нте 03-5-8490

HAI TT COUNTY HEALTH DEPARTI VI

16616

OPERATIONS PERMIT

Property Location: S	R#		✓ New Installation □ Repairs Lot # C	Nitrification Line
Contractor:	ax ID#		Quadrant # Registration #	
	ing:			
Water Supply:	Vell Public	☐ Community		
Distance From Well:_	1			
Following are the spe	ecifications for the sev	wage disposal syste	m on above captioned	property.
Type of system:	☐ Conventional	Other_	2c Chipr	
			np Tank:gallon	S
			width of ditches 3 ft.	
French Drain Required	d:Li	near feet		
		Date	e: 10-01-04	4
PERMIT NO.	21057		pected by:	
DRIV	3 B R 58 x 3 4	P 12 7 5:	WP Tis	10 TO 1117