

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Katie Bailey New Installation Septic Tank
 Property Location: SR# 2034 Repairs Nitrification Line
 Subdivision _____ Lot # _____
 TAX ID# _____ Quadrant # _____
 Contractor: O. Strickland 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 _____
 Size of tank: Septic Tank: 1250 gallons Pump Tank: _____ gallons
 Subsurface Drainage Field No. of ditches 4 exact length of each ditch 125 ft. width of ditches 3 ft. depth of ditches 20 in.
 French Drain: _____ Linear feet

PERMIT NO. 6956

Date: 11-21-95

Inspected by: Joe Waters

Environmental Health Specialist

