IARNETT COUNTY HEALTH D. RTMENT ENVIRONMENTAL HEALTH ____TION

OPERATIONS PERMIT

Name: (owner) 2	any HUGHES	New Installation	Septic Tank
Property Location:	SR# 1443 CAFAYETHE IZD	Repairs	Nitrification Line
	Subdivision V. H. II	Lot # <u>/3Z</u>	-
	TAX ID#	Quadrant #	
Contractor: Lown	Johnson	Registration #	
Basement with Plumbing: Garage:			
Water Supply:	Well Public Commu	nity	
Distance From Well: ft.			
Following are the specifications for the sewage disposal system on above captioned property.			
Type of system:	Conventional Other _	25% Reduction System	
Size of tank:	Septic Tank: 1000 gallons	Pump Tank: ga	llons
	No. of exact length ditches 4 of each ditch 8		
Troicii Brain.		e: 3- 28-06	
PERMIT NO 2		pected by ames EMm	Health Specialist

