

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) STUART STOVALL New Installation Septic Tank
 Property Location: SR# 1509 Repairs Nitrification Line
 Subdivision _____ Lot # A
 TAX ID# _____ Quadrant # _____
 Contractor: Clint Adams Registration # _____

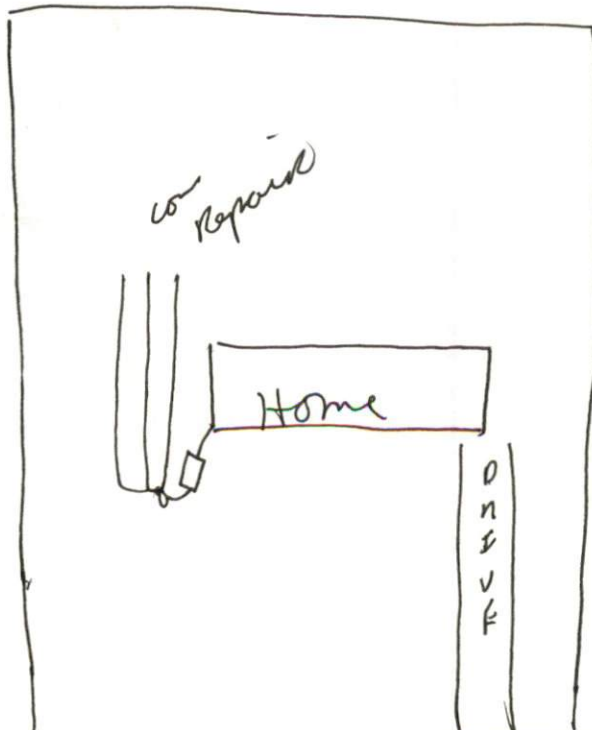
Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 50^{ft} ft.

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 115 ft. width of ditches 3 ft. depth of ditches 18-24 in.
 French Drain: - Linear feet

PERMIT NO. 10923

Date: 8-4-85
 Inspected by: James E. Markham
 Environmental Health Specialist



SR 1509