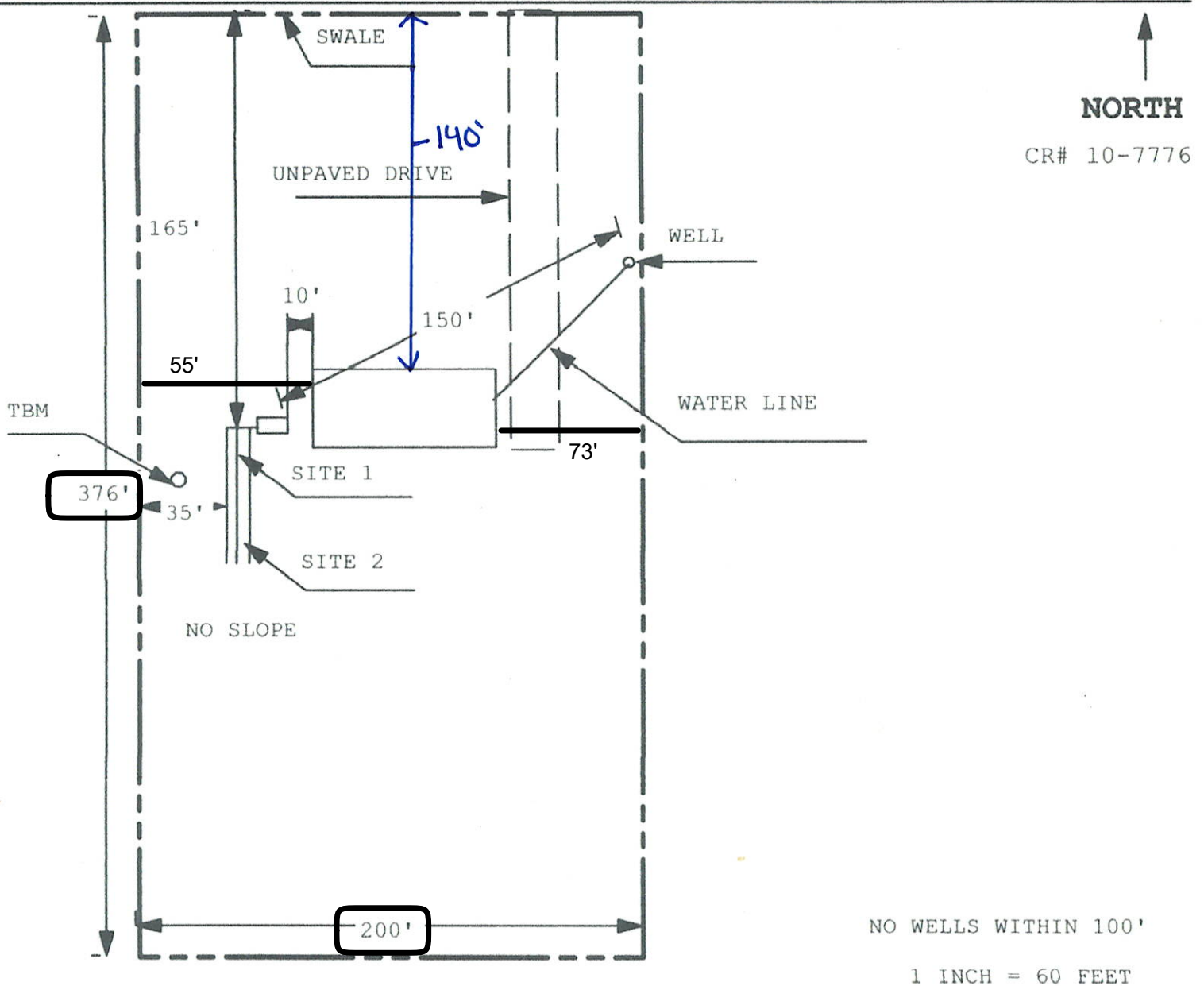


Application for Onsite Sewage Disposal System  
Construction Permit. Part II Site Plan  
Permit Application Number: \_\_\_\_\_

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Pam J. Dwyer Date 9/20/20  
Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

By \_\_\_\_\_ CPHU

Notes: \_\_\_\_\_