HTE # 04-5-10199

ETT COUNTY HEALTH DEPAR ENT 17485

OPERATIONS PERMIT
Name: (owner) James Jackson New Installation Septic Tank Repair
Property Location: SR# 1943 Lasage H. Subdivision \(\subset \tau \). \(\mu \). \(\mu \) Lot \(\psi \) \(\mu \) Tax ID \(\psi \) Quadrant \(\psi \) Quadrant \(\psi \).
Contractor: Registration #
Basement with Plumbing: Garage:
Water Supply: Well Public Community Distance From Well: ft.
Following are the specifications for the sewage disposal system on above captioned property.
Type of system: Conventional Other INDOVATIVE CHAPTER
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 3 of each ditch 160 ft. ditches 5 ft. ditches 18 20 in.
French Drain Required: Linear feet Date: 4-19-05
PERMIT NO Linear feet Date: Linear feet Date: Linear feet Date: Date:
Tylerston & DRIVE