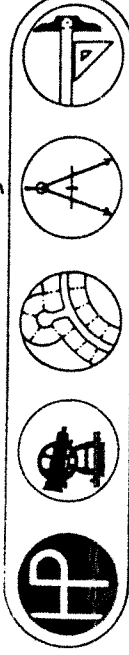
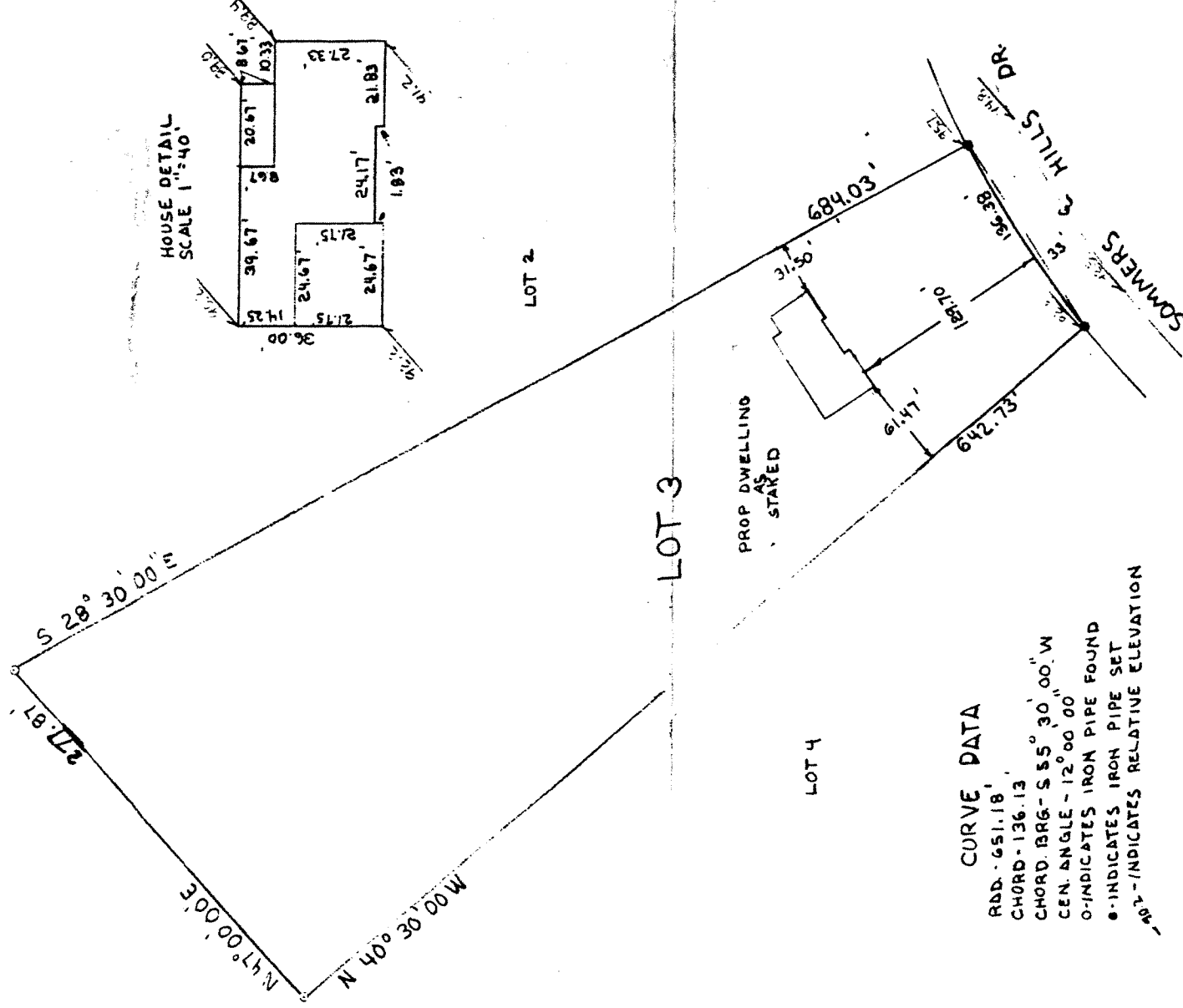


Post Office Box 182
W246 S3145 Industrial Lane
Waukesha, Wisconsin 53186
414-542-0436

A diagram showing a lens-shaped region, which is the intersection of two disks. Inside this region, there is a point labeled z .

