

PERMIT NUMBER **2484**

**GRANVILLE - VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS**

COUNTY: Vance	TAX NO. 0593 E 01006	TYPE OF ESTABLISHMENT			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS. *THE IMPROVEMENTS PERMIT MUST BE ATTACHED TO A CONSTRUCTION AUTHORIZATION BEFORE OBTAINING BUILDING PERMIT OR OTHER CONSTRUCTION PERMITS AND BEFORE A WASTEWATER SYSTEM IS INSTALLED. *THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USE CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.
	SR NO.	RESIDENCE ☒	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 3	
OWNER: William Madison		BUSINESS ☐			
APPLICANT: Oatwood		OTHER ☐			
APPLICANT'S ADDRESS:		WATER SUPPLY			
		PUBLIC ☐	WELL ☒	OTHER ☐	
PROPERTY ADDRESS/LOCATION: Cedar Cove Rd 360 Spring Lane		TYPE OF WASTEWATER SYSTEM			
		DESCRIPTION	INITIAL INSTALLATION	REPAIR	
SUBDIVISION: Autumn Winds		DESIGN FLOW:	480		
LOT NUMBER: 40		LTAR:	.4		
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		ABSORPTION AREA:	1200'ft		
		TRENCH WIDTH:	3		
		TRENCH SPACING:	9'		
		TOTAL TRENCH LENGTH:	400'300		
		NUMBER OF TRENCHES:	4		
		GRAVEL DEPTH:	12\"/> 		
		TANK SIZE:	1000		
		CONDITIONS:			
IMPROVEMENT PERMIT				DATE:	
FOR:					
ISSUED BY: Walter J. Vaughn PS				5-11-2000	
OPERATION PERMIT				DATE:	
SYSTEM INSTALLED BY: William Edwards					
ISSUED BY: W. Vaughn				6-13-2000	