OFFICE USE ONLY FEE: \$75.00	PERMIT #
PAID:// INITIALS:	

## JONES COUNTY EXISTING SEPTIC SYSTEM APPLICATION

Applicant:		Daytime Phone: ( )				
Current Mailing Address:						
Property Owner (If different Owner's Mailing Address:	тот аррис	Daytime Phone: ( )				
<b>Location of Property (Street A</b>	ddress):			State Road #		
(If Applicable) Subdivision Name:				Phase:	_ Lot:	
PIN Number: Date Property Deeded & Rec	 orded:	 //	Proper	ty Size: _	Acres	
Single Family Residence		ise or Mobile H		se or Mobile		
Multi-Family Residence	# of Occupa	nts/People	# of Occupants/People			
Water Supply Source (Check One)  Private well Public Water (County Water (Please specify)	er) (If	<u>-</u>	Easements or Right Wells, springs or ex	) ns s-of-way tisting wate		
Directions to Property: (Please	e be specific)					

(Realtor or other designated representative of the owner shall provide written documentation of representation)