TOWN OF TISBURY

office of

THE BOARD OF HEALTH

SEPTIC INSTALLER'S AS BUILT DRAWING

MAP _____ **PARCEL** _____ **ADDRESS**_____

OWNER_____ _____

PERMIT # _____ **ENGINEER** _____ **?** **NEW** **?** **REPAIR**

INSTALLER_____ **DATE**_____

COORDINATE DIAGRAM (Include wells, water & power lines & fuel storage tanks)

NOTE: It is suggested that the property owner keep a copy of this as built plan as the septic tank should be pumped periodically for maintenance.