

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Sherron, Graham Date 2-16-05 S.R. No. 1711
 Location/Address S.R. 1711
 Subdivision/Mobile Home Park Name Wilson Place Lot Size _____
 Permit No. # 3962 Lot No. 22

New System ☒ Repair _____
 House ☒ Mobile Home _____ Business _____
 No. Bedrooms 3 No. People _____ No. Toilets _____
 Water Supply: Private ☒ Approved _____
 Semi-Public _____ Unapproved _____
 Public _____ None _____

Nitrification System:

Tank Size 1000 ST gal. 1000 gal RT.

Distribution Box _____ No. Lines 3

Nitrification Field 900 Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3 3 3 _____

Length 100 100 100 _____

Grade ✓ ✓ ✓ _____

Stone Depth NA NA NA _____

E2 flow 120 H E22 101

Layout to be followed by installer:

* Sketch on back

Improvements Permit By ME. Yount Installer Robert Stockley

Certificate of Completion By David Cumber Date of Inspection 6-6-05

* 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.

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.

