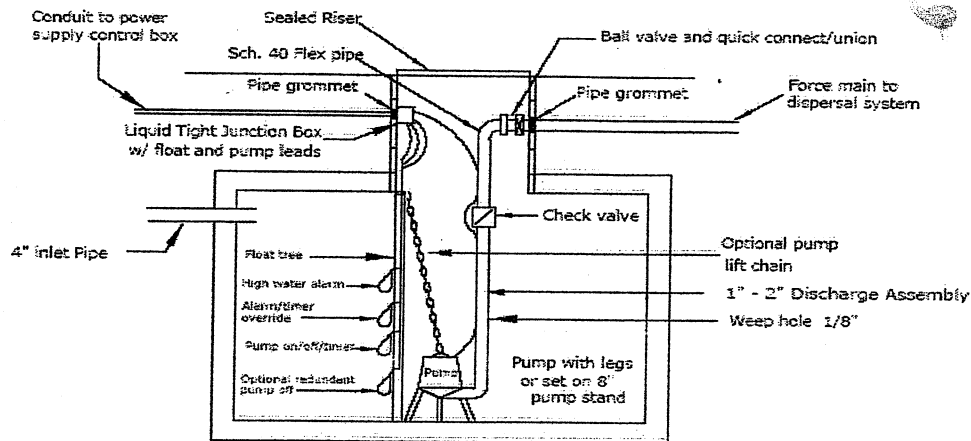
Sincerely:



Bobbi T. Buchanan
Designated Representative

Standard Pump / Dose Calculation Worksheet

Pump Tank



To calculate Gallons per minute:

- Gallons per day ÷ loading rate 444 sq. ft. (Example: $370 \text{ gpd} \div .75 = 493.33$ or 494 sq. ft.)
- Square footage required for system x dose rate. Specify Dose Rate 25% FT gal/sq. ft (Max dose rate is .25 gal/ sq.ft.)
(Example: $494 \text{ sq. ft} \times .15 \text{ gal/sq.ft} = 74.1 \text{ gal dose}$) 55 gal per dose.
- Take dose rate and ÷ by number of minutes for pump run time = 5.5 gpm calculated. Recommended minimum pump run time is 2 minutes. Calculated pump run time 10 minutes per dose. Check manufacturer for best optimal run duration.
(Example: $74.1 \text{ gal/dose} \div 4 \text{ minutes} = 18.53$ or 19 gpm)

To calculate Total Head:

- Ground elevation of distribution device 0.5 - (minus) Ground elevation pump/ dose tank 2.8 = 2.3
+ "Pump off" elevation in dose chamber / tank to ground (typically 4.25 ft) 6.55 = (Elevation / Static Head)
- Distance to be pumped 30 Pipe Size: 2". Calculate Friction Loss (Use Table on back of page)
0.08 Friction loss.
- Add additional headloss for distribution device if not using d-box: 5. Attach calculation sheet for the device.
- Total Head (TDH) 11.63. (Elevation / Static Head) + Friction Loss + Distribution device (if needed) = Total Head

Pump Selected (brand, model) ZWELLER BN53 Attach pump curve and spec sheet.

Alarm Selected (brand, model) ZWELLER 10-0123 Attach spec sheet.

Calculate Drawdown: Maintain enough effluent to cover the pump.

Length" x Width" x 1" ÷ 231 = Gallons per inch (Example $72" \times 16" \times 1" = 1152^3 \text{ inches} \div 231 = 4.98$ or 5 gals/ inch)

Drawdown: 4.25 gallons per inch in tank. Drawdown in inches per dose 12.9.

Set pump float and alarm float. (Maintain a minimum of 1 inch difference between the pump "on/off" float and the alarm float.

NOTE: Gallons per inch may vary between tanks/pump chambers by different manufacturers.

