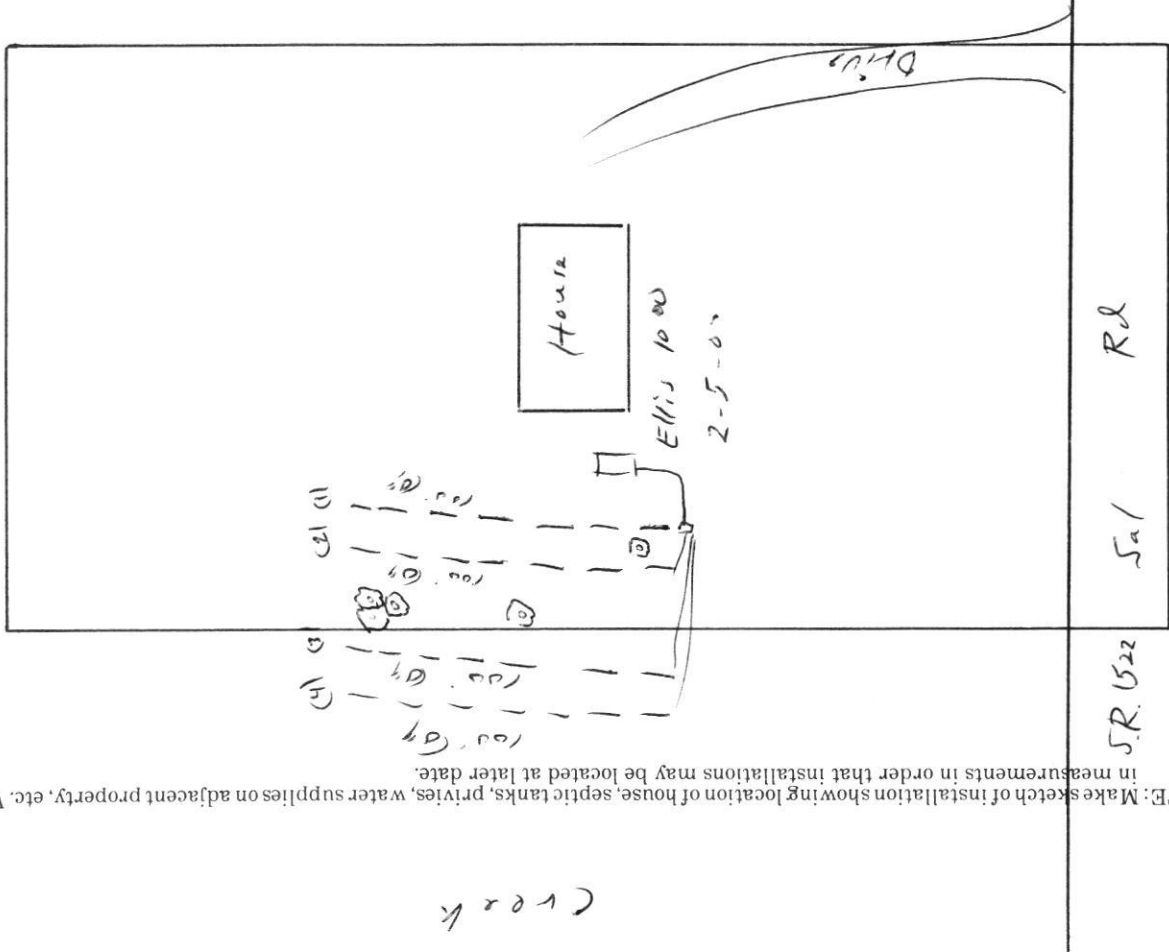


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.

Creek



Oxford →

GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Todd Stevenson Date 5-13-02 S.R. No. 1522
Location/Address Salem Road
Subdivision/Mobile Home Park Name Salem Springs Estate Lot Size 6 acres
Permit No. # 1881 Lot No. 3+4

New System ☒ Repair _____
House ☒ Mobile Home _____ Business _____
No. Bedrooms 4 No. People _____ No. Toilets _____
Water Supply: Private ☒ Approved _____
Semi-Public _____ Unapproved _____
Public _____ None _____

Nitrification System:

Tank Size 1000 gal.
Distribution Box ☒ 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' 0' _____
Stone Depth 12" 12" 12" 12" _____

Layout to be followed by installer:

Improvements Permit By Eddie Yount Installer Norman Clifford
Certificate of Completion By Eddie Yount Date of Inspection 5-13-02

* 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.