H NETT COUNTY HEALTH DEPAREMENT ENVIRONMENTAL HEALTH SECTION

Nº 15354

OPERATIONS PERMIT

Name: (owner) Property Location:	SR#COA. SubdivisionCOA.	Repairs	tion Septic Tank Nitrification Lin
Contractor:	TAX ID#	Quadrant # Registration #	
Basement with Plum	bing: Garage: [
Water Supply:	Well Public Community	y	
Distance From Well:			
	Conventional Dother gallons		
Subsurface	No. of ditches exact length of each ditch	width of 2	depth of is al
Drainage Field		ft. ditches	ft. ditches 10 dq in.
PERMIT NO.	Date: Inspect	ed by: Gal	ntal Health Specialist
	In		

