CERTIFICATION OF COMPLETION

In accordance with the condition of the Johnson County, Wyoming Permit to Construct No, requiring submittal of this Certification of Completion within sixty (60) days of completion of the facility, I hereby certify:			
1.	Construction of the permitted facility was complete facility was placed in operation on	ed on (DATE) and the (DATE).	
	disposal field, and disposal field. b. Include a list of materials used during the o	pipe, volume of rock, type and number of	
2.	2. Construction was completed in accordance with the following: (Check the appropriate option)		
	The facility was constructed in compliance with all terms and conditions of the permit including the design report, plans and specifications, design data or other information submitted in support of the application.		
		•	
Facilit	y Owner (print or type)		
		Date	
Owne	rs Signature		
Install	er Name or Business Name (print or type)		
		Date	
Install	er Signature		
	IF THE INSTALLED SYSTEM HAD MODIFICAT CERTIFICATION FROM A REGISTERED PRO		
Engine	eer (print or type)		
		Date	
Engin	eers Signature		

Johnson County Planning Department, 26 N DeSmet Ave, Buffalo, WY 82834; Phone: 307-684-1907

Form 7/1/2014