## ARNETT COUNTY HEALTH DEPARTMENT

**Certificate of Completion** 

No

4221

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11	$\Lambda\Lambda$ $\Lambda$			1.			
Owner Marve	y Illowas	ul	Address_	Hogier			-
		FILLED IN)		1.	(MAILING ADDRESS)		
Contractor e	my tlasa	M Da	Address_	Angrei	(MAILING ADDRESS)		_
Location of Pren	nises Benton	Place Lot	#12				
		SUBDIVISION, STREET o	R ROAD NAME OR I	NUMBER, LOT NO.)	) 2		
	5 R	1504					
		Details of	Septic Tank S	ystem			
Kind of Material for Tank:	Concrete	□ Other_	and the second s				-
Size of Tank:	Capacity _/6 c						
Subsurface N Drainage Field D	fo. of Sitches	Exact Length of each Ditch	Width Ft. Ditche	of 3	Depth ofFt. Ditches	20 Inch	es
Square Feet in Ab	sorption Field	00		400	Surface Dra Required _	inage Lines	
			Inspected	by Nickole	es Dunce	J	_
Permit No	4145		Date	9 Sept 8	(SANITARIAN)		
Termit No.	((						

Day