

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Sherrill Champion New Installation Septic Tank
 Property Location: SR# Hwy 29 Repairs Nitrification Line
 Subdivision _____ Lot # _____
 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 _____ exact length of each ditch _____ ft. width of ditches _____ ft. depth of ditches _____ in.
 French Drain: _____ Linear feet

PERMIT NO. 10145

Date: 8/3/95
 Inspected by: Chris Baker, R.S.

Environmental Health Specialist

Hwy 29
*well

