

## UNION COUNTY PARCEL # 005 001 INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT APPLICATION AND INSPECTION REPORT

PERMIT # 5730 DATE PERMIT ISSUED	5-21-92 DATE SYSTEM INSP 6-22-92
RECEIPT # 3330 1096 Jonica	Gan Rand PROPERTY OWNER & ADDRESS
19/129 N, lift at Patieties, rig	for Kogers
Lowing Rd, right at zeon C	hurch, TELEPHONE 314-5782
Loving Rd, right at zion l' 2 miles on right before fence around house	SEWAGE CONTRACTOR Ceald Beau
I hereby apply for a permit to install or constructionstalled to conform to the requirements of the formed I understand that final inspection is required and completion and before applying final cover.	t an individual sewage disposal system and agree that the system will be er Georgia Department of Public Health, Chapter 270-5-25. I hereby promise to notify the Union County Health Department upon its ermit nor the final inspection in any way guarantee the proper operations of
- Della	1-22-91 Date
Owner or applicant's signature	Date
1. Type water supply: 1. individual 2. community 3. public 2. 1. New system 2. Repair 3. Existing 3. Perc rate	12. Distance S.T. from well  13. Min. amount of field line: Ft. sq Linear ft.  14. Field line as installed Ft. sq Linear ft.  25 o x36  15. Width of trench 16. Distance between trenches 17. Trench depth, avg. 18. Distance from foundation 19. Nearest property line front, rear, side 20. Distance from well  Illy: Rejected  Inspector:
System: Approved; Approved conditional	meatil flet
REMARKS: "are there any w streams within 50	ofeet (YES) (NO)''