FOR: E. J. Sommers

Lot 3, Sommers Hills, being a recorded plat located in the Northwest One-Quarter of Section 24, Town 6 North, Range 19 East, Town of Waukesha, Waukesha County, Wisconsin.

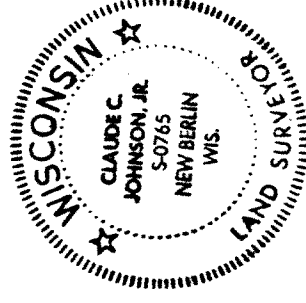


SURVEYING PLANNING ENGINEERING ARCHITECTURE

THIS SURVEY IS MADE FOR THE EXCLUSIVE USE OF THE PRESENT OWNERS OF THE PROPERTY, AND ALSO THOSE WHO PURCHASE, MORTGAGE, OR GUARANTEE THE TITLE THERE-TO, WITHIN ONE (1) YEAR FROM DATE HEREOF, AND AS TO THEM I HEREBY CERTIFY THAT SAID SURVEY AND THE ABOVE MAP WERE MADE IN ACCORDANCE WITH ACCEPTABLE PRO- FESSIOAL STANDARDS AND THAT THE INFORMATION CONTAINED THEREON IS, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF A TRUE AND ACCURATE REPRESENTATION THEREOF."

Claude C. Johnson, Jr.

REGISTERED LAND SURVEYOR



LAND SURVEYOR NO.

DRAFTED BY WKS

21514 ON JOB

PLB67



State and County
Permit Application
for Private Domestic Sewage Systems

State Permit # 11412
County Permit # 607
County _____

*DENOTES STATE APPROVAL REQUIRED

Date Approval Received from State if Required _____ State Plan I.D. # _____

A. OWNER OF PROPERTY

Mailing Address:

Colonel Sommer 4156 L. 5th St. Milwaukee, Wis 53222
B. LOCATION: SW 1/4 NW 1/4, Section 28, T. 6 N., R. 18 E. (ort-W Lot# 2 City _____
Subdivision Name, _____ nearest road, lake or landmark Blk # _____

Sommer Hills Sommer Hills Dr. Village Waukesha
C. TYPE OF OCCUPANCY: Commercial _____ Industrial _____ Other (specify) _____ Variance _____
Single family ☒ Duplex _____ No. of Bedrooms 4 No. of Persons 5

D. TYPE OF APPLIANCES: Dishwasher ☒ YES _____ NO _____ Automatic Washer ☒ YES _____ NO _____
NO Food Waste Grinder ☒ YES _____ NO _____ # of Bathrooms 2

