H. ETT COUNTY HEALTH DEPAR' ENT __.VIRONMENTAL HEALTH SECT____

Nº13610

OPERATIONS PERMIT

Name: (owner)	Boyd Byrd	New Installation	Septic Tank
Property Location:	SR#	□ Repairs	Nitrification Line
	Subdivision Myrthewad	Lot #27	
	TAX ID#	Quadrant #	
Contractor:	-ald Temple	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 Polyst	, reve Agragate Trench	JALLIWNS 95-3R
Size of tank:	Septic Tank: /య gallons Pr	ımp Tank: gal	llons
Subsurface Drainage Field	No. of exact length of each ditch 150 f	width of det. ditchesft. di	epth of itches <u>24</u> in.
French Drain:	Linear feet	1/	
PERMIT NO. 18	Date: Inspected	by: Say Minim	f.S.
Environmental Health Specialist			

