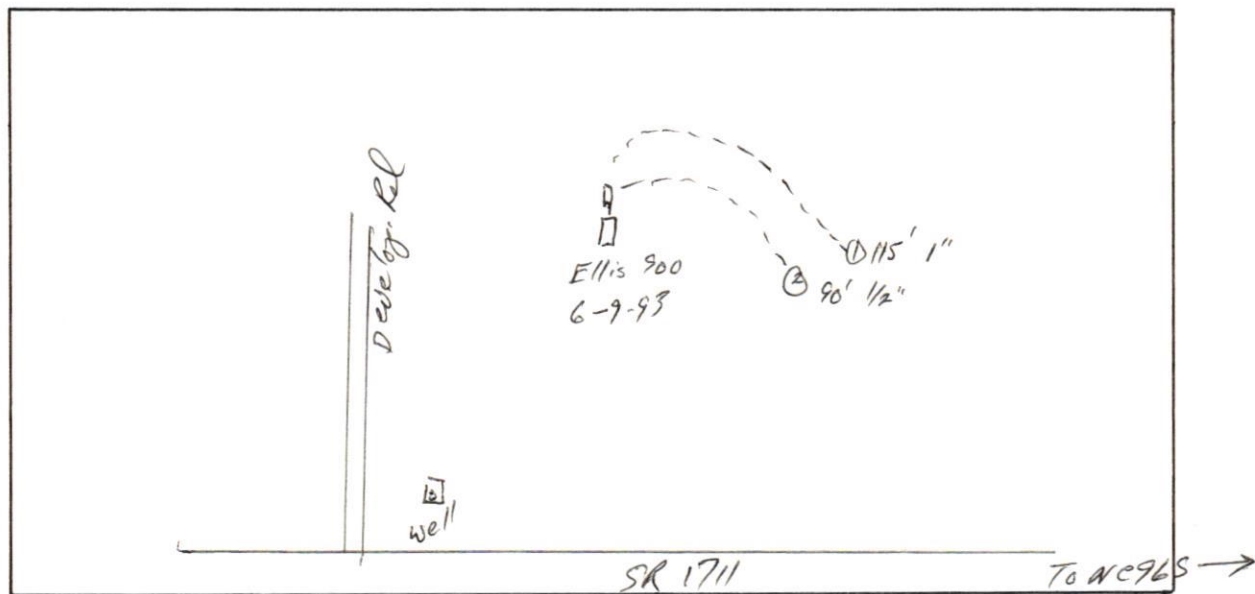


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



297 GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Sandra Stacy Date 6-22-93 S.R. No. 1711

Location/Address Wayside Farm Rd - Creedmoor, N.C.

Subdivision/Mobile Home Park Name _____ Lot Size _____

Permit No. # Wayside Farm Lot No. 1

New System ☒ Repair _____

House _____ Mobile Home ☒ Business _____

No. Bedrooms 4 No. People 3 No. Toilets _____

Water Supply: Private ☒ Approved _____

Semi-Public _____ Unapproved _____

Public _____ None _____

Nitrification System:

Tank Size 900 gal.

Distribution Box 400 No. Lines 2

Nitrification Field 300' - 900 Sq. Ft.

Lines: 1 2 3 4 5 6

Width 3' 3' _____

Length 115' 90' _____

Grade 1" 1/2" _____

Stone Depth 18" 18" _____

Layout to be followed by installer:

Improvements Permit By Charles R. Notten Installer Robt & Ph. H. Blackley

Certificate of Completion By Charles R. Notten Date of Inspection 7-27-93

* 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.

→ To NC 96

SR 1211

Well

200. Rd

6-9-93
E11.5 900
② 98' 1/2"
115' 1"

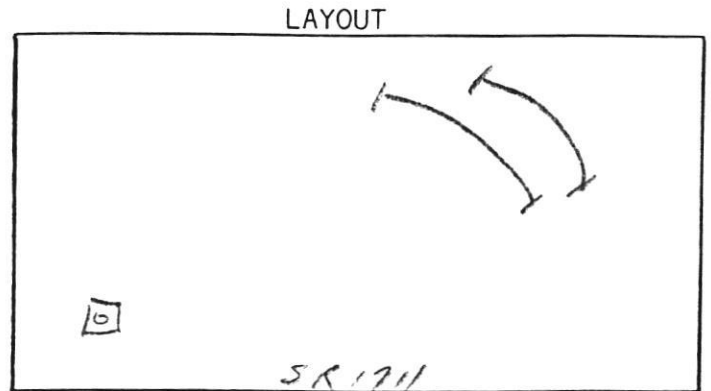
GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT
IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION

OWNER/AGENT Sandra Stacy
LOCATION Wayside Farm Rd - Crandmoor, NC. STATE ROAD NO. 1711
SUBDIVISION NAME Wayside Farm LOT NO. 1

SYSTEM DESIGNED FOR:

NEW SYSTEM ☒ REPAIR ☐ RESIDENCE D/W BUSINESS ☐ OTHER ☐
NO. BEDROOMS 4 NO. OCCUPANTS 3 WATER SUPPLY: INDIVIDUAL ☒ PUBLIC ☐
LOT SIZE 1.2 ACRES F ☐ L ☐ B ☐ R ☐
SEPTIC TANK 900 GALLONS PUMP TANK ☐ GALLONS DISTRIBUTION box
NITRIFICATION FIELD 900 SQUARE FEET NUMBER OF LINES 3
LENGTH OF LINES 300' WIDTH OF LINES 3' STONE DEPTH 12"

CONDITIONS _____



NOTICE: The above are minimum specifications for a sewage disposal system on the above captioned property. This permit is subject to compliance with local zoning and building regulations and all the provisions of the Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal of the North Carolina Administrative Code. This permit may not be altered without written permission from a representative of the Granville-Vance District Health Department. System must be installed within 5 years of date of issuance. This permit is subject to revocation if site plans or the intended use changes.

I understand the requirements of this permit and the information I have provided is accurate to the best of my knowledge.

OWNER/AGENT Sandra Stacy DATE 6-22-93
IMPROVEMENT PERMIT BY: Chas R. Woffin DATE 6-22-93
CERTIFICATE OF COMPLETION BY: Chas R. Woffin DATE 7-27-93
SYSTEM INSTALLED BY: Robert Blackley

NOTICE: This approval indicates that the installation complies with all applicable state and local regulations, but shall in no way be taken as a guarantee that the system will function satisfactorily for any given period of time and the Granville-Vance District Health Department will not be held responsible for a malfunctioning system.