

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Silas Faulkner ☒ New Installation ☒ Septic Tank
Property Location: SR# 1521 ☐ Repairs ☒ Nitrification Line
Subdivision _____ Lot # 4
TAX ID# _____ Quadrant # _____
Contractor: Ted Brown Registration # _____

Basement with Plumbing: ☐ Garage: ☐
Water Supply: ☒ Well ☐ Public ☐ Community
Distance From Well: 50+ 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 18-20 in.
French Drain: _____ Linear feet

PERMIT NO. 09409

Date: 10-9-95

Inspected by: Thomas J. Boyce R.S.

Environmental Health Specialist

