

HTE 03-5-8496

17110

OPERATIONS PERMIT

Name: (owner) Caviness New Installation Septic Tank
 Property Location: SR# 1117 Repairs Nitrification Line
 Subdivision Woodshire Lot # 21
 Tax ID # _____ Quadrant # _____
 Contractor: D. C. Carter Registration # _____

Basement with Plumbing: Garage: Lines OK Tanks OK
 Water Supply: Well Public Community 10-12-04 GHL
 Distance From Well: _____ ft. Needs Alarm Pump & Alarm Box checked

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other Pump to Tricheck
 Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
 Subsurface Drainage Field No. of ditches 1 exact length of each ditch 200 ft. width of ditches 3 ft. depth of ditches 18.24 in.
 French Drain Required: _____ Linear feet

Date: 12-16-04
 Inspected by: Jim White
 Environmental Health Specialist

PERMIT NO. 21059

