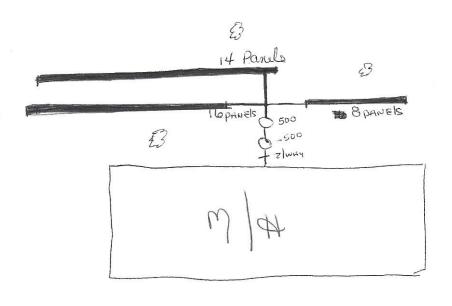
SUB-SURFACE COVER INSPECTION REPORT

NAME	: John + Epquson PERMIT: 21906
Location: Springered	
2) N 3) I	KS: Are lids and joints sealed? Number and Size of tanks. Depth of lid below ground level. How many and location of clean outs? Yes No
II. DR	AINFIELD:
1)	Type of drainfield:Gravel-lessPerforatedV _Leaching ChamberSpecial Design
2)	Length, width, and depth of trench.
3)	Is filter cloth in place?
4)	How many cubic yards of media material was used?
5)	What type of media material? Rubber or Rock
6)	How many cubic yards of sand back fill will be used?
7)	Is system installed to design drawing? Yes No
8)	Is the drainfield 150' from public well or 100' from private well?
9)	Is there 5'or more buffer zone?
10)	Is landscape plan sign by property owner? Yes No
11)	Has the homeowner been given a copy of the OSSF maintenance and management practice as prescribed in Chapter 285.39 of the Standard.
COMMENTS:	
I, the Installer or Homegwher agree to the above information to be true and correct as stated.	
Installer or Homeowner: Date: 4804	
License	Inspection: Passed Failed
Inspecto	or: 2 lendreas Date: 4804
License	# C6889







ROAd

