

3:00

PERMIT NUMBER 9608

GRANVILLE - VANCE DISTRICT HEALTH DEPARTMENT IMPROVEMENT AND OPERATION PERMITS

COUNTY: <i>Vance</i>	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.
	SIR NO. <i>1341</i>	RESIDENCE ☒	NUMBER OF BEDROOMS: <i>2</i>	NUMBER OF OCCUPANTS: <i>1</i>	
OWNER: <i>John McKinny</i>		BUSINESS ☐			
		OTHER ☐			
APPLICANT: <i>same</i>		WATER SUPPLY			
APPLICANT'S ADDRESS: <i>0352402012</i>		PUBLIC ☐	WELL ☒	OTHER ☐	
PROPERTY ADDRESS/LOCATION: <i>Island Ck Est. Rd 415</i>		TYPE OF WASTEWATER SYSTEM			
		DESCRIPTION	INITIAL INSTALLATION	REPAIR	
SUBDIVISION: <i>Island Ck Est</i>		DESIGN FLOW:	<i>240</i>		
LOT NUMBER: <i>15</i>		LTAR:	<i>.3</i>		
REFERENCE SKETCH (SEE PLAT FOR DETAILS) 		ABSORPTION AREA:	<i>900</i>		
		TRENCH WIDTH:	<i>3</i>		
		TRENCH SPACING:	<i>9</i>		
		TOTAL TRENCH LENGTH:	<i>300</i>		
		NUMBER OF TRENCHES:	<i>3</i>		
		GRAVEL DEPTH:	<i>12"</i>		
		TANK SIZE:	<i>1000</i>		
		CONDITIONS:			
IMPROVEMENT PERMIT				DATE:	
FOR:					
ISSUED BY: <i>Walter T. Vaughn RS</i>				<i>5-22-97</i>	
OPERATION PERMIT				DATE:	
SYSTEM INSTALLED BY: <i>Norman Clifford</i>					
ISSUED BY: <i>W. Vaughn</i>				<i>10-14-97</i>	