

SEWAGE DISPOSAL PERMIT

Tract #2

Rec.# 001546

Sewage Disposal Permit# 13SP 26-15

Date: 15 Sept 15

Township Location: OHIO

Permit # 13SP 26-15		
Existing System	New System	
City Water	Cistern	Well
Subdivision	Lot	
Basement	yes <input checked="" type="checkbox"/> no	

1/2 Sec. 35 T. 4 N R. 1 W

Crawford County Health Department
 306 Oak Hill Circle
 English, IN. 47118
 Phone (812) 338-2302 Fax: (812) 338-2301

Directions to property _____

Owner's name
Roger Walker

Installer's name

Owner' mailing address
14124 Alta Freedom Rd
Leavenworth IN 47137

Installer's address

Telephone 812-734-5238

Telephone _____

Cell Phone _____

Cell Phone _____

No. of bedrooms 3 No. of bathrooms 1 Fee Paid 405 Date 15 Sept 15

Soil Type slt/sd/c Bedrock 115" Water Table 10

Recommendations: ALL CONSTRUCTION TO COMPLY WITH ISDH RULE 410 IAC 6-8.1

Septic tank capacity 1000 Trench depth 15" Trench width 36"

Total length of tile line 500/375 Subsurface Drainage None

Application for permit APPROVED NOT APPROVED _____

Permit issued by Environmental Health Specialist [Signature]

Final Inspection [Signature] Date 16 Oct 2015
Environmental Health Specialist

This permit in no way guarantees the operation of this private sewage disposal system. It only affirms that the system was installed to prescribed standards. This septic permit is VOID after one (1) year. Permit is NON-TRANSFERABLE. Any changes to system design or location will VOID this permit.