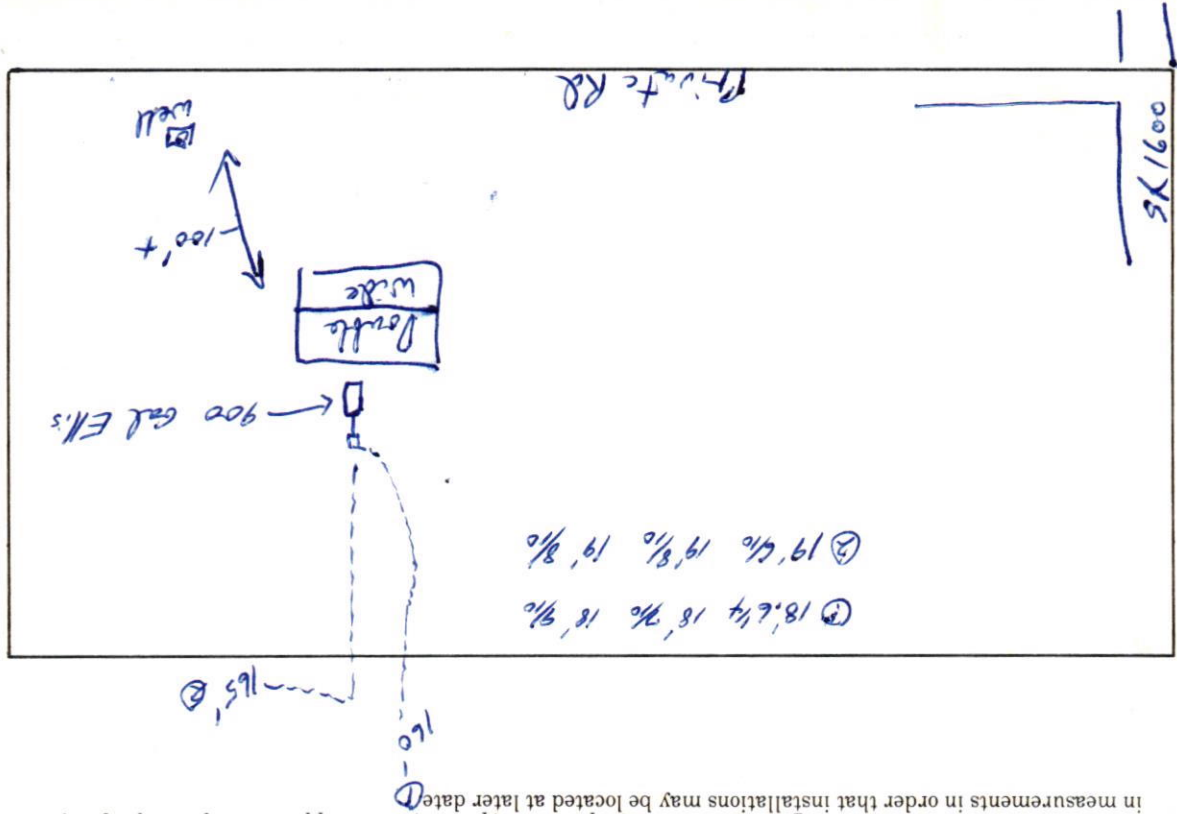


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



0045

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Clarence & Brenda Peace Date 10-8-86 S.R. No. 1600

Location/Address Rt. 3 Oxford, N.C.

Subdivision/Mobile Home Park Name Pine Tree Hollow Lot Size 1.33 Acres

Lot No. 3

New System ☒ Repair ☐

House ☐ Mobile Home ☒ Business ☐

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

Water Supply: Private ☒ Approved ☐

Semi-Public ☐ Unapproved ☐

Public ☐ None ☐

Nitrification System:

Tank Size 900 gal.

Distribution Box yes No. Lines 2 or 3

Nitrification Field 320-960 Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3' 3' _____

Length 160' 165' _____

Grade 3" 3 3/4" _____

Stone Depth 12" 12" _____

Layout to be followed by installer:

Improvements Permit By Charles R. Noblin Installer Tom Wiskercom - Vance Co.

Certificate of Completion By Charles R. Noblin Date of Inspection 10-16-86

* 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.