Friction Loss Per 100 Feet of SCH 40 Plastic Pipe Nominal Pipe Diameter

GPM	1/2"	3/4"	1"	1 1/4"	1 1/2"	2"	3"	4"
1	2.08	0.51	-	-	-	-	-	-
2	4.16	1.02	0.55	0.14	0.07	-	-	-
5	23.44	5.73	1.72	0.44	0.22	0.066	0.015	-
7	43.06	10.52	3.17	0.81	0.38	0.11	0.021	-
10	82.02	20.04	6.02	1.55	0.72	0.21	0.03	-
15	-	42.46	12.77	3.28	1.53	0.45	0.07	-
20	-	72.34	21.75	5.59	2.61	0.76	0.11	0.03
25	-	-	32.88	8.45	3.95	1.15	0.17	0.04
30	-	-	46.08	11.85	5.53	1.62	0.23	0.06
35	-	-	-	15.76	7.36	2.15	0.31	0.08
40	-	-	-	20.18	9.43	2.75	0.41	0.11
45	-	-	-	25.1	11.73	3.43	0.51	0.17
50	-	-	-	30.51	14.25	4.16	0.61	0.16
60	-	-	-	-	19.98	5.84	0.85	0.22
70	-	-	-	-	-	7.76	1.13	0.31
75	-	-	-	-	-	8.82	1.28	0.34
80	-	-	-	-	-	9.94	1.44	0.38
90	-	-	-	-	-	12.37	1.8	0.47
100	-	-	-	-	-	15.03	2.18	0.58

***** Don't forget to add 20% for fittings*****

FORMULA: Force main + 20% ÷ 100 x friction loss

Force main 30 ft x .20 = 6 + force main 30 = equivalent pipe length 36

Equivalent pipe length 36 ÷ 100 = 0.36 x Friction loss 0.21 = Friction Headloss 0.08

Example: 125 ft of 2in SCH 40 at 25 gpm

125 ft x .20 (fitting loss) = 25 ft + 125 = 150 ft (equivalent pipe length) ÷ 100 = 1.5 x 1.15 = 1.73 ft of Friction Headloss

Take answer and apply to front of worksheet.

Helpful conversion factors:

1 acre = 43,560 Sq. Ft. (ft²) Inches ÷ 12 = Tenth of Foot (Ex. 6 in. ÷ 12 = 0.5 Ft.)

231 cubic inches = 1 gallon of water 1 Cu. Ft. of Water weighs = 62.4 lbs. 1 Cubic Yard = 27 Cu. Ft. (3 x 3 x 3)

1 Gallon of Water weighs = 8.34 lbs. 1 Cu. Ft. = 7.48 gallons Volume, gallons = ft³ x 7.48

Volume for a Rectangle

Volume, cu. ft. = L x W x d

(L = length; W = width; d = depth of water in tank)

Volume for a Pond

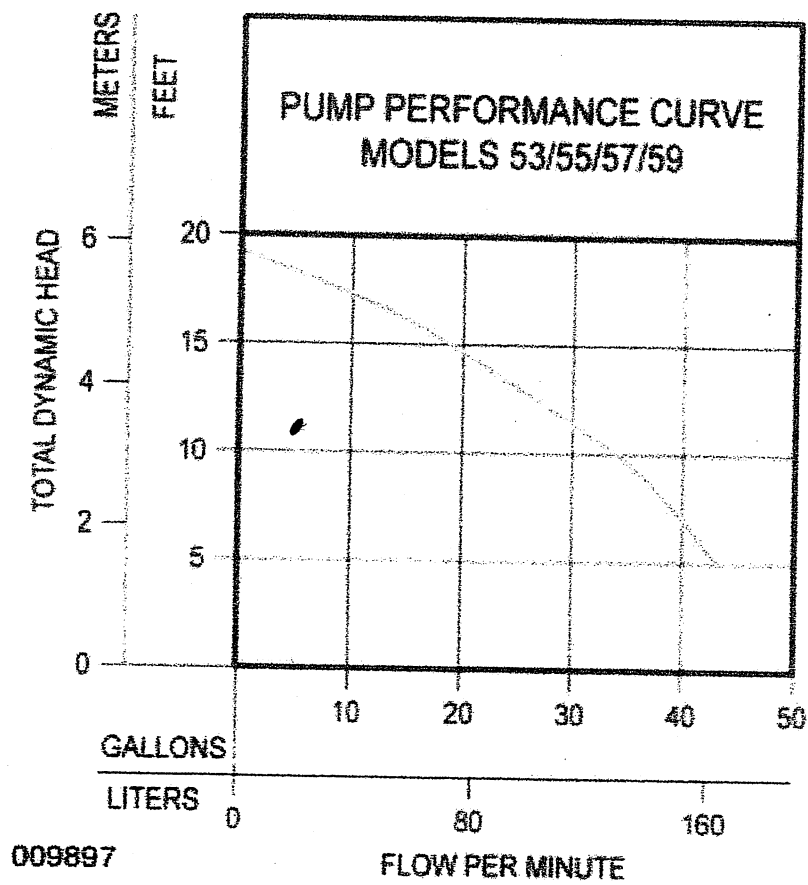
Volume, ft³ = 43,560 x acres x depth

Volume for a circle

Volume, cu. ft. = 3.14 x r² x d (d=depth of water in tank)

Volume, cu. ft. = 0.785 x D² x d

VER 1.0 (10/07)



"QUALITY PUMPS SINCE 1939"

Product information presented here reflects conditions at time of publication. Consult factory regarding discrepancies or inconsistencies.

