

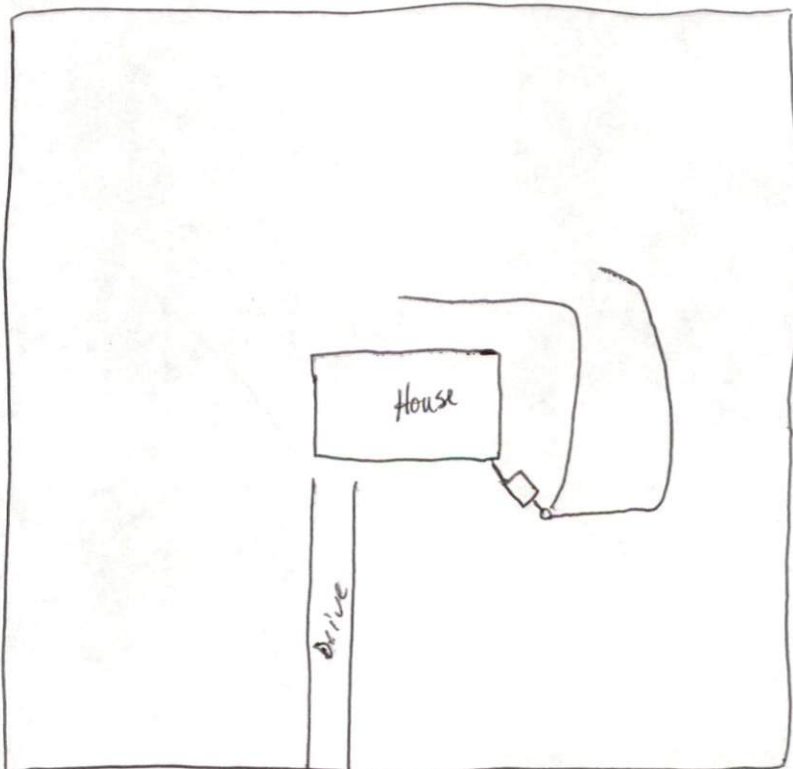
CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Kenny Winters New Installation Septic Tank
Property Location: SR# 1793 Repairs Nitrification Line
Subdivision _____ Lot # _____
TAX ID# _____ Quadrant # _____
Contractor: B+B Plumbing 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 2 exact length of each ditch 150 ft. width of ditches 3 ft. depth of ditches 24-28 in.
French Drain: _____ Linear feet

PERMIT NO. 8512 Date: 5-20-94
Inspected by: Thomas J. Boyle
Environmental Health Specialist



SR 1793