

OPERATIONS PERMIT

Name: (owner) Clyde Faircloth ☒ New Installation ☒ Septic Tank
Property Location: SR# 421 ☐ Repairs ☒ Nitrification Line
Subdivision _____ Lot # _____
TAX ID# _____ Quadrant # _____
Contractor: Johany Faircloth Registration # _____
Basement with Plumbing: ☐ Garage: ☐
Water Supply: ☐ Well ☒ Public ☐ Community
Distance From Well: _____ 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 _____ exact length _____ width of _____ depth of _____
Drainage Field ditches 1 of each ditch 100 ft. ditches 3 ft. ditches 30 in.
French Drain: _____ Linear feet

PERMIT NO. 15471 Date: 12-28-99
Inspected by: Thomas J. Boyer R.S.
Environmental Health Specialist

