



Submit to: Okanogan County Public Health
P.O. Box 231
1234 South 2nd Avenue
Okanogan, WA 98840

FAX#: (509) 422-7142

Applicant: _____ Parcel Number: _____

AS-BUILT DRAWING

Drawing must include:

- | | | |
|---|--------------------------|--|
| Dimensions of all tightlines and laterals | Tank volume | Location of cleanouts and inspection ports |
| Drainfield materials used | Reserve area | Sleeving and step-downs |
| Location of wells and water lines | Setbacks to water bodies | Two locate dimensions to first septic tank lid |

Installer: _____ Date Installed: _____