

Franklin County Health Department

Name: CRAIN

Permit Number

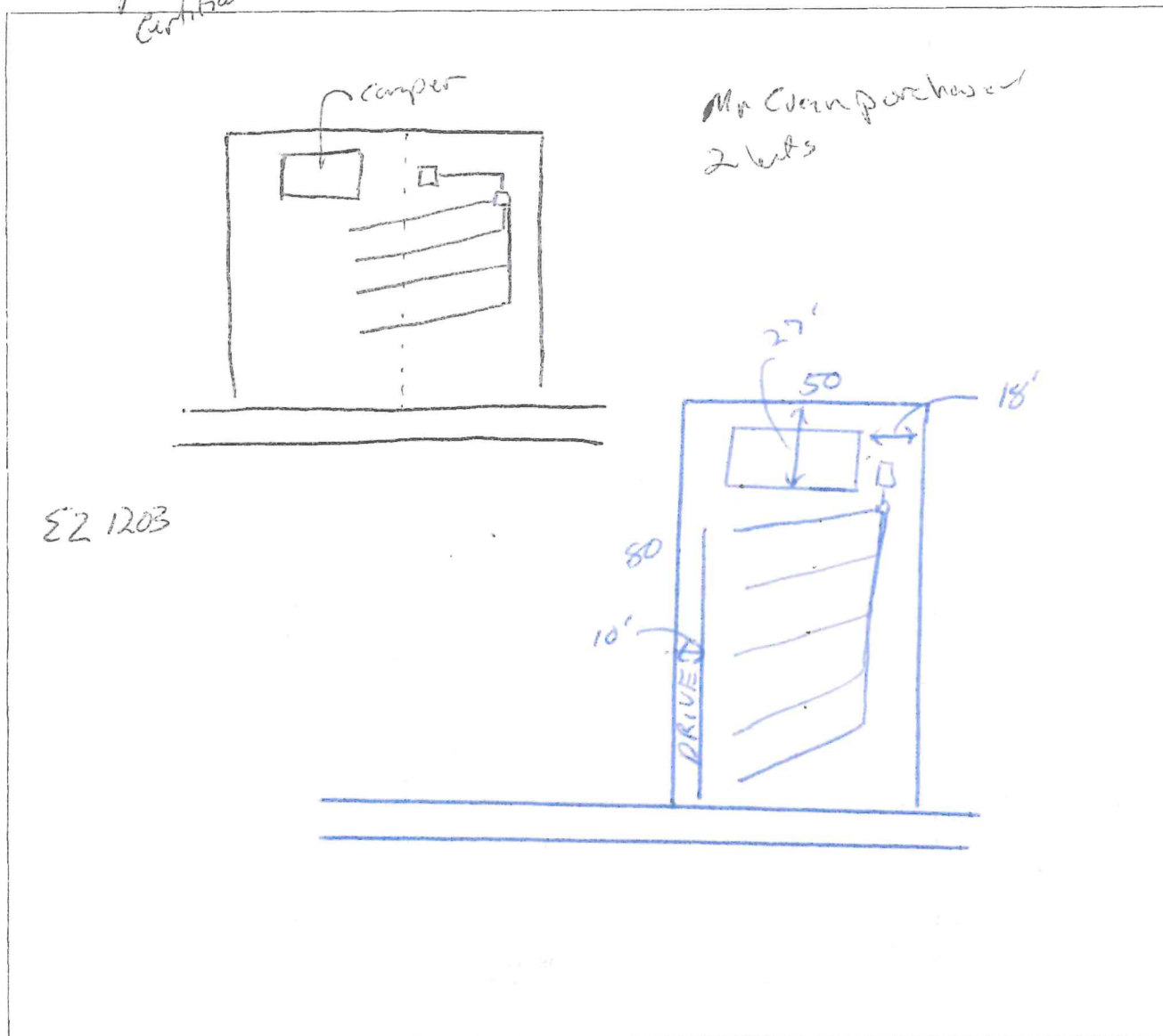
1867

CONTRACTOR *Charles Dye* ^{*logged*} TANK MANU *DPB 1000* MANU DATE *11/18/05*

WELL INSTALLED YES _____ NO _____ SYSTEM CODE _____

*Need by EZ flow
Certification before 08*

SEPTIC SYSTEM LAYOUT (SKETCH SYSTEM LAYOUT HERE)



SEPTIC SYSTEM AS-BUILT

(IF DIFFERENT FROM INITIAL LAYOUT)

ON REVERSE

OPERATIONS PERMIT

DATE

3/26/06

EHS

[Signature]