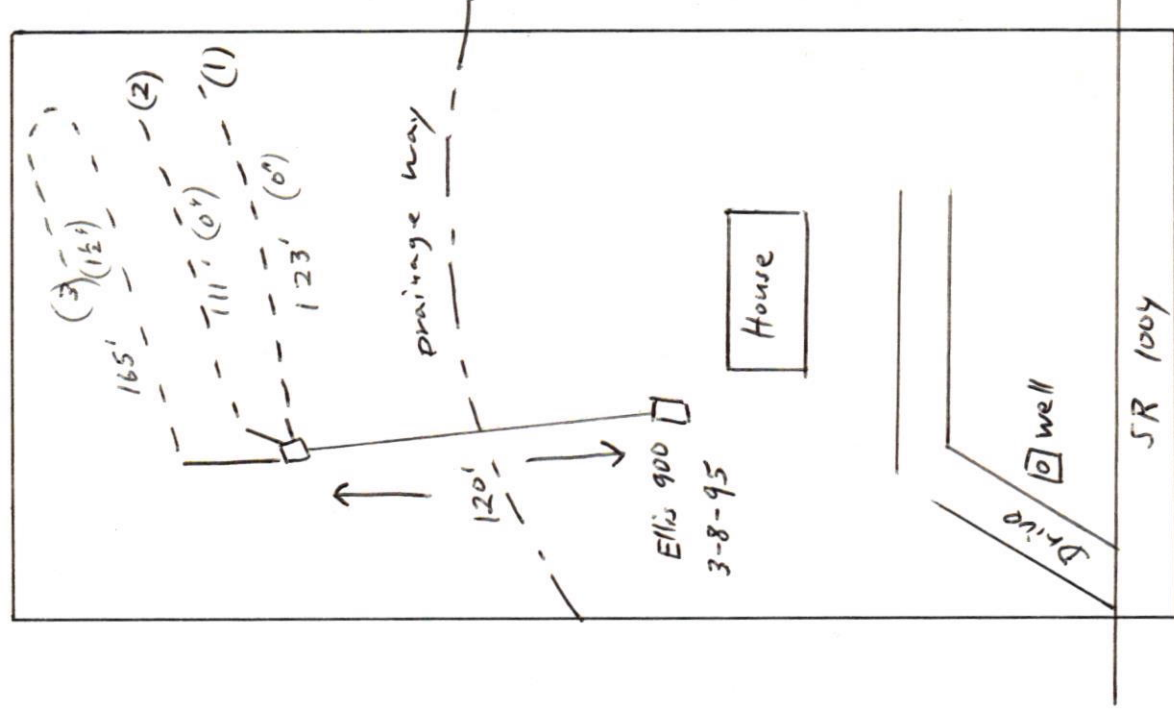


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



SR 1004

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor William Boten Date 5/1/95 S.R. No. 1004

Location/Address SR 1004 near intersection SR 1155

Subdivision/Mobile Home Park Name _____ Lot Size 2.63 acres

Permit No. # 1069 Lot No. _____

New System ☒ Repair _____

House ☒ Mobile Home _____ Business _____

No. Bedrooms 3 No. People 3 No. Toilets _____

Water Supply: Private ☒ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 900 gal.

Distribution Box ☒ No. Lines 3

Nitrification Field 1200 Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3' 3' 3' _____

Length 123' 111' 165' _____

Grade 0" 0" 0" _____

Stone Depth 12" 12" 12" _____

Layout to be followed by installer:

Improvements Permit By Bobby E. Green Installer Jerry Light

Certificate of Completion By Charles R. Noblin Date of Inspection 5/1/95

* 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.