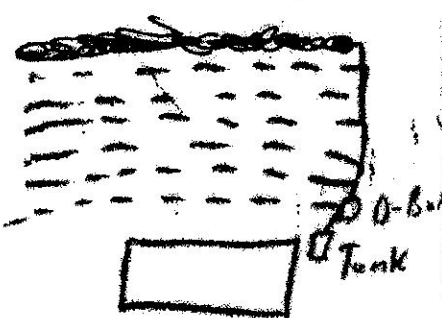


2:00

PERMIT NUMBER 2941

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

Orlene Check

COUNTY:	TAX NO.	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.
Vance	SR NO. 1369	RESIDENCE ☒	NUMBER OF BEDROOMS:	NUMBER OF OCCUPANTS:	
OWNER: Dorothy Hawkins		BUSINESS ☐	5	6	
		OTHER ☐			
APPLICANT: Sam		WATER SUPPLY			
APPLICANT'S ADDRESS: 0590 01038		PUBLIC ☐	WELL ☐	OTHER ☐	
PROPERTY ADDRESS/LOCATION: Jopkintown Rd 4066		TYPE OF WASTEWATER SYSTEM			
		DESCRIPTION	INITIAL INSTALLATION	REPAIR	
SUBDIVISION: Charles White Rd		DESIGN FLOW:	600		
LOT NUMBER: 8		LTAR:	.3		
REFERENCE SKETCH (SEE PLAT FOR DETAILS) 		ABSORPTION AREA:	2000 sq ft		
		TRENCH WIDTH:	3'		
		TRENCH SPACING:	9'		
		TOTAL TRENCH LENGTH:	666		
		NUMBER OF TRENCHES:	7		
		GRAVEL DEPTH:	12"		
		TANK SIZE:	1200		
		CONDITIONS:	more clearing needed		
IMPROVEMENT PERMIT				DATE:	
FOR:					
ISSUED BY: Walter F. Vaughn RS					4-9-2001
OPERATION PERMIT				DATE:	
SYSTEM INSTALLED BY: WAYNE AYSCUE					
ISSUED BY: Paul I. [Signature]					6-6-01