нте 03-5-6553

H. IETT COUNTY HEALTH DEPAR

ENT

16174

OPERATIONS PERMIT

| Name: (owner) Short Canad New Installation Septic Tank |
|---|
| Property Location: SR# |
| Subdivision Cresture Lot # 1 |
| Tax ID # Quadrant # |
| Contractor: Dackbee Registration # |
| Basement with Plumbing: Garage: |
| Water Supply: |
| Distance From Well:ft. |
| Following are the specifications for the sewage disposal system on above captioned property. |
| Type of system: Conventional Other Size of tank: Septic Tank:gallons Pump Tank:gallons |
| Size of tank: Septic Tank:gallons Pump Tank:gallons |
| Subsurface No. of ditches width of exact length of each ditch of each ditches ft. width of ditches ft. depth of ditches ft. |
| French Drain Required:Linear feet |
| PERMIT NO. 19288 Inspected by: Environmental Health Specialist |
| Mon 21 20 30 Band |