

324 Buckeye Ln. Knoxville 1868 0064 1827

Bakersville, 688-2371
Newland, 733-6031

TOE RIVER DISTRICT HEALTH DEPARTMENT

Environmental Health Section

Burnsville, 682-3003
District Office, 765-2239

Improvements Permit — Certificate of Completion
(Ground absorption Sewerage Disposal System - 10NCAC 10A .1934-.1968)

Owner Earl Loser County Avoy Permit No. _____
Location Seren Drills

Subdivision Name Section 7 Lot No. 32 SR No. _____
Section or Block No. _____

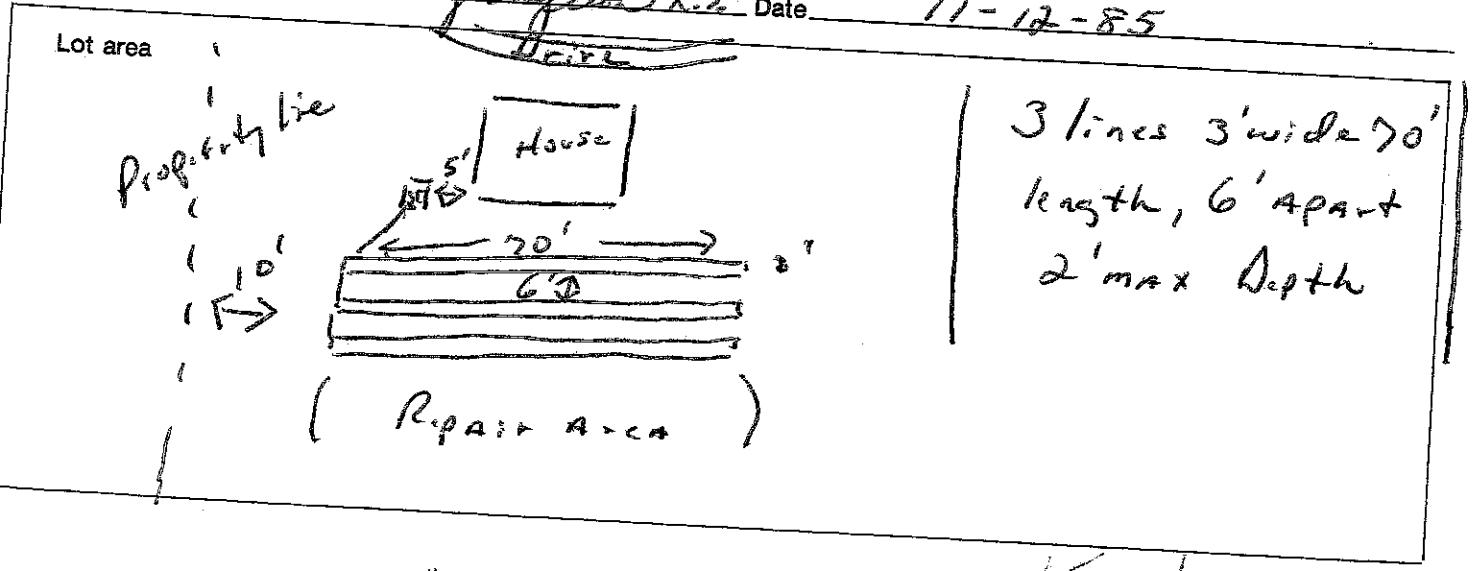
House () Mobile Home () Other _____
No. Bedrooms 3 No. Bathrooms 3 1/2 Garbage Disposal Unit Yes
Site—Suitable () Provisionally Suitable () Unsuitable () Soil Group III App. Rate ~~4~~ .60
Reason Unsuitable _____

Tank Size 1200 Nitrification field (sq. ft.) 600 Depth Stone in Lines 12"
Water supply - Spring () Well () Other () Community
Comments - Recommendations _____

I understand that this permit has been issued based on State Regulations and information supplied by me on the application for an improvements permit. I certify that all information furnished is true and correct.

Owner/ Representative _____ Date _____

Improvements Permit by Tommy Siefert R.E. Date 11-17-85



Certificate of Completion by Tommy Siefert R.E. Installed by Ken Harmon
Date 6-25-86

Final approval of this septic tank system by the Health Department shall indicate that this system has been constructed according to the regulations set forth in the Toe River District Health Department, sewerage disposal regulations and regulations adopted by the Division of Health Services. In no way, shall this be taken as a guarantee that the system will function satisfactorily for any given period of time.

