



CERTIFICATE OF FINAL APPROVAL
Onsite Sewage Treatment and Disposal System

File Nbr: **2008040077**
County: **Aiken**

Name: **DAVID ROCHESTER**

Address:

**24162 ROCHESTER LN
ALDIE, VA 20105**

Program Code: **360**

Type Facility: **BARN/APT**

Tax Map:

Subdivision **HOLLOW CREEK**

Site: **FOX TAIL CT
, SC**

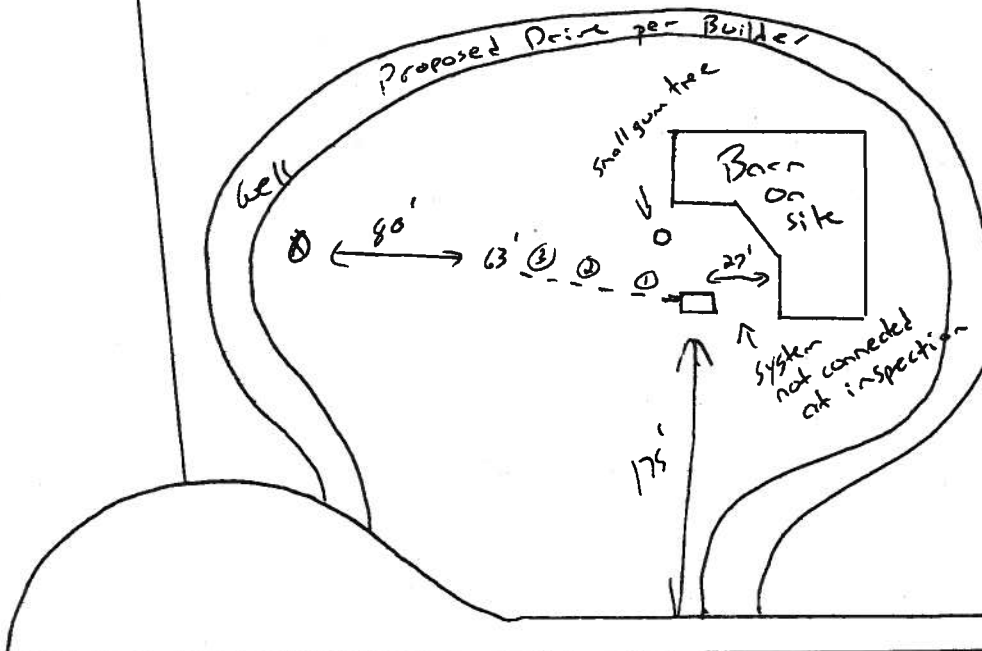
Water Supply: **PRIVATE**

Block: **SECT 2**

Lot: **6**

ACTUAL INSTALLATION

(NTS)



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Installer: Contrell
Septic Tank Mfg: Augusta Ready Mix
Pump Chbr Mfg:
Pump Mfg:
Pump Model:
Grease Trap Mfg:
Aggregate: Tire Chips
Trench Dpth (in): 40"
System Code: 100
Well Installed: yes
Well Dist (ft): 80'
Building Dist (ft): 27'
Property Dist (ft): 80'
Water Dist (ft): N/A

Elevation Readings

Stubout: not connected S/T Inlet: 5'2" S/T 5'9"

Line No.

① 6'2"
② 6'2"
③ 6'2 1/2"

GPS Latitude:
Longitude:
Accuracy:

Comments:

THIS CERTIFICATE OF FINAL APPROVAL IN NO WAY GUARANTEES THE LIFE OF THE SYSTEM OR THAT IT WILL FUNCTION PROPERLY
UNDER ANY OR ALL CONDITIONS

Approved By: *[Signature]*

Date: 11/4/08