HTE 03-5 8036

HARN EN COUNTY HEALTH DEPARTMI ONMENTAL HEALTH SECTION

17014

OPERATIONS PERMIT

| Name: (owner) DAMY Normi) | New Installation Septic Tank |
|--|---------------------------------|
| Property Location: SR# | Repairs Nitrification Line |
| Subdivision_ CRESTURA | Lot # 97 |
| Tax ID # | Quadrant # |
| Contractor: Tel Basun | Registration # |
| Basement with Plumbing: Garage: | |
| Water Supply: | |
| Distance From Well:ft. | |
| Following are the specifications for the sewage disposal systematical systems of the sewage disposal systems of the sewage disposal systems. | em on above captioned property. |
| Type of system: Conventional Other | Tru Chip |
| Size of tank: Septic Tank: gallons Pu | mp Tank:gallons |
| Subsurface No. of exact length of each ditch ft. | width of depth of 3 in. |
| French Drain Required:Linear feet | |
| Da | nte: 02-05-07 |
| Inc | spected by: |
| PERMIT NO. 20354 | Environmental Health Specialist |
| | |
| Marc 3. Br. July | 12' |
| 12 12 | J |