LINCOLN COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
WASTEWATER TREATMENT AND DISPOSAL SYSTEM PERMIT

Issue Date: 06/06/2011 Expiration Date: 06/07/2012

Property Owner: Fred & Bernice Hane c/o:

Address: [redacted]

Telephone: (Home) [redacted] (Work)

Installer: Bruce Todd License No. 54

____ New Installation __XX__ Existing System

_____ Repair __XX__ Replacement_____ Extension _____ Other

Describe:

Parcel Description:

Legal: S17 T34 R25 Parcel A of CS #2950

Address or Location: 470 Ant Flat Road

Approved Design Criteria:

Bedrooms: 2 Septic Tank Size: 1000 gallons Drainfield Size: 300 Linear Feet

SYSTEM MUST INCLUDE INSTALLATION OF EFFLUENT FILTER AT SEPTIC TANK OUTLET !!

Special Instructions: INSTALL SYSTEM ACCORDING TO LAYOUT, DEQ-4 AND LINCOLN COUNTY WASTEWATER REGULATION #3. ANY DEVIATIONS FROM APPROVED PLAN MUST BE AUTHORIZED BY THE DEPARTMENT.

Issued By: *Kendra J. Lind, R.S.*

Closure Statement:

I, _____, have inspected this system and found it to be in compliance with the conditions of the permit, and the Lincoln County Wastewater Treatment and Disposal Regulation.

Signed: _____ *Date:* _____

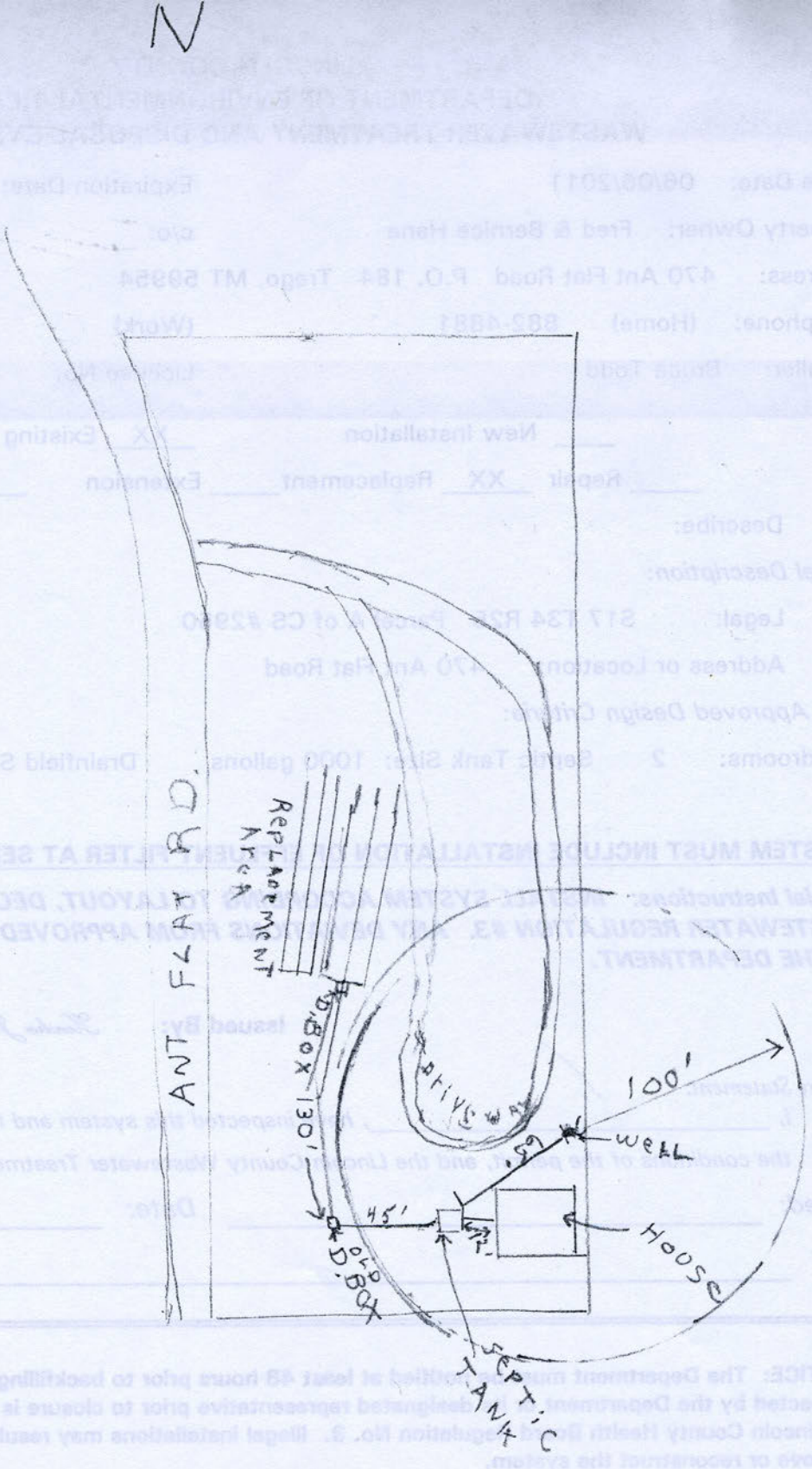
Title: _____

NOTICE: The Department must be notified at least 48 hours prior to backfilling the system. Any system not inspected by the Department or its designated representative prior to closure is an illegal installation in violation of Lincoln County Health Board Regulation No. 3. Illegal installations may result in fines and/or requirements to remove or reconstruct the system.

406-283-2442

DISCLAIMER

This permit is not a guarantee by the Department that the system will function properly for a prescribed period of time.


N
ANT FLAT RD.
Replacement Area
Box
130'
DRIVE WAY
100'
WELL
45'
HOUSE
SEPTIC TANK