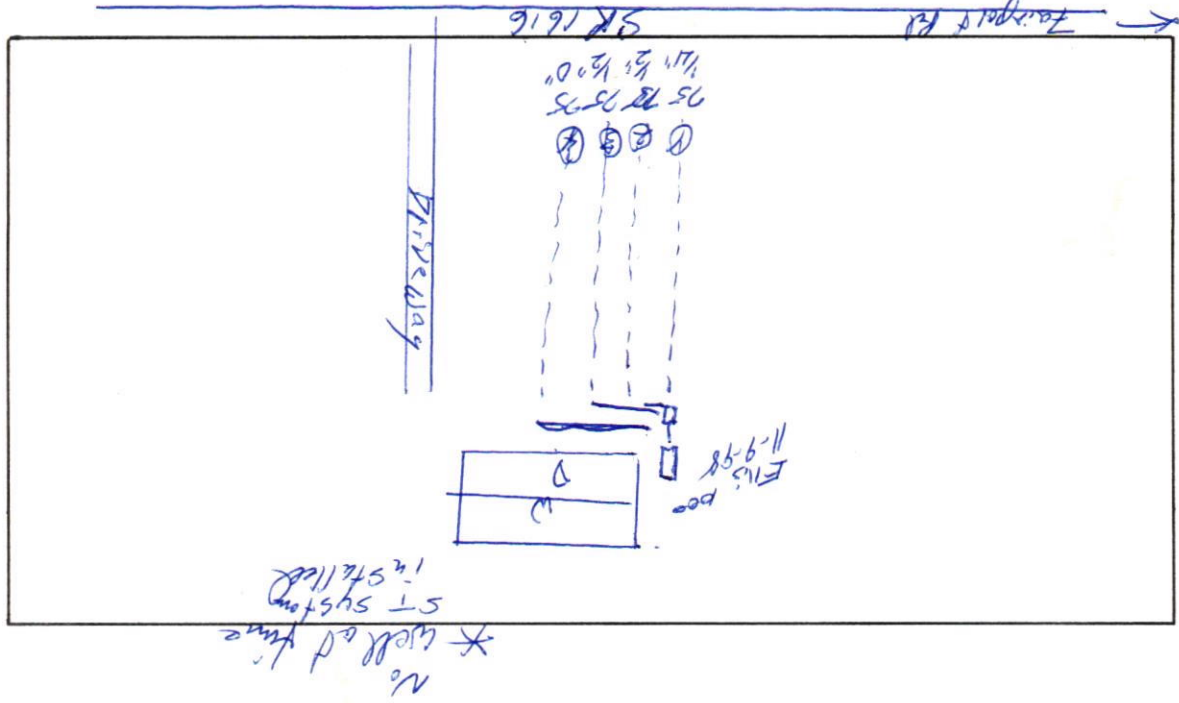


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Karen I Haskins Date 10-29-98 S.R. No. 1616

Location/Address Tommie Speed Rd - Oxford, N.C.

Subdivision/Mobile Home Park Name _____ Lot Size 1.04 Ac

Permit No. # 1570 Lot No. _____

New System ☒ Repair _____

House _____ Mobile Home ☒ Business _____

No. Bedrooms 3 No. People 2 No. Toilets _____

Water Supply: Private ☒ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 1000 gal.

Distribution Box yes No. Lines 4

Nitrification Field 300' - 1350' Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3' 3' 3' 3' _____

Length 75' 75' 75' 75' _____

Grade 0 1/4" 0" 1/4" _____

Stone Depth 18" 18" 18" 18" _____

Layout to be followed by installer:

Improvements Permit By Chris Hedrick Installer Len Cole

Certificate of Completion By Charles R. Nelson Date of Inspection 12-23-98

* 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.