

GRANVILLE-VANCE DISTRICT HEALTH DEPARTMENT IMPROVEMENT AND OPERATION PERMITS

COUNTY:	TAX NO.	TYPE OF ESTABLISHMENTS			*THIS PERMIT SHALL BE ACCOMPANIED BY A LAYOUT SHOWN ON A PLAT, INCLUDING SYSTEM REQUIREMENTS.
Vance	SR. NO.	RESIDENCE ☒ BUSINESS ☐ OTHER ☐	NUMBER OF BEDROOMS: <u>3</u>	NUMBER OF OCCUPANTS: <u>1</u>	
	APPLICANT: Elsie Pounce	WATER SUPPLY PRIVATE	WELL ☒ PUBLIC ☐	OTHER ☐	
APPLICANT'S NAME & ADDRESS: 1750 Spring Valley Rd. E. Habean, AL 37537		TYPE OF WASTEWATER SYSTEM	INITIAL INSTALLATION II	REPAIR II	*THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF THE INTENDED USES CHANGE FROM THOSE SHOWN ON THE IMPROVEMENT PERMIT. CHANGES SHALL REQUIRE HEALTH DEPARTMENT APPROVAL.
PROPERTY ADDRESS/LOCATION: Sue		DESIGN FLOW:		360 GPD	
SUBDIVISION:		LTAR:			
LOT NUMBER:		ABSORPTION AREA:		1200 sq. ft. EXISTING	PERMIT VALID FOR: 5 YEARS ☒ YES ☐ NO <i>OK</i>
REFERENCE SKETCH (SEE PLAT FOR DETAILS)		TRENCH WIDTH:			
TRENCH DEPTH:					
		TRENCH SPACING:			NO EXPIRATION ☒ YES ☐ NO
		TOTAL TRENCH LENGTH:		300'	
		NUMBER OF TRENCHES:		2	
		GRAVEL DEPTH:		accepted	
		TANK SIZE:		1000 GPM	
PUMP TANK SIZE:					
DISTRIBUTION DEVICE:				15' x	

IMPROVEMENT PERMIT

DATE: 7/6/17

FOR: Elsie Pounce

ISSUED BY: Chris Hooper

CONSTRUCTION AUTHORIZATION FOR IMPROVEMENT PERMIT# 9012

Unless otherwise indicated, the same conditions above apply regarding system type, layout, location and installation requirements.

(The wastewater system cannot be installed until authorization is signed)

Comments: Set new tank, tie into existing distribution. Permit 110 202-442-5263 for
pic construction conference further instructions

Date: 7/6/17 Environmental Health Specialist: Chris Hooper

Construction Authorization Addendum ☐ Yes ☒ No

OPERATION PERMIT

DATE: 8/29/18

SYSTEM INSTALLED BY: CBS

ISSUED BY: Chris Hooper

PERFORMANCE, MONITORING, MAINTENANCE AND OPERATION
AS REQUIRED BY RULE .1961

SEWAGE DISPOSAL SYSTEM INSTALLATION REVIEW

OWNER Elsie Peace PERMIT # 9012 DATE 8/29/10
 CONTRACTOR CRS WEATHER CONDITIONS hr
 SOIL WETNESS cl

SEPTIC AND PUMP TANK INSPECTION

SEPTIC TANK

Manufacturer Elfr
 Date of Manufacture 6-8-10
 Stamp ✓
 Capacity 1000
 Tee ✓
 Baffle ✓
 Sealant ✓

INITIAL

CRS

DATE

8/29/10

PUMP TANK

Manufacture _____
 Date of Manufacture _____
 Stamp _____
 Capacity _____
 Sealant _____
 Manhole _____
 Draw Down Test _____

MECHANICAL INSPECTION

PUMP

Manufacturer and Model # _____
 Control Panel _____
 Alarm _____
 Electrical Connection _____

NITRIFICATION/DISTRIBUTION AND DRAINFIELD INSPECTION

DISTRIBUTION BOX

Level ✓
 Equal Distribution ✓
 Other _____

CRS
CRS

8/29/10
8/29/10

DISTRIBUTION MANIFOLD

Pipe Size _____
 Gate Valves _____
 Other _____

OTHER DISTRIBUTION

Type _____

NITRIFICATION LINES

Trench Width _____
 Trench Length _____
 Trench Grade _____
 Stone Depth _____

LINE 1

3'
100'
0%
12"

LINE 2

2'
100'
1%
12"

LINE 3

3'
100'
1%
12"

LINE 4

LINE 5

LINE 6

COMMENTS:

R-6-GTR