HAR IT COUNTY HEALTH DEPART! IT 18646

HTE # 06.500-14863 ENVIRONMENTAL HEALTH SECTION

## **OPERATIONS PERMIT**

Name: (owner) HoH Csnst. New Installation Septic Tank Repair
Property Location: SR# //2)
Contractor: O. 17n·chlad 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% Rel. SYSTEM C.2 Fbc
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length /53 width of depth of ditches / of each ditch ft. ditches ft. ditches ft. ditches / d
French Drain Required: Linear feet $4\varepsilon \cdot 2F/2 - 9 \cdot 27 - 2C$
PERMIT NO. 23058  Inspected by:
Dave 20 20 20 20 20 20 20 20 20 20 20 20 20