

NOW EXPIRED

PERMIT NUMBER 2570

GRANVILLE - VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT AND OPERATION PERMITS

COUNTY: <u>Vance</u>	TAX NO. <u>Diamond Dr.</u>	TYPE OF ESTABLISHMENT			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
OWNER: <u>Elizabeth Parker</u>		RESIDENCE ☒ BUSINESS ☐ OTHER ☐	NUMBER OF BEDROOMS: <u>3</u>	NUMBER OF OCCUPANTS: <u>5</u>	
APPLICANT: <u>same</u>		WATER SUPPLY			
APPLICANT'S ADDRESS:		PUBLIC ☐	WELL ☒	OTHER ☐	
PROPERTY ADDRESS/LOCATION: <u>Pool Rock Plantation</u>		TYPE OF WASTEWATER SYSTEM			*THE IMPROVEMENTS PERMIT MUST BE ATTACHED TO A CONSTRUCTION AUTHORIZATION BEFORE OBTAINING BUILDING PERMIT OR OTHER CONSTRUCTION PERMITS AND BEFORE A WASTEWATER SYSTEM IS INSTALLED.
SUBDIVISION: <u>Pool Rock</u>		DESCRIPTION	INITIAL INSTALLATION	REPAIR	
LOT NUMBER: <u>4</u>		DESIGN FLOW:	<u>360</u>		
		LTAR:	<u>.35</u>		
REFERENCE SKETCH (SEE PLAT FOR DETAILS) <u>System may require pump. Layout to be determined when lot cleared. Call Health Dept. before any construction.</u>		ABSORPTION AREA:	<u>1028</u>		
		TRENCH WIDTH:	<u>3</u>		
		TRENCH SPACING:	<u>9'</u>		
		TOTAL TRENCH LENGTH:	<u>340</u>		
		NUMBER OF TRENCHES:	<u>4-6</u>		
		GRAVEL DEPTH:	<u>12"</u>		
		TANK SIZE:	<u>1000</u>		
		CONDITIONS:			
IMPROVEMENT PERMIT				DATE:	*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USE CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.
FOR: ISSUED BY: <u>Walter T. Vaughn RS</u>				<u>6-22-2000</u>	
OPERATION PERMIT				DATE:	
SYSTEM INSTALLED BY:					
ISSUED BY:					