

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Leonard + Debra Evans ☒ New Installation ☒ Septic Tank
Property Location: SR# 1217 ☐ Repairs ☒ Nitrification Line
Subdivision _____ Lot # _____
TAX ID# _____ Quadrant # _____
Contractor: _____ 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 No. of 4 exact length 50 width of 3 depth of 24 in.
Drainage Field ditches of each ditch ft. ditches ft. ditches in.
French Drain: _____ Linear feet

PERMIT NO. 11198

Date: 6/24/96
Inspected by: Peter A. Bahr

Environmental Health Specialist

No farming, plowing, etc.
will be allowed
over system + repair
area.

