HTE # 06.500/433>

HARNE COUNTY HEALTH DEPARTMENTAL HEALTH SECTION

18494

OPERATIONS PERMIT

Name: (owner) Weaser Oes. New Installation Septic Tank Repair
Property Location: SR# 11
Contractor: L. Sharpa 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: \(\subseteq Conventional \(\subseteq \) Other \(\subseteq \subseteq \subseteq \) Reduction \(\subseteq \subseteq \subseteq \subseteq \) \(\subseteq \
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of depth of ditches fr. width of ditches fr. depth of ditches fr.
French Drain Required: Linear feet Date: \(\frac{\frac{1}{2} \cdot 0}{2} \)
PERMIT NO. 12 60% Inspected by:
PERMIT NO. 22-60% Inspected by: 2-00% Inspected by: 2-00% Inspected by: 2-00% Inspected by: 2-00%