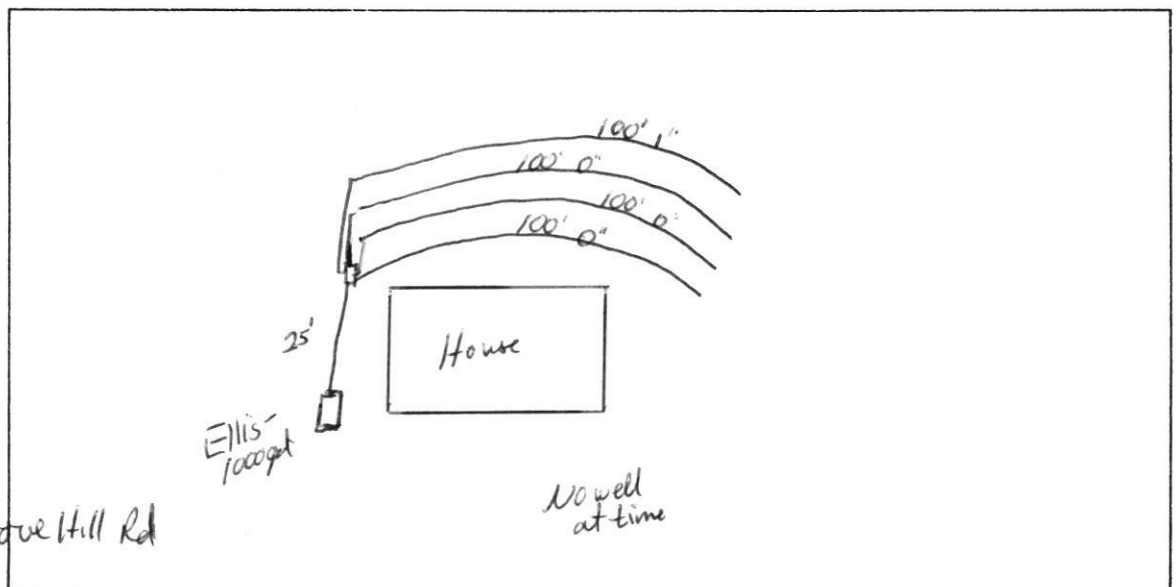
NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



# GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor John Foster Homes Date 10-21-05 S.R. No. 1627

Location/Address Moss Ledford Rd.

Subdivision/Mobile Home Park Name Mayfield Meadows Lot Size

Permit No. # 05261 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 ok No. Lines 4

Nitrification Field 1200 Sq. Ft.

| Lines: | 1 | 2 | 3 | 4 | 5 | 6 |
|---|---|---|---|---|---|---|
| Width | 3' | 3' | 3' | 3' | | |
| Length | 100' | 100' | 100' | 100' | | |
| Grade | 0" | 0" | 0" | 1" | | |
| Stone Depth | 12" | 12" | 12" | 12" | | |

Layout to be followed by installer:

* Sketch on back

Improvements Permit By David Cumbee Installer John Aysue

Certificate of Completion By David Cumbee Date of Inspection 3-15-06

* 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.