

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Steven Lynch ☒ New Installation ☒ Septic Tank
Property Location: SR# 421 ☐ Repairs ☒ Nitrification Line
Subdivision _____ Lot # _____
TAX ID# _____ Quadrant # _____
Contractor: Mike Ray Registration # 64
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.

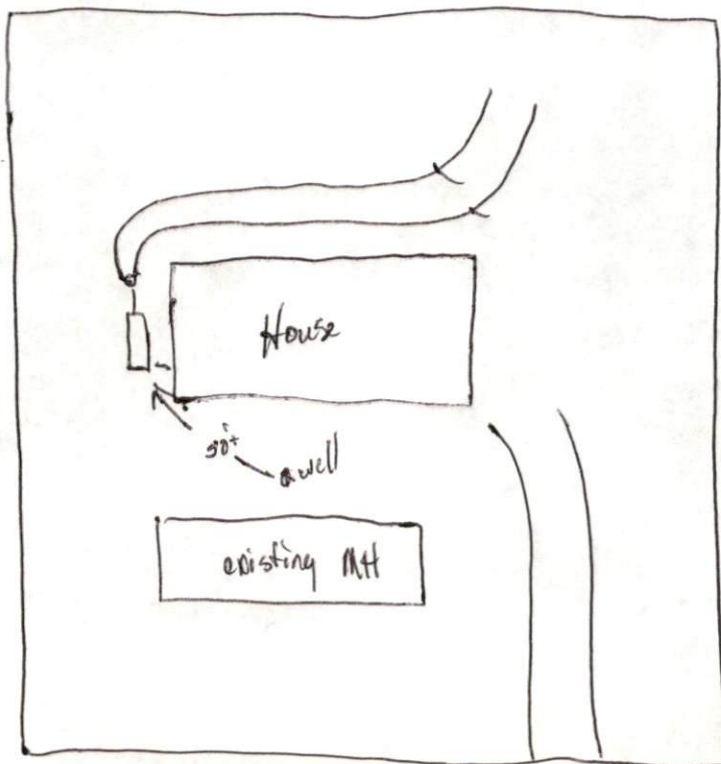
Type of system: ☒ Conventional ☐ Other _____
Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 2 of each ditch 120 ft. ditches 3 ft. ditches 24-30 in.
French Drain: _____ Linear feet

PERMIT NO. 9042

Date: 7-19-94

Inspected by: Thomas J. Boyce

Environmental Health Specialist



→ 421