

HTE # 045-9225

NETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

17586

OPERATIONS PERMIT

Name: (owner) Cainness New Installation Septic Tank Repair

Property Location: SR# 1141 Nitrification Line Expansion
Subdivision The Summit Lot # 66 Tax ID # _____ Quadrant # _____

Contractor: D.C. CARTER Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community
Distance From Well: _____ ft.

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

Type of system: Conventional Other 25% Reduction System *In Ather Quick 4 Chamber*

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ 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 *9 chamber* Date: 4-15-05

PERMIT NO. 20452 Inspected by: Ju Lopez

CASTLE ROCK

MCP-1000
57B-814
12-22-04

