HA TT COUNTY HEALTH DEPART NT
IRONMENTAL HEALTH SECTI

№ 13896

OPERATIONS PERMIT

Name: (owner) Philip Johnson ☐ New Installation ☐ Septic Tank

Property Location: SR# Piney Grove Rd. ☑ Repairs ☑ Nitrification Line

Subdivision _____ Lot # _____

TAX ID# _____ Quadrant # _____

Contractor: _____ Registration # _____

Basement with Plumbing: ☐ Garage: ☐

Water Supply: ☐ Well ☑ Public ☐ Community

Distance From Well: 50 ft.

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

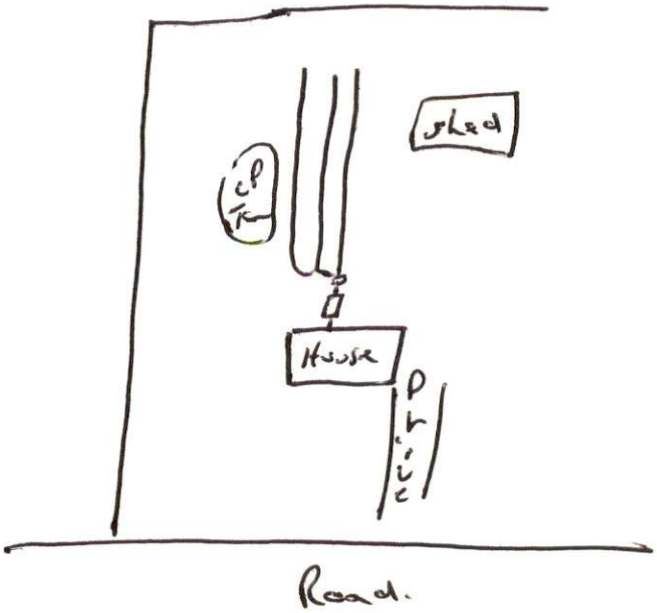
Type of system: ☑ Conventional ☐ Other _____

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain: _____ Linear feet

Date: 8/8/2000

PERMIT NO. 175R

Inspected by: [illegible] R.S.
Environmental Health Specialist