

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Tucker, Eddie Date 4-30-91 S.R. No. _____

Location/Address Timberlake Est.

Subdivision/Mobile Home Park Name _____ Lot Size 1 ac.

Permit No. # _____ Lot No. 17

New System ☒ Repair _____

House ☒ Mobile Home _____ Business _____

No. Bedrooms 4 No. People 3 No. Toilets 2

Water Supply: Private ☒ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 1000 gal.

Distribution Box 425 No. Lines 4

Nitrification Field 1500 Sq. Ft.

Lines: 1 2 3 4 5 6

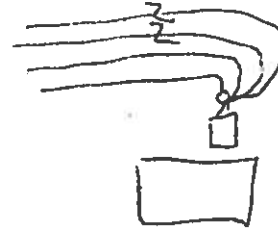
Width 3 3 3 2 _____

Length 125 125 125 125 _____

Grade 1 1 1 1 _____

Stone Depth 12 12 12 12 _____

Layout to be followed by installer:



st.

Improvements Permit By W. Vaughn Installer John Arscow

Certificate of Completion By W. Vaughn Date of Inspection 12-22-92

* Construction must comply with all other applicable state and local regulations, but the permit is not a guarantee that the system will not malfunction and the Granville-Vance Health District will not be held responsible for a malfunctioning system.