HTE # 05-500 13245 RNETT COUNTY HEALTH DEI FMENT ENVIRONMENTAL HEALTH SECTION

17917

O5-503 13174 PA OPERATIONS PERMIT

Name: (owner)	icheal	Lawton	New	Installation	☐ Septio	Tank 🗆 R	Repair
Property Location: SR# 114 (Subdivision Hybba For Lot # 79 Tax ID #				☐ Nitrification Line ☐ Expansion Quadrant #			
Contractor: Self				Registration #			
Basement with Plumb	oing:	Garage:					
Water Supply: Wa			ity				
Following are the sp Type of system:		_	-		aptioned	property.	
Size of tank: Septic	Tank:	gallons	Pump Tank:		gallons		
Subsurface Drainage Field							
French Drain Require		_ Linear feet	Date:	0 - 18	3-05	MY	
ZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZ				7	7		

Pool Moved To correct Ares