

HTE # 06-5-14019

HARL T COUNTY HEALTH DEPARTM T
ENVIRONMENTAL HEALTH SECTION

18368

OPERATIONS PERMIT

Name: (owner) CAVINESS LAND DEVELOPMENT New Installation Septic Tank Repair

Property Location: SR# 1120 BUEHILLS RD Nitrification Line Expansion

Subdivision STONECROSS Lot # 27 Tax ID # _____ Quadrant # _____

Contractor: D.C. CARTER 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 POLYSTYRENE AGGREGATE TRENCH

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

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 60 ft. width of ditches 3 ft. depth of ditches 18-36 in.

French Drain Required: _____ Linear feet Date: 6/8/06

PERMIT NO. 22806 Inspected by: _____

