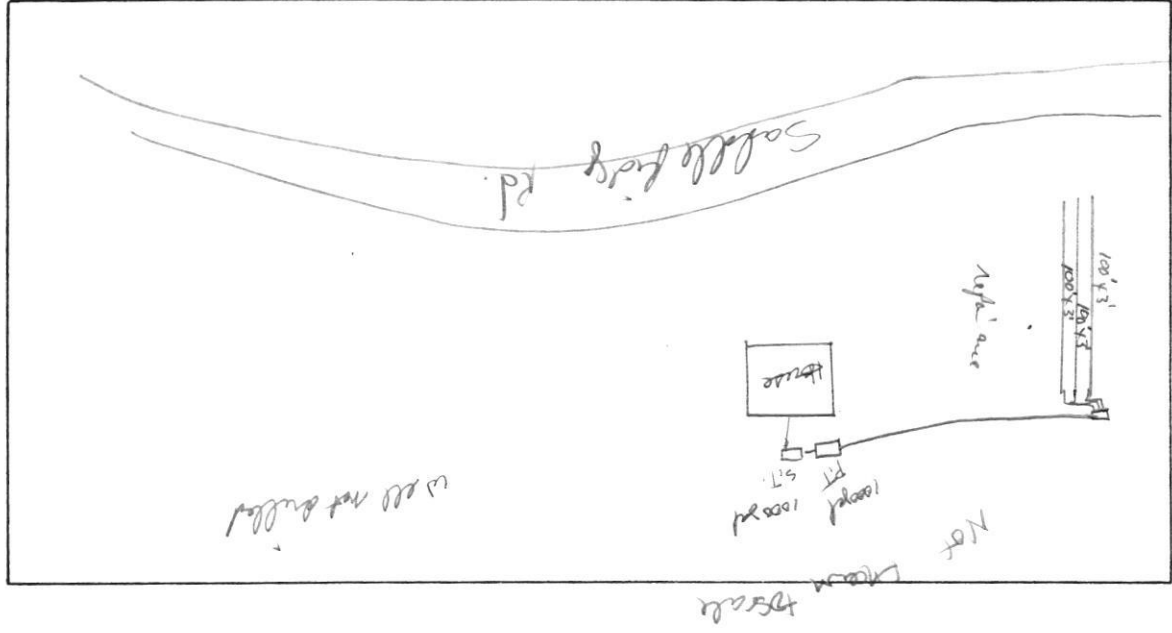


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Mike Arrington Date 9-3-04 S.R. No. 1123

Location/Address _____

Subdivision/Mobile Home Park Name Saddle Ridge Lot Size _____

Permit No. # 4085 Lot No. 20

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 1000 gal. Adapted

Distribution Box 1000 No. Lines 3

Nitrification Field 900 Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3' 3' 3' _____

Length 100' 100' 100' _____

Grade 0" 0" 0" _____

Stone Depth E-2-Flow _____

Layout to be followed by installer:

Improvements Permit By M. E. Jount, Jr. Installer Robert Blackley

Certificate of Completion By Johnny B. Clark Date of Inspection 9-3-04 10-6-05

* 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.