

HTE # 06-500-14470

H **NETT COUNTY HEALTH DEPARTMENT**
ENVIRONMENTAL HEALTH SECTION

18599

OPERATIONS PERMIT

Name: (owner) CAUNESS New Installation Septic Tank Repair

Property Location: SR# 1125 Nitrification Line Expansion
Subdivision WATSON Lot # 43 Tax ID # _____ Quadrant # _____

Contractor: D.C. CARTER 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.

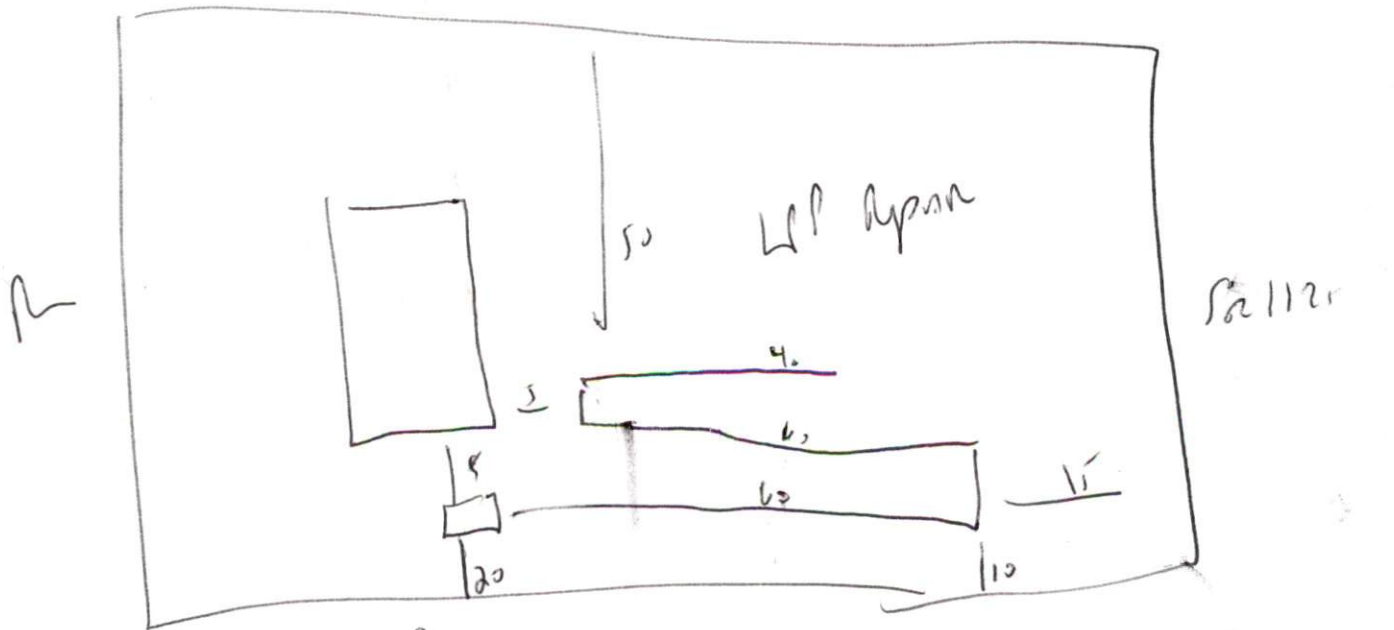
Type of system: Conventional Other 25% Reduction system 1.2 Flow

Size of tank: Septic Tank: 900 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 150 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet 1.2 Flow Date: 10-19-06

PERMIT NO. 22918 Inspected by: J. Carter



53-900
517-872
5-07-06