

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Yoshko Blythe New Installation Septic Tank
 Property Location: SR# Roberts Rd Repairs Nitrification Line
 Subdivision _____ Lot # _____
 TAX ID# _____ Quadrant # _____
 Contractor: W. Sharpe 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.

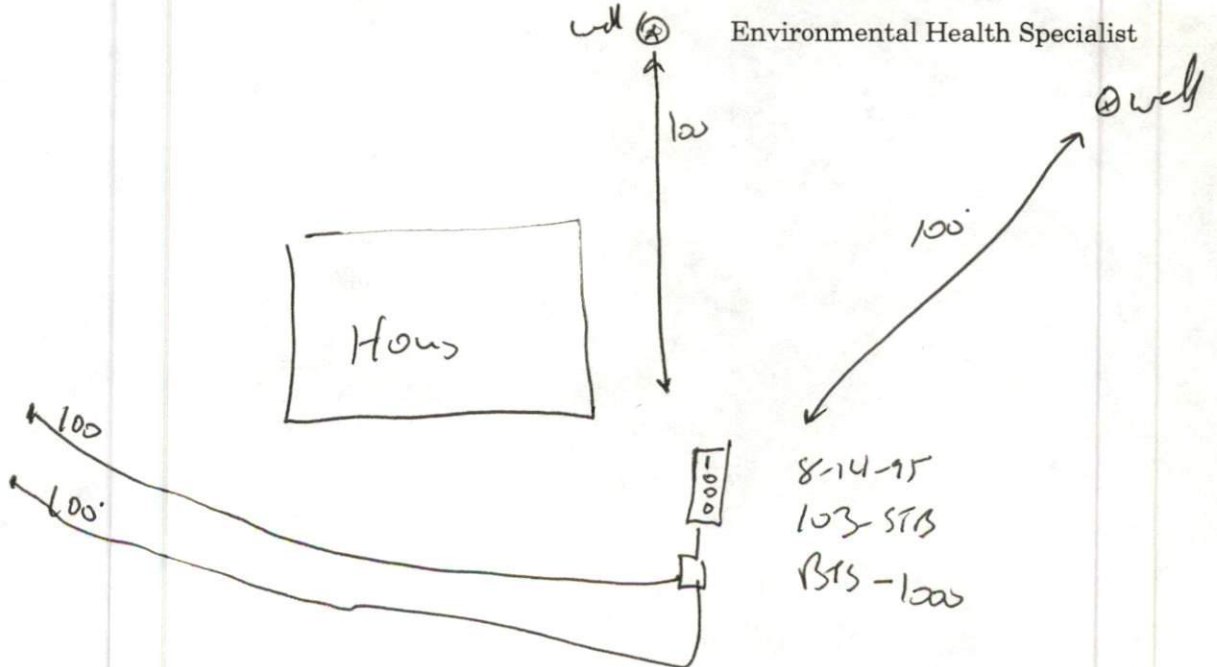
Type of system: Conventional Other _____
 Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-24 in.
 French Drain: _____ Linear feet

Date: 9-20-95

PERMIT NO. _____

Inspected by: J. W. [Signature]

well Environmental Health Specialist



8-14-95
 103 STB
 BTB-1200