

03-5-7241R

H **NETT COUNTY HEALTH DEPAR** ENT
ENVIRONMENTAL HEALTH SECTION

No 16117

OPERATIONS PERMIT

Name: (owner) CHRIS TACIA New Installation Septic Tank
 Property Location: SR# 2035 STOCKYARD RO Repairs Nitrification Line
 Subdivision STOCKYARD RO EST II Lot # 14
 TAX ID# _____ Quadrant # _____
 Contractor: MIKE RAY Registration # _____

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 100 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 200 ft. width of ditches 3 ft. depth of ditches 24-30 in.

French Drain: _____ Linear feet

Date: 7/9/03

PERMIT NO. 20089

Inspected by: [Signature] Environmental Health Specialist

