

FRANKLIN COUNTY HEALTH DEPARTMENT

130

PERMIT NUMBER:	DATE:		
APPLICANT: IMPROVEMENTS PERMIT 07.10.95	OWNER:	SIZE: .71A	
ALLEN ERICK PO BOX 719 YOUNGSVILLE NC 27596 TELEPHONE: 522-7944	ALLEN ERICK PO BOX 719 YOUNGSVILLE NC 27596		
COMMENT:	CONTRACTOR: Thurman Johnson		
LOCATION / DIRECTIONS:			
ALLEN ACRES #17			
FEE:		SIGNATURE OF OWNER OR AUTHORIZED AGENT:	
100.00 10757			

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

MILLS 900 11-13-95

#BEDRMS 3	DISPOSAL	OTHER	TYPE. SYS C
SZ. TANK 900	SZ. CHAMB	NITRIFI 3X 300	OPER. REQ W
SITE. LOC			

REMARKS: *Shallow System * System must be 10' from property line, 5' from these foundations, and 100' from wells.

*Existing brush pile must be pushed back to property line

Repair

Ridge

HOUSE

well Area

W

DATE. ISSUED 9/19/95

EH SPECIALIST

DATE. APPROVED 3-27-96

EH SPECIALIST