

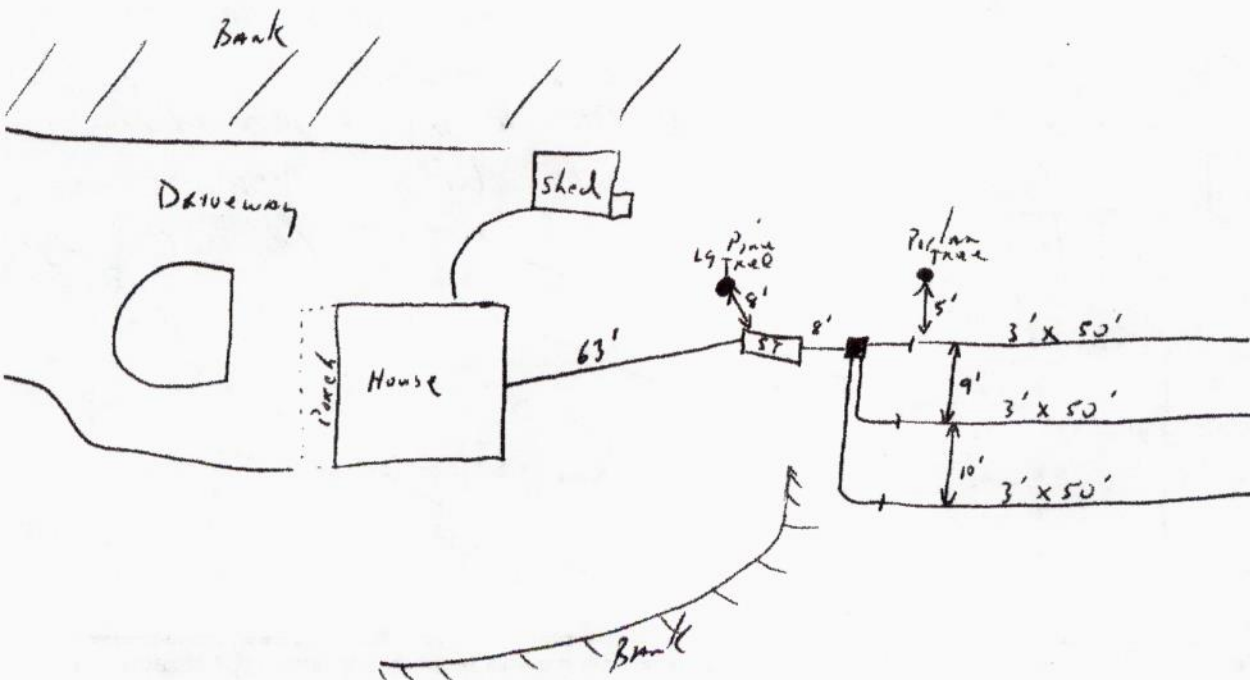
REPAIR

Certificate of Completion

NAME OF OWNER HELEN GRANT
TOWNSHIP Franklin PARCEL# _____
LOCATION Bell Denville Rd
INSTALLER Danny Lofton PERMITTED ☒

TYPE OF SYSTEM Conventional WATER SOURCE: ☐ CITY
SIZE OF TANK 1000g B+B 5-22-92 STB-805 ☐ COMMUNITY
TRENCH BOTTOM DEPTH 22" ☒ INDIVIDUAL WELL SPRING
DATE IMPROVEMENTS PERMIT ISSUED 5-27-92

DIAGRAM (Not to Scale)



A representative of the Macon County Health Department has inspected this septic system and finds that it conforms to state guidelines. The area designated as repair area is required for future use and can not be disturbed in any way. This certificate indicates that the septic system has been inspected; however, this certificate is not a guarantee.

DATE INSPECTED 7-30-92 SANITARIAN Rob Lyle