HTE# 05-50012336

RNETT COUNTY HEALTH DEP MENT ENVIRONMENTAL HEALTH SECTION

18084

OPERATIONS PERMIT

			0110				
Name: (owner)	lunul		_ & N	ew Installati	on 🛭 Septi	ic Tank Repair	
Property Location: SR# Lot # Tax ID			ID#				
Contractor: 1) (. CALLA				Registration #			
Basement with Plum	bing:	Garage:					
Water Supply: \(\simeg\) V Distance From Well:	Well Public	Commun ft.	ity				
Following are the sp	oecifications for	the sewage di	isposal sys	tem on abov	ve captioned	property.	
Type of system:	Conventional	Other_	Tim	Chipi			
Size of tank: Seption	Tank: /000	gallons	Pump Tan	k:	gallons		
Subsurface Drainage Field	No. of ditches	exact lengt of each dite	h ch <u>ZVV</u> ft.	width o	of	depth of ditches 102 1 in.	
French Drain Requir	ed:	Linear feet	Da	ite:	27.05	-	
PERMIT NO. 21	764			spected by: _	Jul	Mi	