OPERATIONS PERMIT 02-5-4155

New Installation Septic Tank Name: (owner) Property Location: ____ Repairs Nitrification Line Subdivision TOPI Lot #____ TAX ID#_____ Quadrant #____ Registration #_____ Contractor: _ Garage: DO not DRIVE OR Basement with Plumbing: Water Supply: D Well Public D Community PARK on Septic SYSTEM Distance From Well: 55 ft. Per Environmental Horath Following are the specifications for the sewage disposal system on above captioned property. Type of system: Conventional Other____ Septic Tank: _____ gallons Pump Tank: _____ gallons Size of tank: exact length width of depth of of each ditch ft. ditches ft. ditches in. Subsurface No. of Drainage Field ditches_ French Drain: _____ Linear feet Date: 4-15-22
Inspected by: 95 h vironmental Health Specialist

Gain