OO -40000093 PART NT Nº14095

TRONMENTAL HEALTH SECTION

OPERATIONS PERMIT

Name: (owner) Repairs Subdivision FALM O Five Bods Lot # 36 TAX ID# Quadrant #
Contractor: Ted Brash Registration #
Basement with Plumbing: Garage:
Water Supply:
Distance From Well:ft.
Following are the specifications for the sewage disposal system on above captioned property.
Type of system: Other Other
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of ditches exact length width of depth of ditches ft. ditches ft. ditches in.
French Drain: Linear feet
PERMIT NO. 13731 Inspected by: 2r Uff Environmental Health Specialist