

OPERATIONS PERMIT

01-5-2113

Name: (owner) Bob West New Installation Septic Tank
 Property Location: SR# 1125 Repairs Nitrification Line
 Subdivision Carb Hills Lot # 7
 TAX ID# _____ Quadrant # _____
 Contractor: O. Strickland Registration # _____

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 50 ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other _____
 Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface Drainage Field No. of 1 exact length 300 width of 3 depth of 18
 ditches _____ of each ditch 300 ft. ditches 3 ft. ditches 18 in.
 French Drain: _____ Linear feet

Date: 5-1-02
 Inspected by: Joe Waters
 Environmental Health Specialist

PERMIT NO. 18382

