нте *03-5-679*9

## H. ETT COUNTY HEALTH DEPAR ENT ENT ENT ENT ENT

16956

## **OPERATIONS PERMIT**

Name: (owner) Haws ON Fukapuses	
Name: (owner) Haws ON Fukapuses  Property Location: SR# 1412 Christia Light	
Subdivision LAKEUSEN	Lot # <b>5</b>
Tax ID #	Quadrant #
Contractor: Jay Adeack	Registration #
Basement with Plumbing:	
Water Supply:	
Distance From Well:ft.	
Following are the specifications for the sewage disposal syste	em on above captioned property.
Type of system:	
Size of tank: Septic Tank: 1000 gallons Pur	mp Tank:gallons
Subsurface No. of exact length Drainage Field ditches 3 of each ditch 100 ft.	
French Drain Required:Linear feet	
Da	te: 4-2-04
	pected by: James & Marchant one
PERMIT NO. 19985 POND	Environmental Health Specialist