Warren County Health Department

SEPTIC TANK — IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System — G. S. Chapter 130 — Article 13C)

Property Owner: MR. William GREEN Date: 11-13-80

Address: Rt 1 Box 179 MACON N.C. 27551

Location of Property OAKVille Rd.

Permission is hereby granted to install a Septic Tank and Secondary Treatment System ✓, Major Repairs to Septic Tank ____, Alteration or Major Repairs to Secondary Treatment System ____, in accordance with regulations governing same as set forth by the Warren County Board of Health.

House ____ Mobile Home ✓ Business ____ Other ____

W. Closets	1	Urinals	—	Number Bedrooms	2
Lavatories	1	Sinks	1	Number in Family	2
Tubs	1	Garbage Disposal	—		
Extra Showers	—	Automatic Washer	1		

Septic Tank Capacity 1000 Gals. Distribution Box ✓ Grade Boards 6"

Nutrification Field 750 Total Sq. Ft. 2 Line(s) 125 Ft. Long 3 Ft. Wide

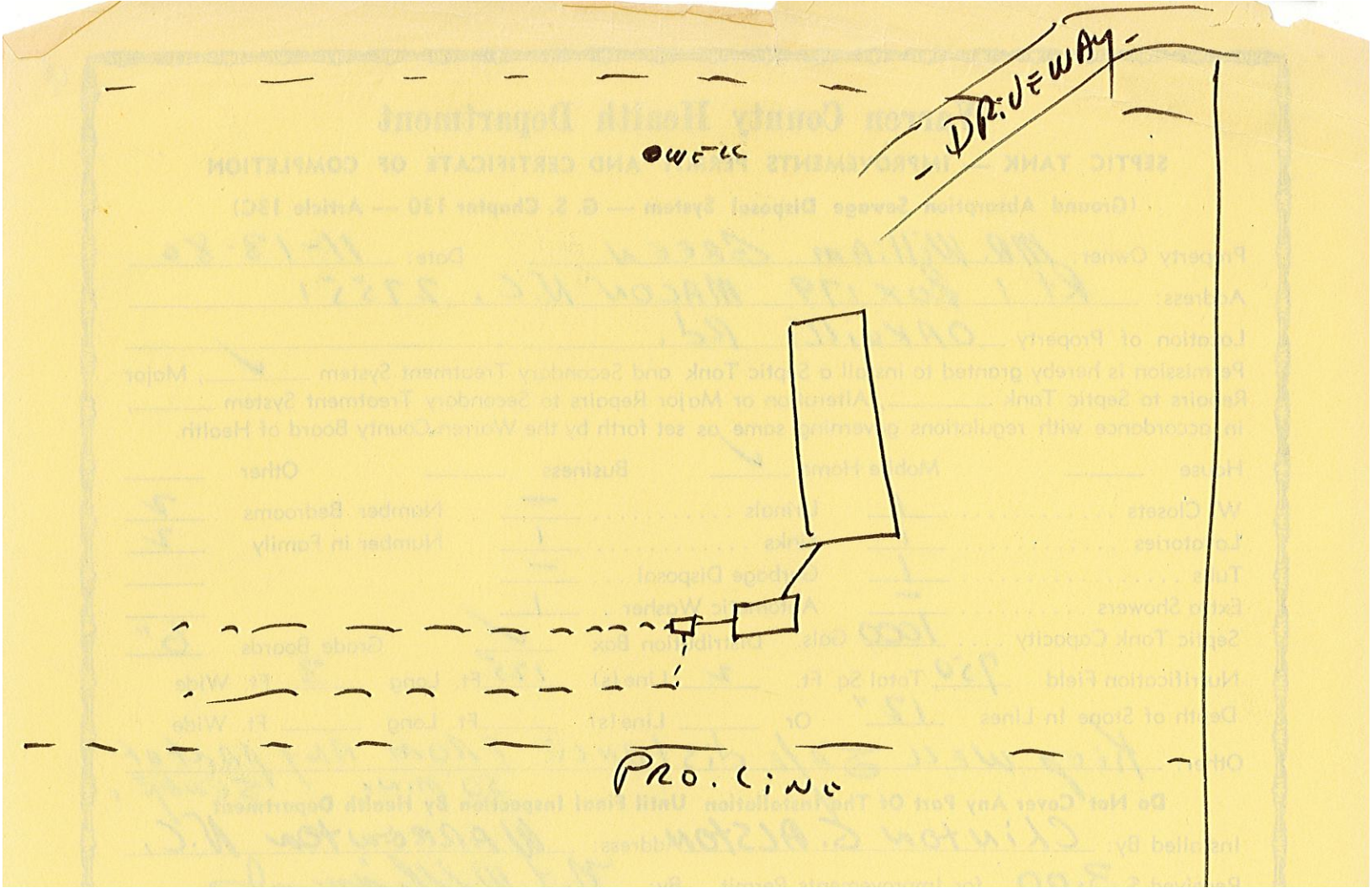
Depth of Stone In Lines 12" Or ____ Line(s) ____ Ft. Long ____ Ft. Wide

Other: Keep well safe distance FROM ANY PART OF 50' MIN. SQUARE

Do Not Cover Any Part Of The Installation Until Final Inspection By Health Department

Installed By: Clinton G. ALSTON Address: WARRENTON N.C.

Received $ 3.00 for Improvements Permit By: [illegible]


DRIVEWAY
WELL
PROPERTY LINE