<http://www.zoeller.com>

ZOELLER
PUMP CO.



MAIL TO: P.O. BOX 16347 • Louisville, KY 40256-0347
SHIP TO: 3649 Cane Run Road • Louisville, KY 40211-1961
(502) 778-2731 • 1 (800) 928-PUMP • FAX (502) 774-3624

SECTION: 4.10.005

FM1596

1097

Supersedes

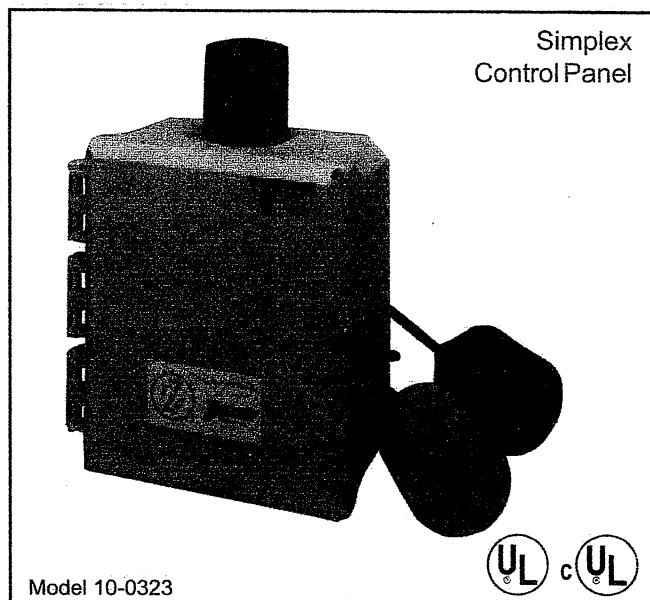
New

ELECTRICAL CONTROL PANEL - FOR SIMPLEX INSTALLATIONS

An Electrical Control Panel is used on a Simplex pump application where automatic electrical cycling of the pump is desired for added protection in residential or commercial applications. A Control Panel is required for all systems using a nonautomatic pump. The built-in alarm system, a standard feature, can be connected to sound when the water level becomes unusually high. All electrical systems must be installed by a qualified electrician and according to the National Electrical Code. (See Section 430-71 through 430-113, plus any others that apply.)

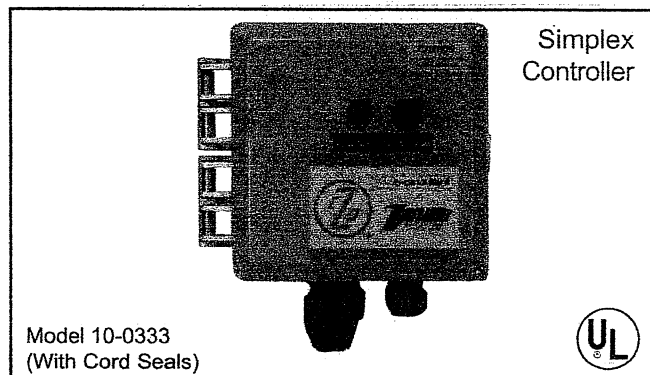
SINGLE PHASE CONTROL PANEL FEATURES

- 115-208-230 Volt/Single Phase.
- Clear dead front panel.
- Equipment disconnect.
- Motor contactor and dry auxiliary contact with Model 10-0125.
- NEMA 4X enclosure.
- Top mounted alarm light.
- Alarm horn.
- Pump run indicator light.
- Horn silence/alarm test toggle switch.
- HOA switch.
- Float switches included.
- Complete installation instructions included.
- U.L. listed for US & Canada.
- 2 Year Warranty



SINGLE PHASE CONTROLLER FEATURES (P/N 10-0333)

- 115-208-230 Volt Single Phase.
- Motor contactor.
- NEMA 4X enclosure with hinged cover.
- Pre-installed cord seals.
- Terminal strip.
- Run light and HOA switch on cover face.



