

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Greg Fawcote New Installation Septic Tank
 Property Location: SR# 2045 Repairs Nitrification Line
 Subdivision Tradewinds Lot # 32
 TAX ID# _____ Quadrant # _____
 Contractor: Otis Strickland Registration # _____

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 100 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 40 ft. width of ditches 3 ft. depth of ditches 24-30 in.
 French Drain: _____ Linear feet

PERMIT NO. 10225

Date: 9-7-95

Inspected by: Thomas J. Boyle RS

Environmental Health Specialist