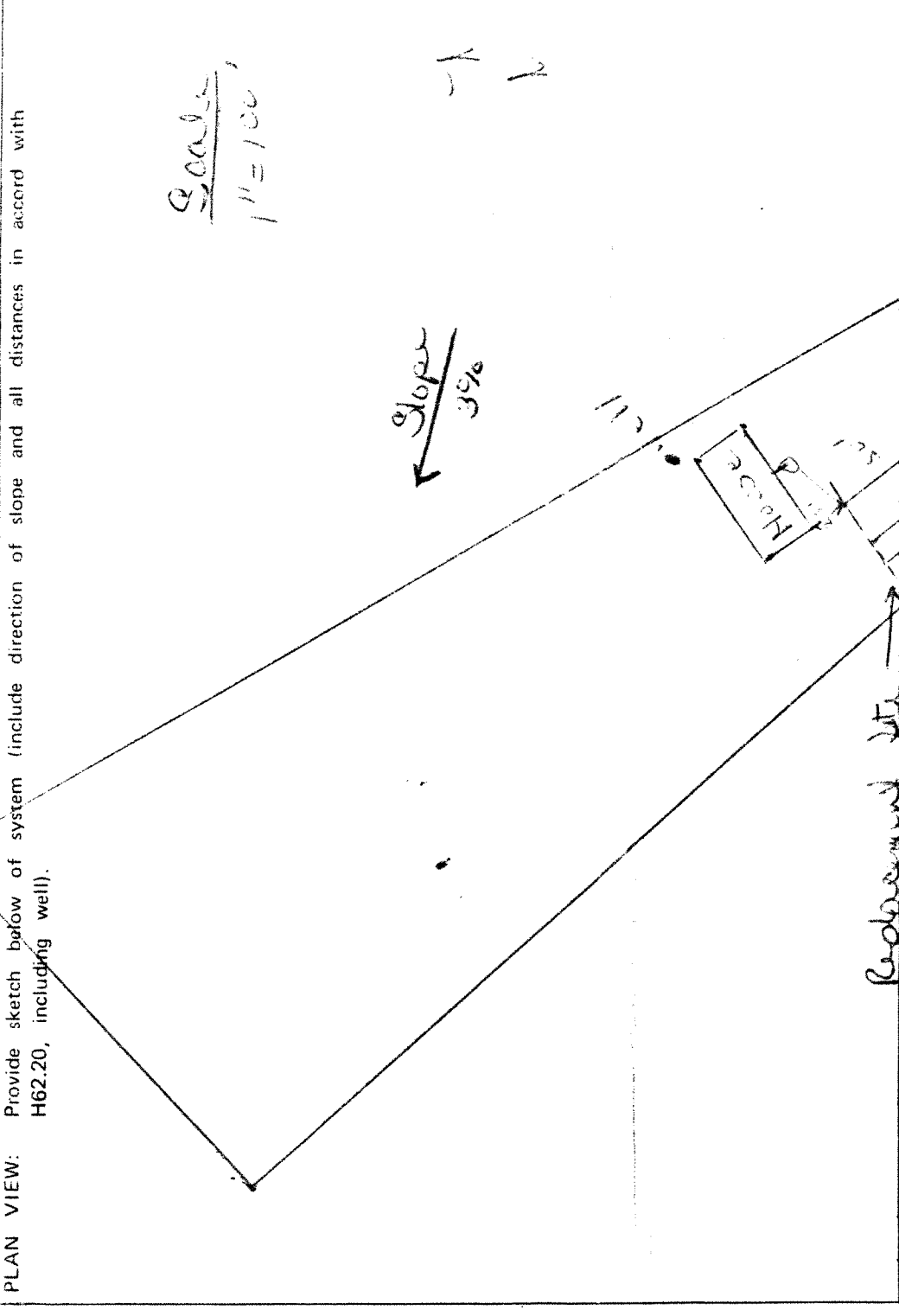
E. SEPTIC TANK CAPACITY 1200 Total gallons _____ No. of tanks 1
*Holding tank capacity _____ Total gallons _____ No. of tanks _____
New Installation ☒ Addition _____ Replacement _____ Prefab Concrete ☒
*Poured in Place _____ Steel _____ Other (specify) _____

F. EFFLUENT DISPOSAL SYSTEM: Percolation Rate 1.52 234.33 282 Total Absorb Area 15000 sq. ft.
New ☒ Addition _____ Replacement _____ *Fill System _____
Seepage Trench: No. Lin., Feet _____ Width _____ Depth _____ Tile Depth _____ No. of Trenches _____
Seepage Bed: Length 50' Width 30' Depth 3' Tile Depth 2' No. of Lines 5
Seepage Pit: Inside diameter _____ Liquid Depth _____ Tile Size 4"
Percent slope of land 5% Distance from critical slope _____

I, the undersigned, do hereby certify that the information I have reported is in accord with Section H62.20, Wisconsin Administrative Code, and that I have sized the effluent disposal system from the EH-115 prepared by the Certified Soil Tester,

NAME Wale J. Bawitt C.S.T. # 1299 and other information _____
obtained from _____ (owner/builder).
Plumber's Signature James A. P... MR/MPRSW# 1391 Phone 542-3514
Plumber's Address 25307 P... Waukesha, Wis 53184

PLAN VIEW: Provide sketch below of system (include direction of slope and all distances in accord with H62.20, including well).



Not Write in Space Below - FOR DEPARTMENT USE ONLY
Date of Application 7-17-78 Fees Paid: State 10.00 County 30.00 Date 7-17-78
Permit Issued/Rejected (date) 7-17-78 Issuing Agent Name James A. P... Date Rec'd _____

Inspection Yes ☒ No _____ Valid # _____
county (white copy) _____
state (pink copy) _____
3. owner (green copy) _____
4. plumber (canary copy) _____