NOTE: 600 and 700 Series single phase pumps require special panels that include start components. See Selection Guide FM1228 for correct panel selection.

SINGLE PHASE SIMPLEX PUMP CONTROL/ALARM SYSTEM				
Model #	Volts	Pump FLA	Float Switches	Alarm Voltage
10-0323	115V 208-230V	15 Amps	Single float pump switch (included) Control switch (included)	120V AC, 60 HZ 40 Watts Maximum During Alarm Condition
10-0123	115V	15 Amps	Double piggyback float switch (included)	
10-0124	208-230V		Control switch (included)	
10-0125	115V 208-230V	20 Amps	3 Control switches (included)	Alarm not Included
10-0333	115V 208-230V	25 Amps	Use a single 10-0034 or a double 10-0229 variable level float switch or 2 Control switches 10-0225 (not included)(1)	

(1) Alarm Float Switch not included, purchase separately. See FM0526

Zoeller Residential Septic Tank Effluent Filter Specifications

Application: Single family homes.

Filter Area: 122 Linear Feet of 1/16" filtration.

Flow Rate: 1000 gpd.

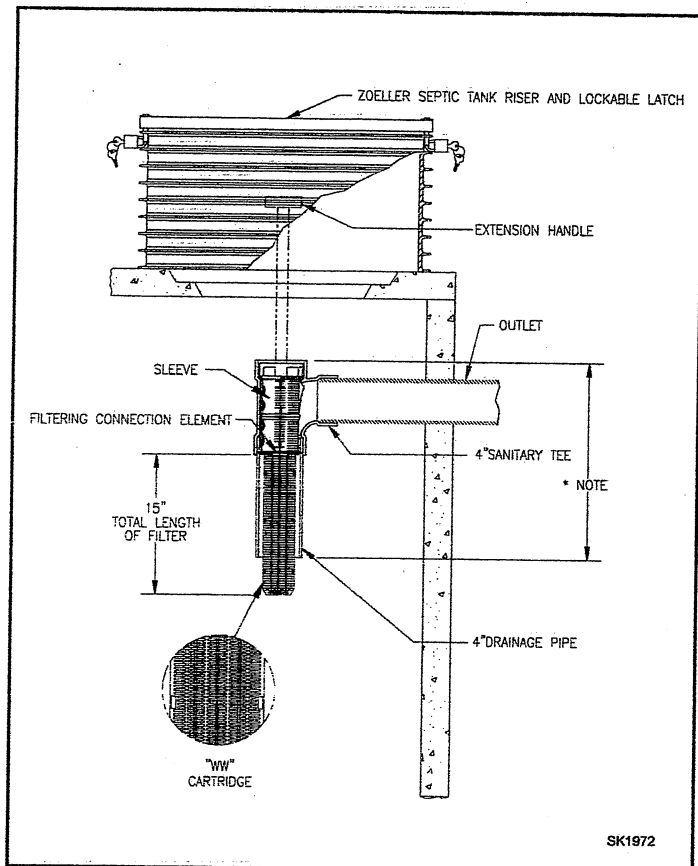
Material: All materials are noncorrosive in the septic tank environment.

Easy to install or retrofit: The Zoeller Septic System Filter fits inside any 4" sanitary tee. Slide the filter cartridge into the filter sleeve. Lock the cartridge and sleeve together by holding the sleeve stationary and rotating the cartridge clockwise. Slide the assembled cartridge and sleeve into the sanitary tee at the tank's outlet. Ensure the sleeve latch is pointing toward the outlet of the septic tank before filter placement into the tee. The drain field is now protected from solids greater than 1/16".

Easy to maintain: The filter cartridge can be maintained by rotating the cartridge counterclockwise and removing for cleaning. The sleeve should remain in the sanitary tee while cleaning the cartridge. To clean the cartridge, hold cartridge over septic tank opening and thoroughly rinse with hose until clean, washing filtered trash back into septic tank. After cleaning the cartridge, it is imperative that the sleeve be cleaned inside and out, by reinserting the cartridge; turning it clock wise in the sleeve and removing the sleeve from the sanitary tee. The Zoeller filter should be cleaned each time the septic tank is pumped or when the need is indicated by slow flows from the house. More frequent cleanings will not hurt the filter and could even improve the performance of your septic tank. For installations that exceed the design flow rate of the filter, more frequent cleanings may be required or manifold more than one sanitary tee to accept more than one filter.