TOE RIVER DISTRICT HEALTH DEPARTMENT
Environmental Health Section

PL 30.00

Burnsville, 682-3003
 District Office, 765-2239

Bakersville, 688-2374
 Newland, 733-6031

Improvements Permit — Certificate of Completion
 (Ground absorption Sewerage Disposal System - 10NCAG 10A .1934-.1968)

Owner Earl Loser County Avery Permit No. _____

Location Seven Devils SR No. _____

Subdivision Name Sec 7 Lot No. 32 Section or Block No. _____

House Mobile Home Other _____

No. Bedrooms 4 3 No. Bathrooms 7 3 1/2 Garbage Disposal Unit Yes

Site—Suitable () Provisionally Suitable Unsuitable () Soil Group III App. Rate .60

Reason Unsuitable _____

Tank Size 1200 Nitrification field (sq. ft.) 800 Depth Stone in Lines 12"

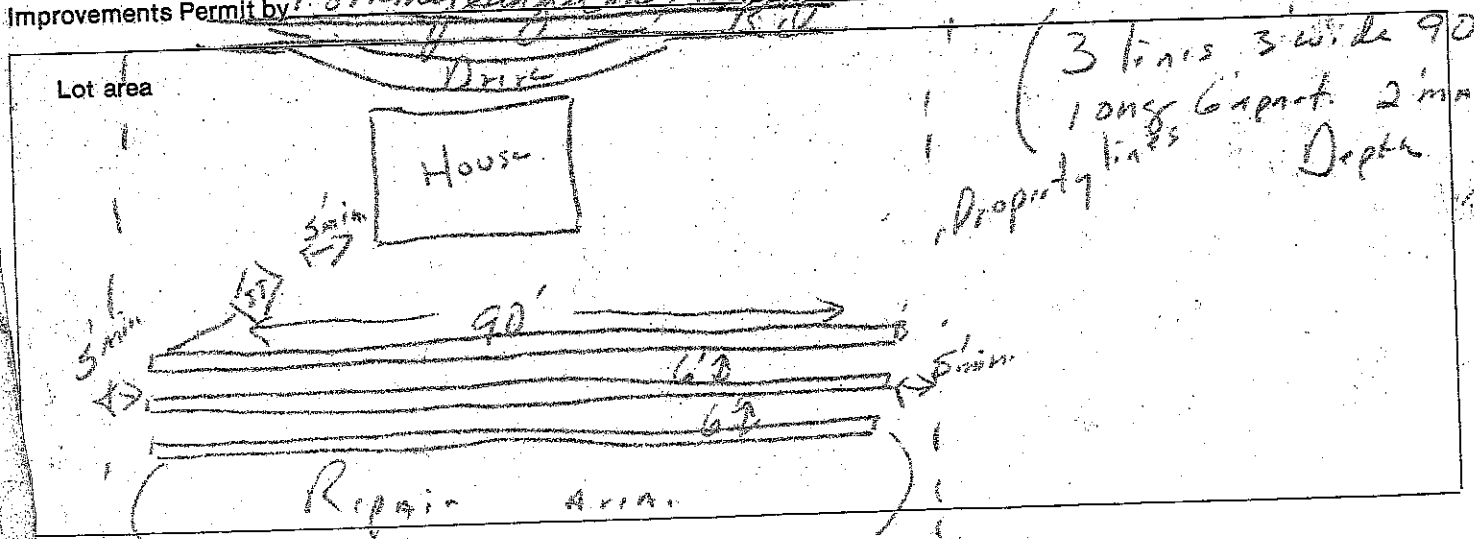
Water supply - Spring () Well () Other Community

Comments - Recommendations _____

I understand that this permit has been issued based on State Regulations and information supplied by me on the application for an improvements permit. I certify that all information furnished is true and correct.

Owner Representative M. White Date 11-12-85

Improvements Permit by Commerington Date 11-12-85



Installed by _____

Certification of Completion by _____ Date _____

Final approval of this septic tank system by the Health Department shall indicate that this system has been constructed according to the regulations set forth in the Toe River District Health Department, sewerage disposal regulations and regulations adopted by the Division of Health Services. In no way, shall this be taken as a guarantee that the system will function satisfactorily for any given period of time.