

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Charles R. Matthews New Installation Septic Tank
 Property Location: SR# 421N Repairs Nitrification Line
 Subdivision The Home Place Lot # 5
 TAX ID# _____ Quadrant # _____
 Contractor: HAI Brown Registration # _____

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 50' min ft.

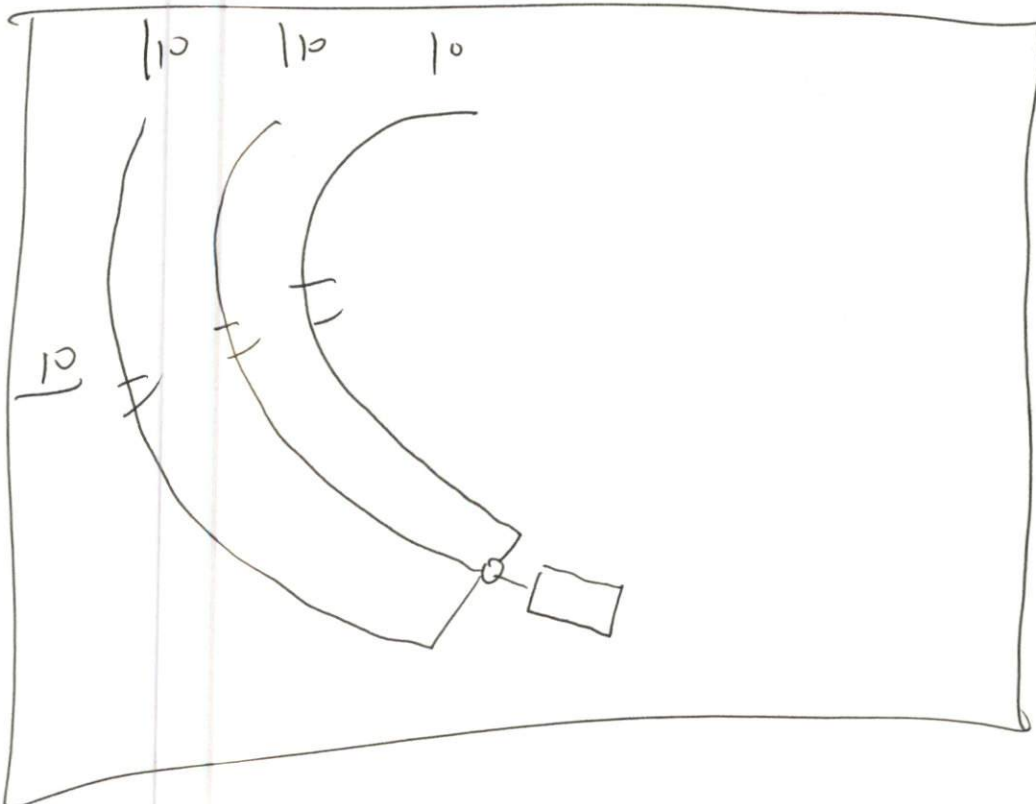
Following are the specifications for the sewage disposal system on above captioned property.

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 80 ft. width of ditches 3 ft. depth of ditches 18" or 24" in.
 French Drain: _____ Linear feet

Date: 10-2-96
 Inspected by: Joe W. [Signature]

PERMIT NO. 10653

Environmental Health Specialist



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