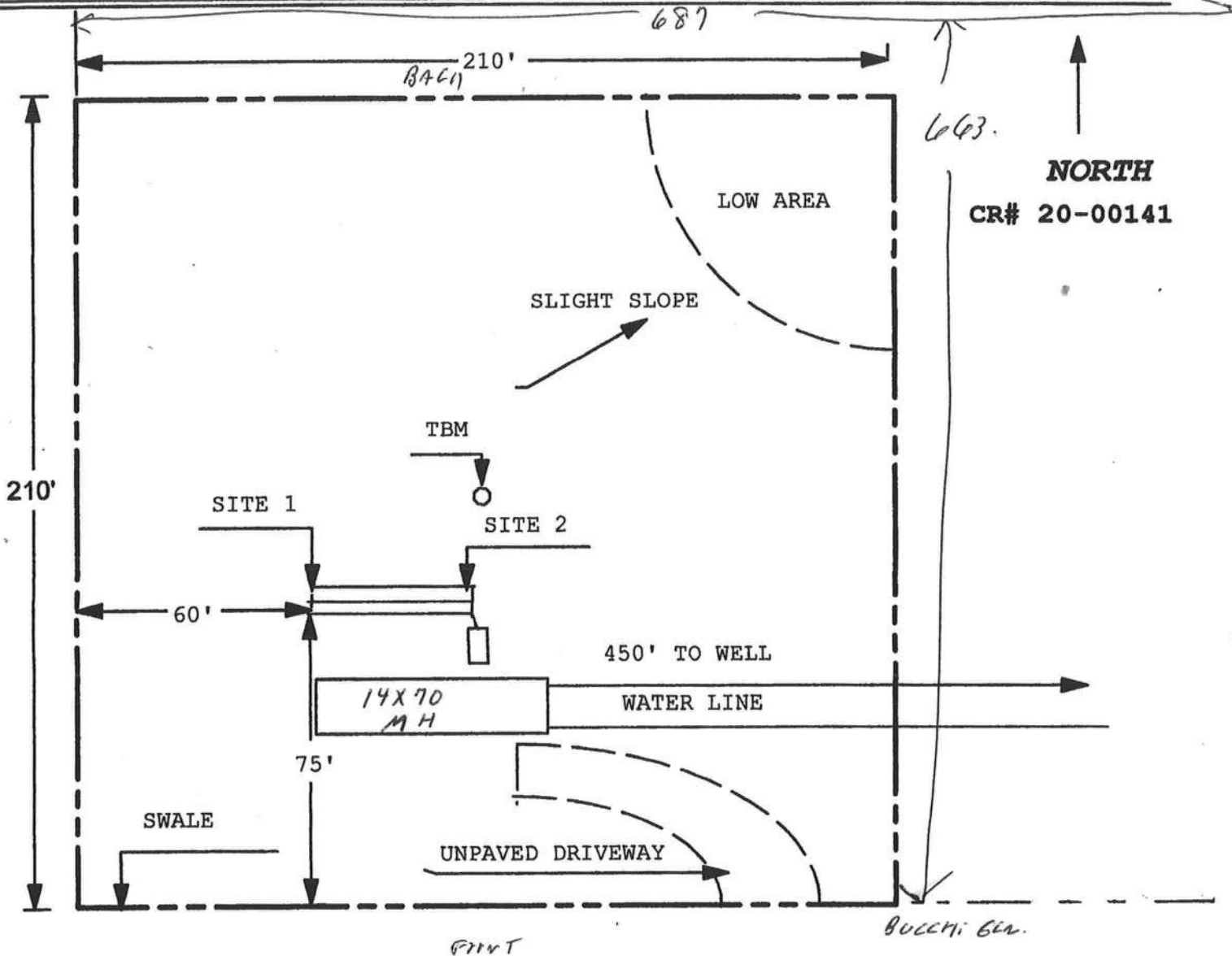


Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: _____

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



1 INCH = 40 FEET

NO WELLS WITHIN 100'

Site Plan Submitted By [Signature] Date _____
Not Approved _____ Date _____

CPHU

Notes: _____