FRANKLIN COUNTY HEALTH DEPARTMENT

10.00
12.00

PERMIT NUMBER:	DATE:		
5431I IMPROVEMENTS PERMIT	12.13.93	18019	SIZE: 1A

APPLICANT:	OWNER:
WIGGINS GUY RT 7 BOX 288 LOUISBURG NC 27549 TELEPHONE: 556-1763	BAILEY TONY
COMMENT: SINGLE FAMILY DWELLING	CONTRACTOR: JAMES BAILEY
LOCATION / DIRECTIONS: BEAVER CREEK #9	
FEE: 80.00 4651	SIGNATURE OF OWNER OR AUTHORIZED AGENT:

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

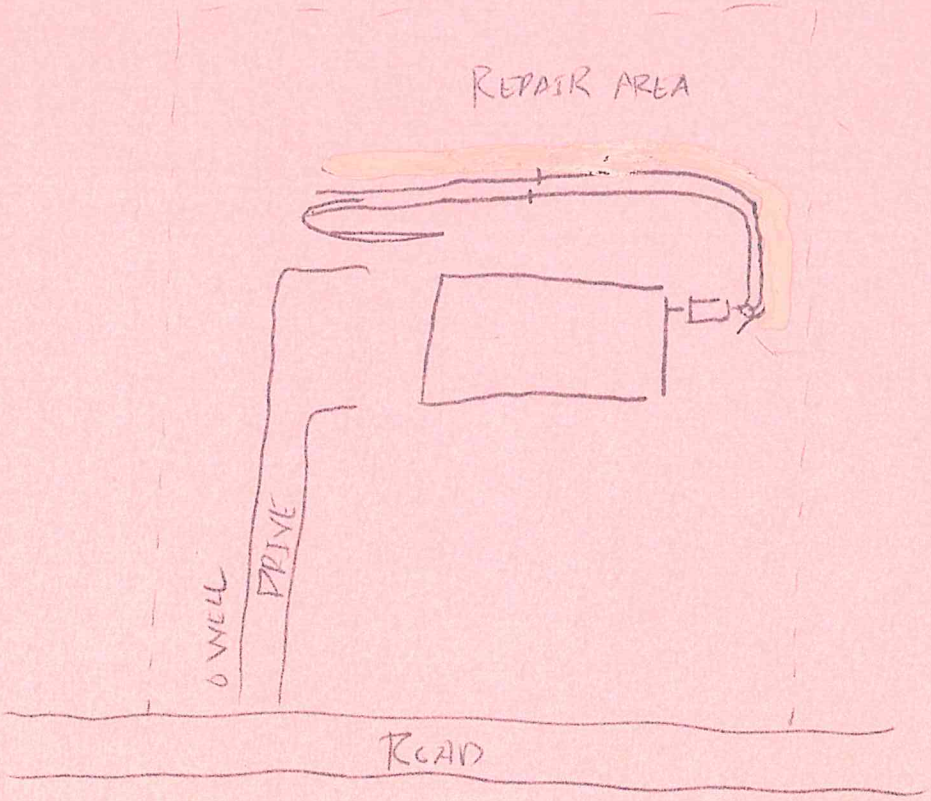
MILLS 1000 STB 858
3-2-94

#BEDRMS 3 DISPOSAL NO OTHER — TYPE.SYS C

SZ.TANK 1000 SZ.CHAMB — NITRIFI 3'x35' OPER.REQ N

SITE.LOC

REMARKS: * KEEP SYSTEM AS SHALLOW AS POSSIBLE *



DATE.ISSUED 12/17/93 EH SPECIALIST A Pugh

DATE.APPROVED 4-20-94 EH SPECIALIST E Glenn Johnson

SEPTIC PERMIT APPLICATION
Franklin County Health Department
Phone 496-8100

TxRECN#: 18019
PIN#:

SPermit#: 5431I 0
BPermit#: 2690
TMAP: F09B 00 009

Township: Harris
Subdivision: Beaver Creek
Prop.Address:

Zone: AR
Lot: 9 Lot Size: 1A
St.Road: 401

Applicant: Wiggins, Guy
Address: Route 7 Box 288
C/S/Z: Louisburg, NC 27549
Phone: (919) 556-1763
SF/Building Permit: Y
Bedroom#: 3
Commercial: NO
Public Sewer: NO
Public Water: NO
Type Facility: SFD
SPermit $: 80.00
Notes:

Owner: Bailey, Tony
Address:
C/S/Z:

Mobile Home Permit:
Bath#: 2.0
Industrial: NO
Town: NO

Est.Daily Waste Flow: 360
Date: 12/13/93 Rec#: 4651

ZONING PERMIT
Department of Planning & Development

Use of Property: Single Family Dwelling
Zoning District: AR
Setback Required: Front:30 Rear: 25 Side: 10

D Wood
Zoning Adminstrator

I certify that all the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized County representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Signature of Owner/Authorized Agent

12/13/93
Date

Call the Health Department (496-8100) between 8:00 AM and 9:00 AM on Monday-Friday to schedule an appointment with an environmental health specialist to evaluate your lot. He/she will show you where to locate the well and septic system, in relation to the desired dwelling location and any property lines. If approved, an improvements permit will be issued. After the septic tank has been installed and approved, the Sanitarian will issue a certification of completion.

PER005B