Lifetime Warranty: Every Zoeller filter is guaranteed to be free from defects in materials and workmanship for the lifetime of the homeowner/purchaser. Free repair or replacement, excluding labor, will be made on return of the filter prepaid to the factory. This warranty is limited to product proven to be free from abuse or improper installation.

***NOTE:** State and local plumbing codes may require a specific liquid penetration. For example, 25% - 45% into the liquid depth or 9" off the tank bottom.



ALL ZOELLER ON-SITE WASTEWATER PRODUCTS MUST BE INSTALLED IN ACCORDANCE WITH LOCAL AND/OR STATE PLUMBING AND/OR HEALTH DEPARTMENT CODES.



<http://www.zoeller.com>

ZOELLER
PUMP CO.

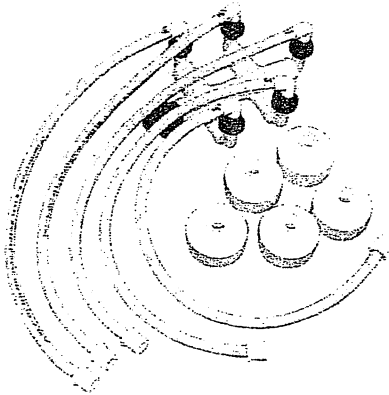
MAIL TO: P.O. BOX 16347
Louisville, KY 40256-0347
SHIP TO: 3649 Cane Run Road
Louisville, KY 40211-1961
(502) 778-2731 • 1 (800) 928-PUMP
FAX (502) 774-3624

Manufacturers of . .

"QUALITY PUMPS SINCE 1939"

TREATMENT SYSTEMS AND DRAINFIELD SUPPLIES

Hydrosplitters and Enclosures (HSA, HSRR)



Hydrosplitter

Hydrosplitters (HSA)

Hydrosplitters are used when dosing filtered effluent by pump or siphon to achieve precise distribution of flow to gravity drainfield laterals of varying lengths and/or elevations. Effluent is pumped or siphoned to the hydrosplitter and then flows by gravity to individual laterals. Manufactured with PVC components, each hydrosplitter is designed to meet the specific needs of a particular drainfield. Recommended minimum pressure at the hydrosplitter inlet is 2 ft.

Note: Order hydrosplitter access enclosures and fiberglass lids with optional insulation separately. Custom hydrosplitters available. Call for information.

NOMENCLATURE

Hydrosplitter

HSA 200-05-10

Discharge line diameter:
05 = 1/2"
10 = 1"

Number of outlet lines:

02 = 2
03 = 3
04 = 4
05 = 5
06 = 6
07 = 7
08 = 8
09 = 9
10 = 10

Manifold diameter:

100 = 1"
125 = 1-1/4"
150 = 1-1/2"
200 = 2"

Hydrosplitter assembly

Hydrosplitter enclosure

HSRR 24 18

Riser height: 12, 18, 24

Riser diameter: 24", 30"

Hydrosplitter access riser

HOW TO SELECT

- Step 1:** Determine the number of outlet lines and corresponding manifold diameters.
- Step 2:** Call Orenco Systems or your local Distributor for flow control disc orifice sizing. See *Flow Control Assemblies/Discs and Flowsplitter Basins (FCA, FCD)* on page 75 for ordering information.
- Step 3:** Use orifice sizes to determine discharge line size. 1/2-in. lines can use flow control orifices up to 0.6-in. diameter, and 1-in. lines can use flow control orifices up to 1.05-in. diameter.

Hydrosplitter Enclosures (HSRR)

Hydrosplitter enclosures are "mouse-holed" PVC access risers, which allow for easy installation of the transport and discharge lines. Insulated lids (ordered separately) are recommended. See *Lids (FL)* on page 4.

HOW TO SELECT

- Step 1:** Refer to Table 48, *Hydrosplitter Enclosure Guide*, to determine the enclosure diameter.
- Step 2:** Determine the height of the enclosure. The top of the enclosure should extend a minimum 1 in. above the grade level.

