

HTE 04-5-9098

HAR IT COUNTY HEALTH DEPARTM T
ENVIRONMENTAL HEALTH SECTION

16761

OPERATIONS PERMIT

Name: (owner) Caviness New Installation Septic Tank
 Property Location: SR# Nursery Rd Repairs Nitrification Line
 Subdivision Woodbine Lot # 32
 Tax ID # _____ Quadrant # _____
 Contractor: D.C. Crater Registration # _____

Basement with Plumbing: Garage: Lines ok Tanks ok
 Water Supply: Well Public Community Need Pump & Alarm check
 Distance From Well: _____ ft.

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

Type of system: Conventional Other Pump to Tire Chp
 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: 02-014-05
 Inspected by: [Signature]
 Environmental Health Specialist

PERMIT NO. 20429

