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SAN. FORM 40

FHA _____

STATE OF HAWAII
DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH DIVISION
SANITARIAN'S REPORT OF CESSPOOLS

Cert. No. _____

Issued: _____

Date _____ 19____

Property owner MR. HOWARD TAYLOR Address HAENAIsland KAUAI City _____ District _____Builder or Contractor HAROLD KOBAYASHI Intended for DWEL.Primary YES Secondary NO Seepage NODistances from building 13' Boundary 30' Stream, well, body or water, etc. APRX 300' TO OCEANDia. (clear)-ft. 6 Depth-ft. 10'6" Capacity (Gal.) _____ No. ft. down to water NO WATERGround slope LEVEL State soil or rock formation starting from surface SANDKind of wall or curb CONCRETE RINGS Reinforced concrete cover YESDistance from surface of ground to top of cover-ft. 1'Approved 6/3 19 70 C. Futemma

SANITARIAN

OCEAN



DIRECTION

REMARKS

END of RD.



DIRECTION

