

Operation's Permit

Certificate Of Completion

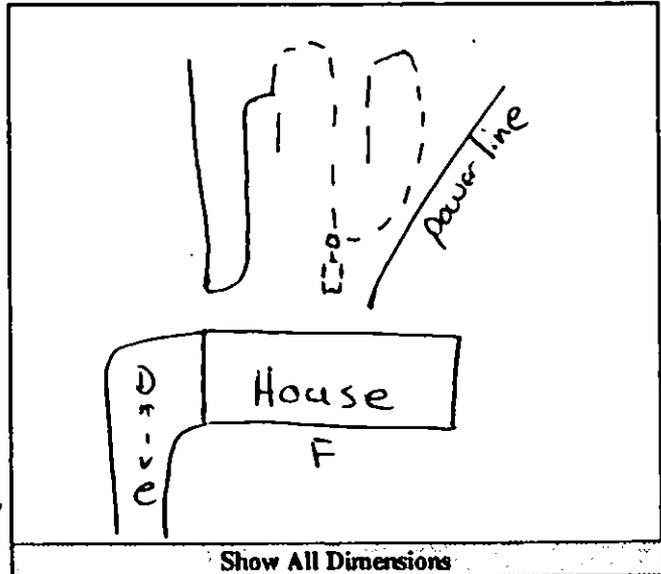
Forsyth County Health Department
Division Of Environmental Health And Laboratory
Post Office Box 686
Winston Salem, North Carolina 27102 0585
(910) 727 2760

PIN# _____ Code E-9-97 Permit# 11542
APP# _____ BLK # _____ Lot# _____
System Classification Type 3
HOLD _____ Approval Date 6-03-97

Owner Ruth Campbell
Address 7270 Franklin Rd
E.H. Specialist Mathes

Use Of Structure: SFD
No. of Bedrooms: _____ Basement: Yes _____ No _____
Water Supply: Well _____ Public Comm. _____
Subdivision Name: _____
Business Information: No. of Employees _____ No. of Seats _____
Total Square Footage: _____
Septic Tank System Design: Septic Tank Size: _____ Gals.
Tank ID # _____
Installer Spunkle
New Installation _____ Repair
Drain field Design: LTAR _____

Total Trench Length 100 Feet (see drawing)
Depth of Stone/Sand _____ Inches EZ Lay
Trench: Depth _____ Inches, Width _____ Feet



Location/Remarks: 90 Franklin Rd from
Deborah's Home, house
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