

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY:		TAX NO.		TYPE OF ESTABLISHMENT			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
Vance		SR. NO.		RESIDENCE ☒ BUSINESS ☐ OTHER ☐	NUMBER OF BEDROOMS: 4	NUMBER OF OCCUPANTS: 3	
OWNER: Melanie Brune							
APPLICANT:		WATER SUPPLY					*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.
APPLICANT'S ADDRESS:		PUBLIC ☐	WELL ☒	OTHER ☐			
PROPERTY ADDRESS/LOCATION: 4075 Rock Bluff Lane Mitchell, NE 37544		TYPE OF WASTEWATER SYSTEM					*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.
SUBDIVISION:		DESCRIPTION	INITIAL INSTALLATION	REPAIR			
LOT NUMBER:		DESIGN FLOW:	480 g/daily				
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		LTAR:	.4				
*See attached site plan.		ABSORPTION AREA:	1,200 sq ft				
		TRENCH WIDTH:	3'				
		TRENCH SPACING:	9'				
		TOTAL TRENCH LENGTH:	400'				
		NUMBER OF TRENCHES:	4				
		GRAVEL DEPTH:	12"				
		TANK SIZE:	1,000 g				
		CONDITIONS:	Install 11 trenches 36"-42"				
FOR: Melanie Brune		IMPROVEMENT PERMIT					DATE: 12-9-03
ISSUED BY: Mike Shingleton, PE		OPERATION PERMIT					DATE: 7-13-04
SYSTEM INSTALLED BY: Adam Williams							
ISSUED BY: Mike Shingleton, PE							

Installed as 3, lines.

