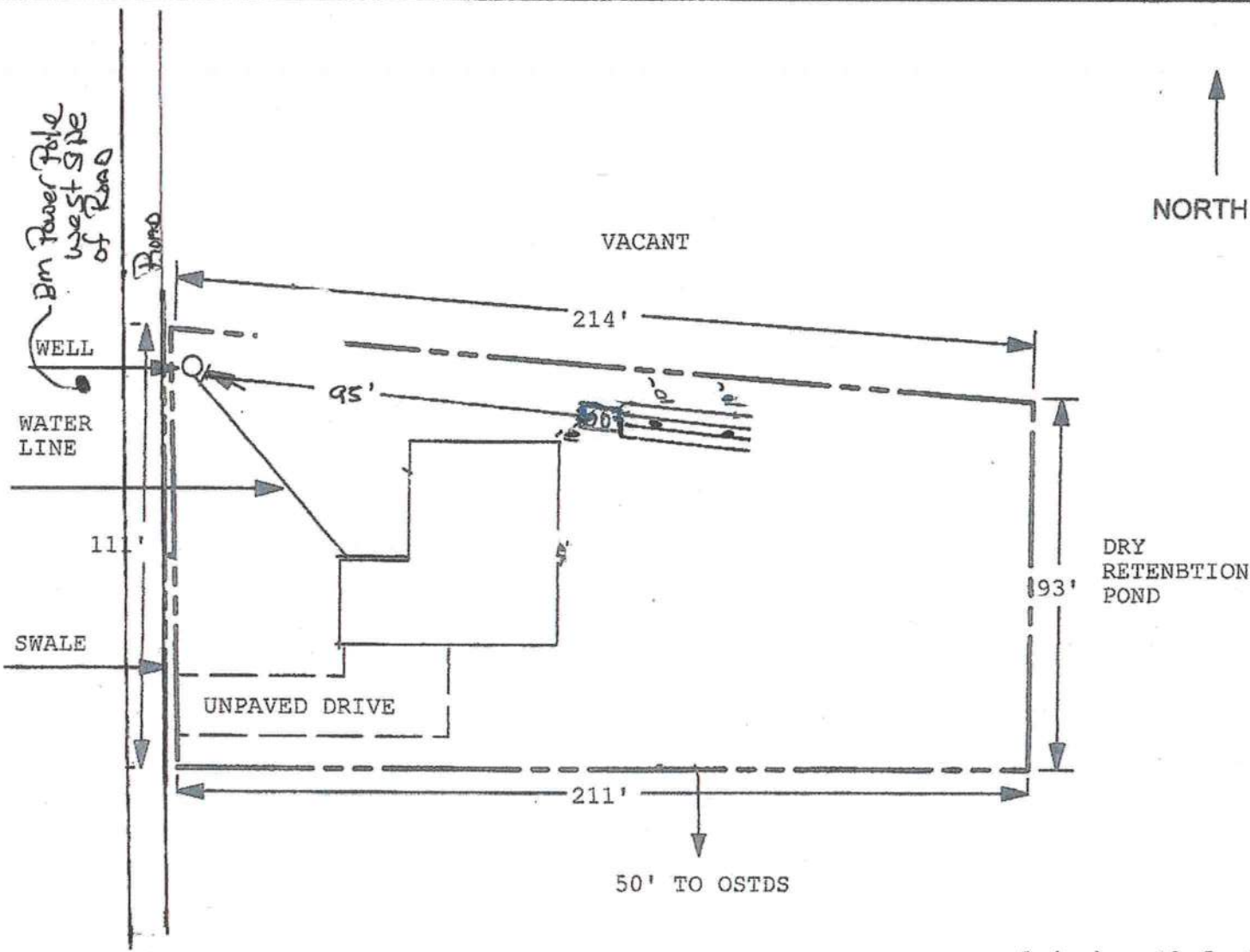


Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: Warren

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



1 inch = 40 feet

Site Plan Submitted By Kalawade Date 6-19-2020
Plan Approved _____ Not Approved / Date _____

By _____ CPHU

Notes: _____