

HTE # 05-5-11765

HAR T COUNTY HEALTH DEPART NT
ENVIRONMENTAL HEALTH SECTION

17980

OPERATIONS PERMIT

Name: (owner) MIKE RAY New Installation Septic Tank Repair

Property Location: SR# 060 US421 Nitrification Line Expansion
Subdivision MAMIE BELLHOSE Lot # 25 Tax ID # _____ Quadrant # _____

Contractor: MIKE RAY Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community
Distance From Well: 50 ft.

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

Type of system: Conventional Other PUMP TO CHAMBER

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

Subsurface Drainage Field No. of ditches 4 exact length of each ditch 60 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: _____ Linear feet Date: 10/5/2005

PERMIT NO. 21989 Inspected by: [Signature]
DRAWING N13

