

Transylvania County Health Department
IMPROVEMENTS PERMIT / CERTIFICATE OF COMPLETION
Subsurface Sanitary Sewage Systems

(Article 11 of Chapter 130A of the General Statutes of North Carolina)

IMPROVEMENT PERMIT IS VALID FIVE (5) YEARS FROM DATE OF ISSUANCE

Date: Jul 30, 1993 Tax ID No.: T 36-2 009
Sherrill E. Woods Receipt No.: 1477
Owner/Agent: _____ Phone No.: 885-2015
Address: 3200 Eo. Greenville Hwy., Brevard, N. C.
Location of Property: E. Fork Road

Subdivision: _____ Lot Number: _____ Section: _____ Plat of Property: _____
Type of Facility: House Mobile Home Business Other Basement Yes No Basement Plumbing Yes No
Number of Bedrooms: 2 Number of Bathrooms: 2 Estimated Sewage Flow: 240
Lot Size: 48.4 ACRES Easements, Right-of-Ways, etc.: _____ Date Lot Recorded: _____
Type of Water Supply: Private: Drilled Well Spring Shared Supply Public/Community
Signature/Authorized Agent: [Signature] Date: 7-30-93

(See attached Drawing and comments)

Improvements Permit Sketch

(no changes)

Certificate of Completion Sketch

Nitrification trenches shall be installed on level grade with contour. Stepdowns permitted only when indicated.

New System Repair Addition
Size of Tank: 1000 gal Application Rate: .6
No. of Lines: 3 Width: 12" Linear Ft.: 180
Square Ft.: 400 Maximum Trench Depth: 15"
low side

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] _____
Signature/Authorized Agent Date
[Signature] _____
By Date
System is to Be large Diameter Pipe

Building Contractor: _____
System Installed by: Fisher

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.

[Signature] 10/8/93
By Date

EXISTING SYSTEM: Addition/Remodeling Relocation
Other _____

System functioning properly at time of inspection and is approved for proposed additions/renovations or other improvements.

By Date

Date: 9/23/93

Tax ID No: T-36-2-009

Receipt No: 1477

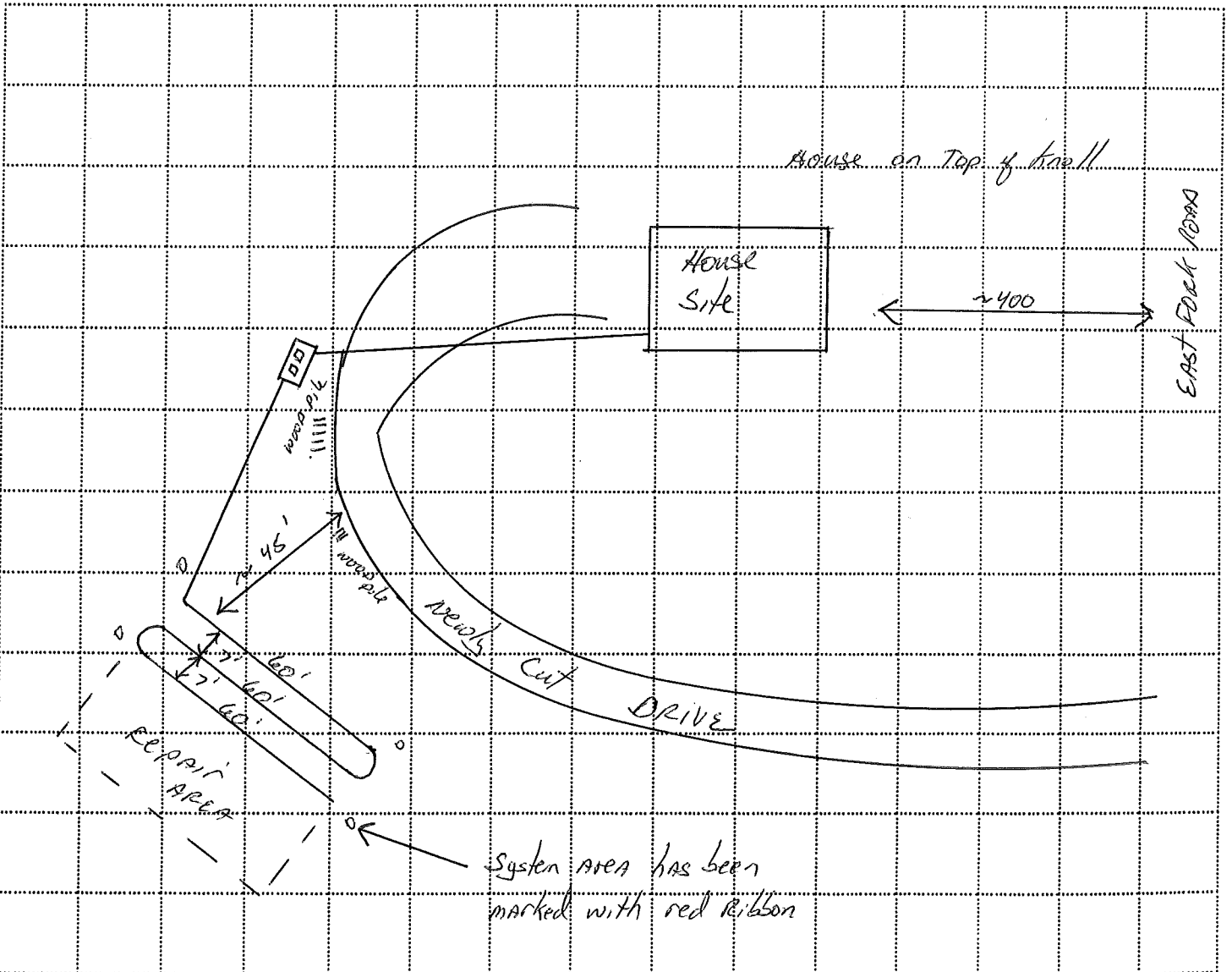
Owner/ Agent: Sherrill Woods

Phone No: 885-2015

Address: 3200 S. Greenville Hwy Breward

Location of Property: B East Fork Road

Subdivision: _____ Lot No: _____ Section: _____ Plat of Property: _____



Comments

- 1) 1" = 40'
- 2) keep trenches shallow 15" maximum depth
- 3) keep trenches on contour of land
- 4) keep well 100' or maximum feasible distance, but in no case less than 50' from any part of the system
- 5) system is large diameter gravity pipe