

INYO COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH SERVICES

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207 W South St, Bishop, CA 93514
(760) 873-7866 Fax (760) 873-3236

PLOT PLAN

Type of Permit Application: _____

Permit No. _____

INDICATE BELOW THE EXACT LOCATION OF WELL/ SEWAGE DISPOSAL SYSTEM WITH RESPECT TO THE FOLLOWING, INCLUDING THE NEIGHBORING PROPERTIES: PROPERTY LINES, WATER BODIES OR WATER COURSES, DRAINAGE PATTERN, ROADS, EXISTING WELLS, SEWERS AND PRIVATE SEWAGE DISPOSAL SYSTEMS. INCLUDE ALL DIMENSIONS.

