

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Scott Alexander Homes Date 1-22-04 S.R. No. 1711
 Location/Address Pier Point Drive
 Subdivision/Mobile Home Park Name Falls Meadows Lot Size _____
 Permit No. # 4095 Lot No. 10

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 gal.
 Distribution Box 48" No. Lines 3
 Nitrification Field 600-900 Sq. Ft.
 Lines: 1 2 3 4 5 6
 Width 3' 3' 3' _____
 Length 100' 100' 100' _____
 Grade 1" 2 1/2" 1" _____
 Stone Depth E-2 Flow

Layout to be followed by installer:

* Sketch on back

Improvements Permit By M. F. Yount Installer Derek Backhae
 Certificate of Completion By David Cumba Date of Inspection 7-22-04

* 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.