TABLE 48. HYDROSPPLITTER ENCLOSURE GUIDE

Model code	Manifold diameter	Number of outlets	Enclosure
HSA100	1 in.	2, 3, 4	HSRR24 __
HSA125	1-1/4 in.	5, 6	HSRR24 __
HSA150	1-1/2 in.	7, 8	HSRR30 __
HSA200	2 in.	9, 10	HSRR30 __

Total gallons to be pumped per minute	5.5	Total Length of Lateral lines (in feet)	222
Number of lines equal length	0	Length of an Individual line (unequal length line system)	38
gallons per minute flow per orifice	#DIV/0!	gallons per minute for this orifice (unequal length line system)	0.941
Distal Head Pressure at discharge point (min of 3 Ft.)	5	Individual Orifice size (unequal length lines)	0.184
Orifice size in inches	#DIV/0!		0.184
Drill size in inches	#DIV/0! / 32		6 / 32

total gallons to be pumped per minute	5.5	Total Length of Lateral lines (in feet)	222
Number of lines equal length	0	Length of an Individual line (unequal length line system)	47
gallons per minute flow per orifice	#DIV/0!	gallons per minute for this orifice (unequal length line system)	1.164
Distal Head Pressure at discharge point (min of 3 Ft.)	5	Individual Orifice size (unequal length lines)	0.204
Orifice size in inches	#DIV/0!		
Drill size in inches	#DIV/0! /32		7 /32

total gallons to be pumped per minute	5.5	Total Length of Lateral lines (in feet)	222
Number of lines equal length	0	Length of an Individual line (unequal length line system)	49
gallons per minute flow per orifice	#DIV/0!	gallons per minute for this orifice (unequal length line system)	1.213
Distal Head Pressure at discharge point (min of 3 Ft.)	5	Individual Orifice size (unequal length lines)	0.209
Orifice size in inches	#DIV/0!		
Drill size in inches	#DIV/0! /32		7 /32

total gallons to be pumped per minute	5.5	Total Length of Lateral lines (in feet)	222
Number of lines equal length	0	Length of an individual line (unequal length line system)	47
gallons per minute flow per orifice	#DIV/0!	gallons per minute for this orifice (unequal length line system)	1.164
Distal Head Pressure at discharge point (min of 3 Ft.)	5	Individual Orifice size (unequal length lines)	0.204
Orifice size in inches	#DIV/0!		
Drill size in inches	#DIV/0! /32		7 /32

total gallons to be pumped per minute	5.5	Total Length of Lateral lines (in feet)	222
Number of lines equal length	0	Length of an Individual line (unequal length line system)	46
gallons per minute flow per orifice	#DIV/0!	gallons per minute for this orifice (unequal length line system)	1.139
Distal Head Pressure at discharge point (min of 3 Ft.)	5	Individual Orifice size (unequal length lines)	0.202
Orifice size in inches	#DIV/0!		6 /32
Drill size in inches	#DIV/0!	3/2	

Andrews Environmental Services

PO Box 5784
Bella Vista, AR 72714

September 21, 2026

Please revalidate the individual sewage disposal system permit for RG Construction, Howard Dover, 479-841-7856, Parcel # 16-03608-000, Bedford 23/5, Bella Vista. Original permit was filed under Oliver Builders.

No changes to the proposed lateral field design or location have been made.

Sincerely,

Elizabeth Andrews D.R., R.S.
Andrews Environmental Services

Sarah Sanders (ADH)

From: Elizabeth Andrews <egandrews@yahoo.com>
Sent: Monday, September 21, 2026 8:54 AM
To: ADH EHS Benton County; HowardIdover@gmail.com
Subject: Revalidation - Parcel # 16-03608-000, Bedford 23/5
Attachments: 5.pdf

CAUTION: External Email

Please update the builder information for this property.

Thanks, Elizabeth



SCALE: 1"=20'

20 10 0 20

LOT 22
VACANT

PROPOSED WATER
METER LAYOUT

F.I.P.

F.I.P.

F.I.P.

F.I.P.

F.I.P.

F.I.P.

F.I.P.

F.I.P.

1322.07

1322.6

1322.77

1319.75

1316.30

1306.00

1296.00

1286.00

1276.00

1266.00

1256.00

1246.00

1236.00

1226.00

1216.00

1206.00

1196.00

1186.00

1176.00

1166.00

1156.00

1146.00

1136.00

1126.00

1116.00

1106.00

1096.00

1086.00

1076.00

1066.00

1056.00

1046.00

1036.00

1026.00

1016.00

1006.00

996.00

986.00

976.00

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