

SK1821

Septic Tank 1000 Gals.
 Disp. Field 200 L.F.T
 Other _____
☒ New _____
☐ Repair _____

NORTHEAST TRI-COUNTY HEALTH DISTRICT
Division of Environmental Health

- (☒) Colville Office, Box 270, Phone 684-2262
- () Newport Office, Box 490, Phone 447-3131
- () Republic Office, Box 584, Phone 775-3161

Permit No. c 9679

Fee Paid \$150.00

Receipt No. 2874

Sharon Sokoll is hereby authorized to utilize a sewage disposal

system at N 330' W2 E2 SW4 NE4, Tax #2 Sec 36 Twp 34 Rng 39 and in accordance with the plans and specifications approved by the District Health Officer on file in this office.

Any major repairs or alterations to the system shall be reported to the Northeast Tri-County Health District (Division of Environmental Health) for approval PRIOR to construction.

This permit is issued and may be revoked by the Northeast Tri-County Health District Health Officer by the authority of WAC 246-272, and Rules and Regulations established by the Board pursuant to RCW 70.05.

Witness my hand and seal this 15th day of November, 19 93

Date of Inspection 12/15/93 Mansfield, MO
L. S. Starnes
 District Health Officer

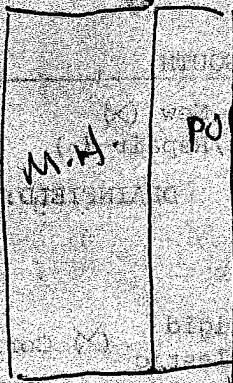
#C9679

Mo-34-39

As Built
12/8/93 MJA/CLS

Final cover approved
12/15/93 MJA

driveway



PORCH

M.H.



10 1/2'

10'

14'

13'

7'

19'

14'

100'

100'

100'

100'

100'

100'

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