

HTE # 04-5-9287R

HARVARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

17988

OPERATIONS PERMIT

Name: (owner) McFadden, Gary & Karen New Installation Septic Tank Repair

Property Location: SR# Old Hwy 421 Nitrification Line Expansion

Subdivision MAMIE BELL RIDGE Lot # 48 Tax ID # _____ Quadrant # _____

Contractor: MIKE RAY Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 100 ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other QUICK 4 CHAMBER

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field	No. of ditches <u>1</u>	exact length of each ditch <u>170</u> ft.	width of ditches <u>3</u> ft.	depth of ditches <u>18</u> in.
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French Drain Required: _____ Linear feet

Date: 10/18/05

PERMIT NO. 20806

Inspected by: [Signature]

