HTE 04-5-8967R

H₂ ETT COUNTY HEALTH DEPAR ENT

16833

OPERATIONS PERMIT

Name: (owner) William Wagne Denn	New Installation	
Property Location: SR# M& A. there Rd		Nitrification Line
Subdivision	Lot #	
Tax ID #		- 13
Contractor: Mike Ray	Registration #	
Basement with Plumbing: Garage:		
Water Supply:		
Distance From Well:ft.		
Following are the specifications for the sewage disposal system of	on above captioned pr	operty.
Type of system: Conventional Other		
Size of tank: Septic Tank: 000 gallons Pump T	Tank:gallons	
Subsurface No. of ditches 4 exact length of each ditch 100 ft.	width of ditchesft.	depth of ditches in.
French Drain Required:Linear feet		
Date:_	40-10-40	
Inspect	ed by:	MRS
PERMIT NO. 20415 Inspect		tal Health Specialist
12 Proper Special 180: 1	2	