

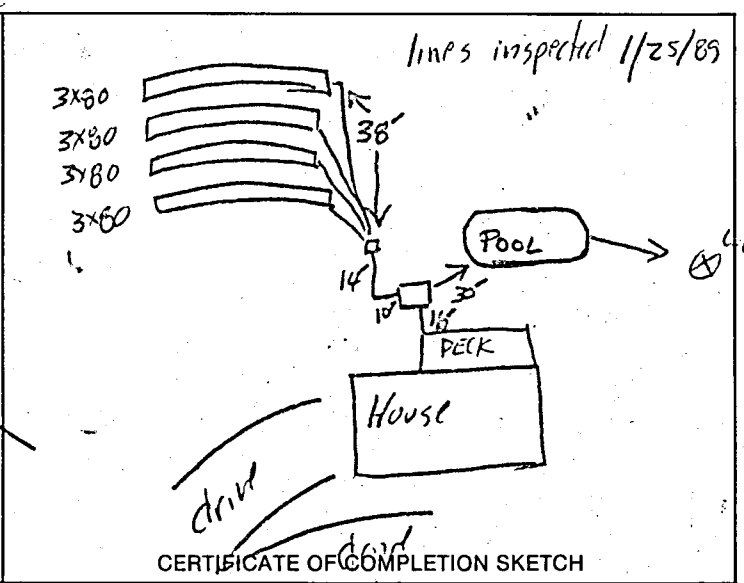
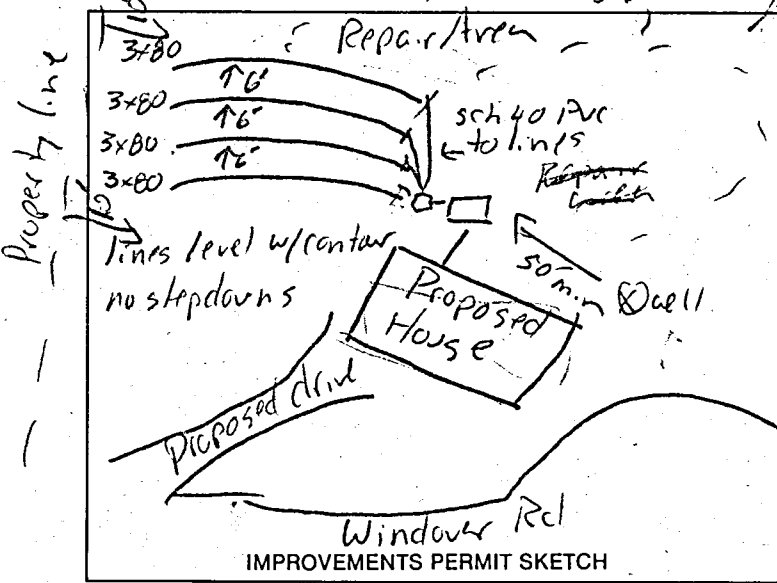
TRANSYLVANIA COUNTY HEALTH DEPARTMENT

Sewage Disposal System Improvements Permit and Certificate of Completion Sewage Treatment and Disposal Rules (Article 11 of Chapter 130A of the General Statutes of North Carolina)

8574-42-2407-000

Date: 8/5/88 Receipt No.: 0840  
 Owner/Agent: Fred Grayley Phone No.: 884-4919  
 Address: P.O. Box 1102, Brierley, NC 28712  
 Location of Property: Island Ford Rd on rt before Walnut Hollow Rd.  
to end of Windover Rd on left

Subdivision: Windover Farms Lot Number: 23 Section: I Plat of Property: YES  NO   
 Type of Facility: HOUSE  MOBILE HOME  BUSINESS   
 Number of Bedrooms: 4 Number of Bathrooms: 2 1/2 Estimated Sewage Flow: 480 g/d  
 Type of Water Supply: Individual — DRILLED WELL  SPRING ; Public/Community   
 Lot Size: 15 ac Easements, Right-of-Ways, etc. none  
 Signature/Authorized Agent: Fred Grayley Date: \_\_\_\_\_



NEW SYSTEM  REPAIR   
 Size of Tank: 1000 Distribution Box: YPS  
 No. of Lines: 4 Width: 3 Linear Ft.: 80  
 Square Ft.: 960 Maximum Trench Depth: 74"  
 Application Rate: 0.5 gal/ft<sup>2</sup>/day

I understand and agree to install the septic tank system as specified on this Improvements Permit. Permit is void if any changes are made without consent of the Health Department Representative and/or if any false information is supplied in making Improvements Permit.

Signature/Authorized Agent: Fred Grayley Date: 8/5/88  
 By: John W. R. S. Date: \_\_\_\_\_

Building Contractor: Self  
 System Installed by: Self

This is to certify that system is installed according to Rules and Regulations but is not a guarantee that it will function satisfactorily for any given period of time.  
 By: John W. R. S. Date: 1/26/89

EXISTING SYSTEM: ADDITION  REMODELING

System functioning properly at time of inspection and is approved for proposed additions/renovations.  
 By: \_\_\_\_\_ Date: \_\_\_\_\_