нте <u>03-5-8306</u>

H IETT COUNTY HEALTH DEPAR ENT

16369

OPERATIONS PERMIT

| Name: (owner) GARY Holt | New Installation Septic Tank |
|---|--|
| Property Location: SR# | Repairs Nitrification Line |
| Subdivision | • |
| Tax ID # | |
| Contractor: Wayne Spivey | Registration # |
| Basement with Plumbing: | |
| Water Supply: | |
| Distance From Well: 50 ft. | |
| Following are the specifications for the sewage disposal system | |
| Type of system: Conventional Other | |
| Size of tank: Septic Tank: LOGO gallons Pump | Tank:gallons |
| Subsurface No. of exact length of each ditch 400 ft. | width of ditches 3 ft. depth of ditches in. |
| French Drain Required:Linear feet | |
| Date:_ | 01-08-04 |
| PERMIT NO. 21154 Inspec | ted by: Jor WARS Environmental Health Specialist |
| Shop Cleums. to allo for Total | BARA 21 |