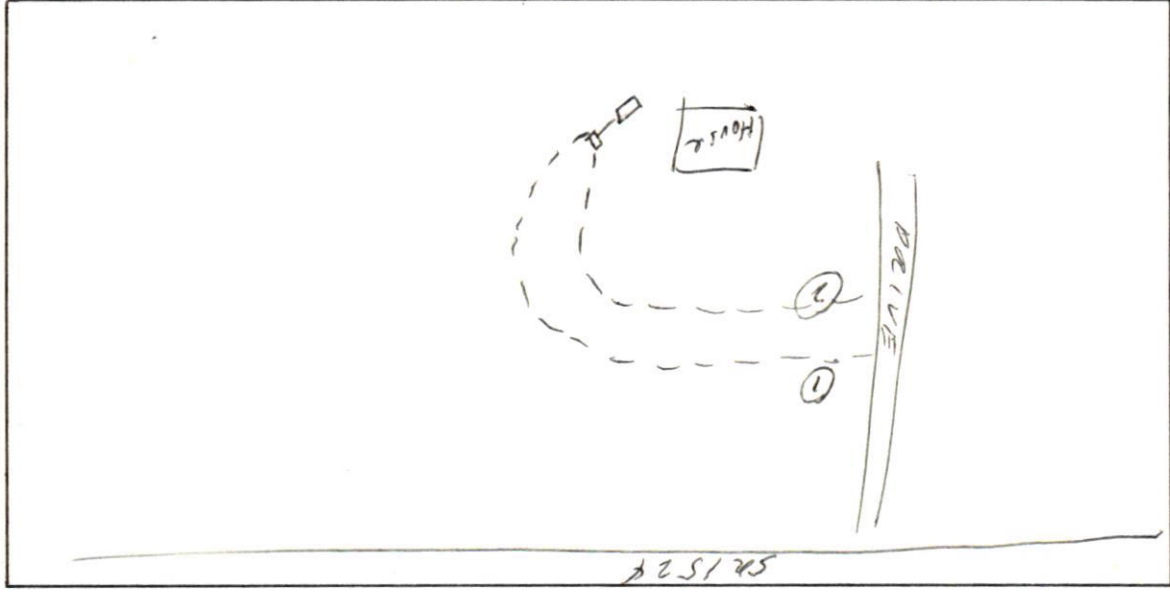


NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



1029 GRANVILLE-VANCE HEALTH DEPARTMENT—Sewage Disposal Record

Owner or Contractor Robert + Mary Carter Date 6-22-88 S.R. No. 1524
 Location/Address Rt. 3, Oxford, N.C.
 Subdivision/Mobile Home Park Name Parkman Woods Lot Size 4.1 ac.
 Lot No. 19 + 20

New System ☒ Repair _____
 House ☒ Mobile Home _____ Business _____
 No. Bedrooms 3 No. People 3 No. Toilets 2 1/2
 Water Supply: Private ☒ Approved _____
 Semi-Public _____ Unapproved _____
 Public _____ None ☒

Nitrification System:

Tank Size 1000 gal.
 Distribution Box ☒ No. Lines 2
 Nitrification Field 320 - 960 Sq. Ft.

Lines:	1	2	3	4	5	6
Width	<u>36</u>	<u>36</u>	_____	_____	_____	_____
Length	<u>160</u>	<u>160</u>	_____	_____	_____	_____
Grade	<u>1</u>	<u>1</u>	_____	_____	_____	_____
Stone Depth	<u>12</u>	<u>12</u>	_____	_____	_____	_____

Layout to be followed by installer:

Improvements Permit By C. R. Noblin Installer Judy Hart
 Certificate of Completion By James C. Perrott Date of Inspection 12-16-88

* 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.