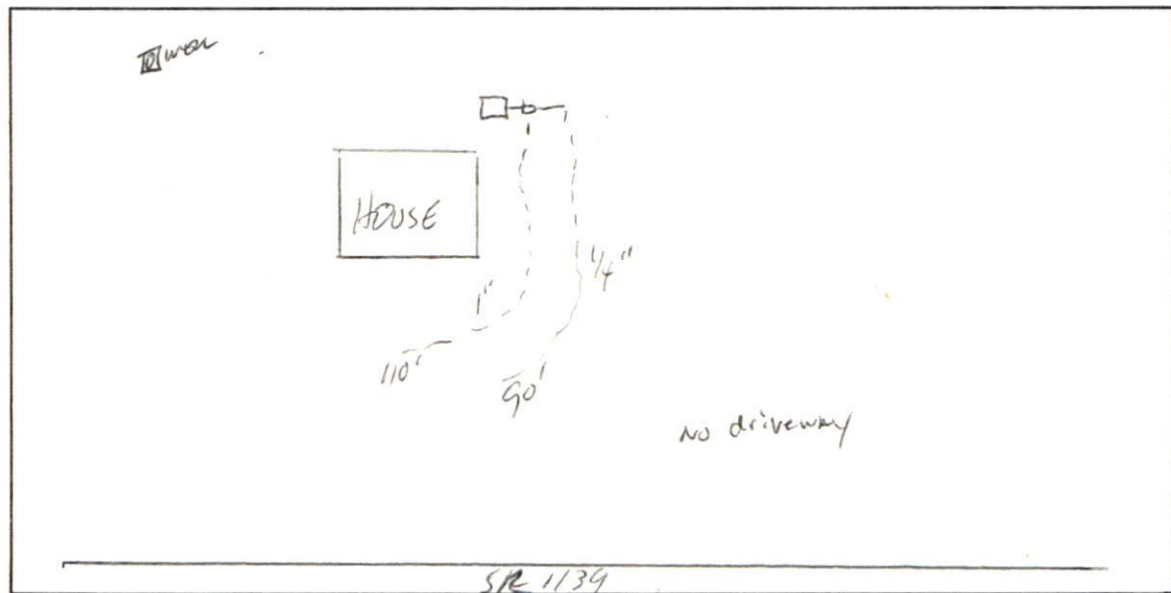


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Michael W. + Susan P. Holbrook Date 4-5-94 S.R. No. 1139

Location/Address Enon Rd - Oxford, NE

Subdivision/Mobile Home Park Name _____ Lot Size 1.5 A

Lot No. _____

New System ☒ Repair _____

House ☒ Mobile Home _____ Business _____

No. Bedrooms 3 No. People 5 No. Toilets _____

Water Supply: Private ☒ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 900 gal.

Distribution Box ☒ No. Lines 2

Nitrification Field 900 Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3' 3' _____

Length 110' 90' _____

Grade 1" 1/4" _____

Stone Depth 18" 18" _____

Layout to be followed by installer:

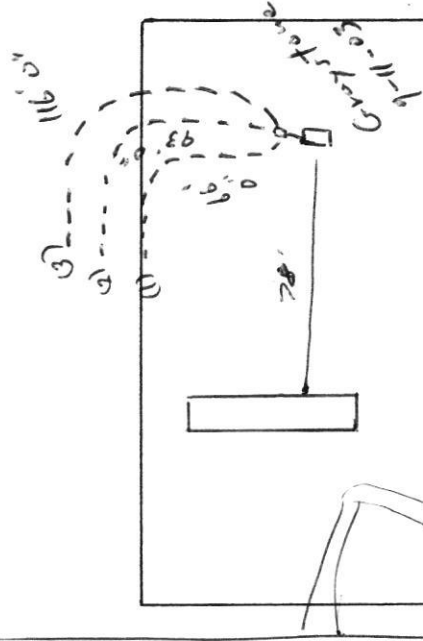
Improvements Permit By CHARLES R. NOBLIN Installer CHARLES ADCKOCK

Certificate of Completion By JAMES C. PARROTT Date of Inspection 5-18-94

* 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.

Private rd



Enin Rd SR 1139

← Oxford

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Charlie Hobgood Date 12-9-03 S.R. No. 1139

Location/Address Enon Road

Subdivision/Mobile Home Park Name _____ Lot Size 1.205 acs

Permit No. # 3932 Lot No. _____

New System ☒ Repair _____

House _____ Mobile Home ☒ Business _____

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

Water Supply: Private ☒ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 1000 gal.

Distribution Box ☒ No. Lines 3

Nitrification Field 800 Sq. Ft.

Lines:

	1	2	3	4	5	6
Width	<u>3'</u>	<u>3'</u>	<u>3'</u>			
Length	<u>66'</u>	<u>93'</u>	<u>116'</u>			
Grade	<u>0'</u>	<u>0'</u>	<u>0'</u>			
Stone Depth	<u>12"</u>	<u>12"</u>	<u>12"</u>			

Width

Length

Grade

Stone Depth

Layout to be followed by installer:

Improvements Permit By Eddie Yount Installer Frank Moore

Certificate of Completion By Eddie Yount Date of Inspection 12-9-03

* 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.