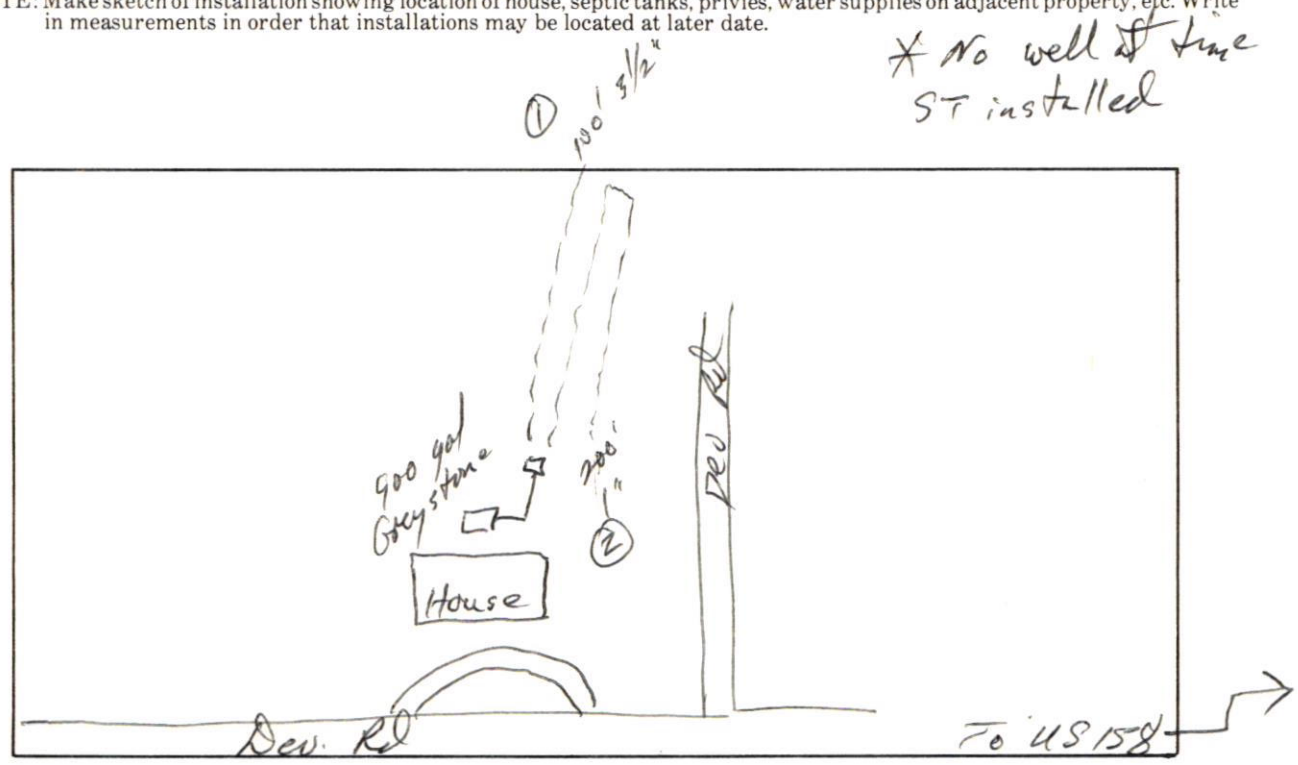
NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



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GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Norman Cossett Date 11-21-88 S.R. No. US 1584 W

Location/Address Rt. 1 Oxford N.C.

Subdivision/Mobile Home Park Name Shelton Hills Lot Size 1 Ac

Lot No. 31

New System ✓ Repair ____

House ✓ Mobile Home ____ Business ____

No. Bedrooms 3 No. People For sale No. Toilets 2

Water Supply: Private ✓ Approved ____

Semi-Public ____ Unapproved ____

Public ____ None ____

Nitrification System:

Tank Size 900 gal.

Distribution Box yes No. Lines 2

Nitrification Field 320' — 960 Sq. Ft.

Lines:	1	2	3	4	5	6
Width	3'	3'				
Length	120'	200'				
Grade	3½"	1"				
Stone Depth	12"	12"				

Layout to be followed by installer:

Improvements Permit By Charles R. Noblin Installer Norman Cossett

Certificate of Completion By Charles R. Noblin Date of Inspection 12-29-88

* 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.