OPERATIONS PERMIT

Name: (owner)	JASON WO	omble	New Installation Septic Tank
Property Location:	SR# 1219		Repairs Nitrification Lin
	Subdivision Les),	MCH	Lot #
J. 100	TAX ID#		Quadrant #
Contractor:	Knight		Registration #
Basement with Plum	nbing:	Garage:	Lines, TANK & Pump ok
Water Supply:	Well Public	Community	Needs To Check Alarm, Alarm Dox I cover
Distance From Well	:ft.		5-8-01 OHW
Following are the s	pecifications for the se	wage disposal sys	tem on above captioned property.
Type of system:	Conventional	Other I	p to Shallow Conventional
			imp Tank: Doo gallons
Subsurface Drainage Field	No. of exact ditches of each	t length	width of 3 depth of 2" (LAX) ditches
	Linear feet	L	
10.		Date:	by: Frygonmental Health Specialist
PERMIT NO. 13	112	Inspected	by: Environmental Health Specialist
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		CR 1219	