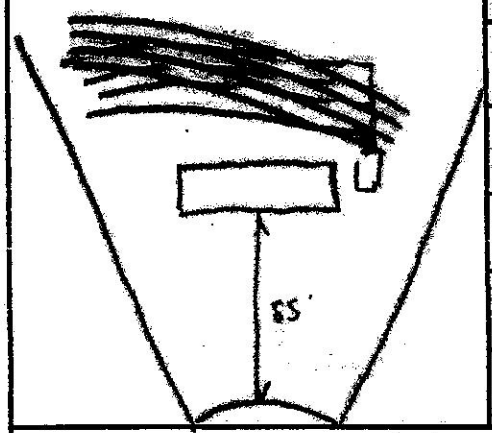
PERMIT NUMBER 2765

GRANVILLE - VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: VANCE	TAX NO. 0461802059	TYPE OF ESTABLISHMENT		
	SR NO.	RESIDENCE X BUSINESS — OTHER —	NUMBER OF BEDROOMS: ~~4~~ 3	NUMBER OF OCCUPANTS: ~~≤ 8~~ 6
OWNER: HOMEBOYS				
APPLICANT: TIM BRIDGES		WATER SUPPLY		
APPLICANT'S ADDRESS:		PUBLIC —	WELL X	OTHER —
PROPERTY ADDRESS/LOCATION: MARIGOLD LN. 324		TYPE OF WASTEWATER SYSTEM		
		DESCRIPTION	INITIAL INSTALLATION	REPAIR
SUBDIVISION: SPRING FOREST III		DESIGN FLOW:	~~360~~ 300 GAL/day	
LOT NUMBER: 127		LTAR:	0.3	
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		ABSORPTION AREA:	~~1200 FT²~~ 1000 FT²	
		TRENCH WIDTH:	3'	
		TRENCH SPACING:	9' on CENTERS	
		TOTAL TRENCH LENGTH:	~~480'~~ 534'	
		NUMBER OF TRENCHES:	3-5	
		GRAVEL DEPTH:	12"	
		TANK SIZE:	1000 GAL	
		CONDITIONS:	24" TRENCH DEPTH	



*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.

IMPROVEMENT PERMIT FOR: HOMEBOYS ISSUED BY: Paul L. Hall	DATE: 11-3-00
OPERATION PERMIT SYSTEM INSTALLED BY: Tom Henderson ISSUED BY: Paul L. Hall	DATE: 8-24-01