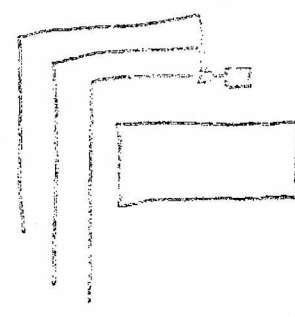


2:00 PM

PERMIT NUMBER

# GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT IMPROVEMENT AND OPERATION PERMITS

|                                                                                                                                    |                              |                                                                                                                      |                                          |                                  |                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| COUNTY:<br><u>UPH.</u>                                                                                                             | TAX NO.<br><u>0332001008</u> | TYPE OF ESTABLISHMENT                                                                                                |                                          |                                  | *THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.                                                                                         |
| OWNER: <u>Bill &amp; Julie White</u>                                                                                               | SR. NO.                      | RESIDENCE <input checked="" type="checkbox"/><br>BUSINESS <input type="checkbox"/><br>OTHER <input type="checkbox"/> | NUMBER OF BEDROOMS:<br><u>3</u>          | NUMBER OF OCCUPANTS:<br><u>2</u> |                                                                                                                                                                                       |
| APPLICANT: <u>John</u>                                                                                                             |                              | WATER SUPPLY                                                                                                         |                                          |                                  |                                                                                                                                                                                       |
| APPLICANT'S ADDRESS:                                                                                                               |                              | PUBLIC <input type="checkbox"/>                                                                                      | WELL <input checked="" type="checkbox"/> | OTHER <input type="checkbox"/>   |                                                                                                                                                                                       |
| PROPERTY ADDRESS/LOCATION:<br><u>408</u>                                                                                           |                              | TYPE OF WASTEWATER SYSTEM                                                                                            |                                          |                                  | *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. |
|                                                                                                                                    |                              | DESCRIPTION                                                                                                          | INITIAL INSTALLATION                     | REPAIR                           |                                                                                                                                                                                       |
| SUBDIVISION: <u>Plat 1000</u>                                                                                                      |                              | DESIGN FLOW:                                                                                                         | <u>2.5 gpm</u>                           |                                  |                                                                                                                                                                                       |
| LOT NUMBER: <u>303</u>                                                                                                             |                              | LTAR:                                                                                                                | <u>0.2</u>                               |                                  |                                                                                                                                                                                       |
| REFERENCE SKETCH (SEE PLAT FOR DETAILS)<br><br> |                              | ABSORPTION AREA:                                                                                                     | <u>12 x 5 ft</u>                         |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | TRENCH WIDTH:                                                                                                        | <u>4'</u>                                |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | TRENCH SPACING:                                                                                                      | <u>5' x 6' x 7'</u>                      |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | TOTAL TRENCH LENGTH:                                                                                                 | <u>40'</u>                               |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | NUMBER OF TRENCHES:                                                                                                  | <u>2-4</u>                               |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | GRAVEL DEPTH:                                                                                                        | <u>12'</u>                               |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | TANK SIZE:                                                                                                           | <u>10' x 10'</u>                         |                                  |                                                                                                                                                                                       |
|                                                                                                                                    |                              | CONDITIONS:                                                                                                          | <u>20' x 10' x 10'</u>                   |                                  |                                                                                                                                                                                       |
| IMPROVEMENT PERMIT                                                                                                                 |                              |                                                                                                                      |                                          | DATE:                            | *THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USES CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.           |
| FOR: <u>Bill &amp; Julie White</u>                                                                                                 |                              |                                                                                                                      |                                          | <u>7</u>                         |                                                                                                                                                                                       |
| ISSUED BY: <u>Paul J. [Signature]</u>                                                                                              |                              |                                                                                                                      |                                          |                                  |                                                                                                                                                                                       |
| OPERATION PERMIT                                                                                                                   |                              |                                                                                                                      |                                          | DATE:                            |                                                                                                                                                                                       |
| SYSTEM INSTALLED BY: <u>W &amp; H Physical</u>                                                                                     |                              |                                                                                                                      |                                          | <u>4-26-05</u>                   |                                                                                                                                                                                       |
| ISSUED BY: <u>Paul J. [Signature]</u>                                                                                              |                              |                                                                                                                      |                                          |                                  |                                                                                                                                                                                       |