

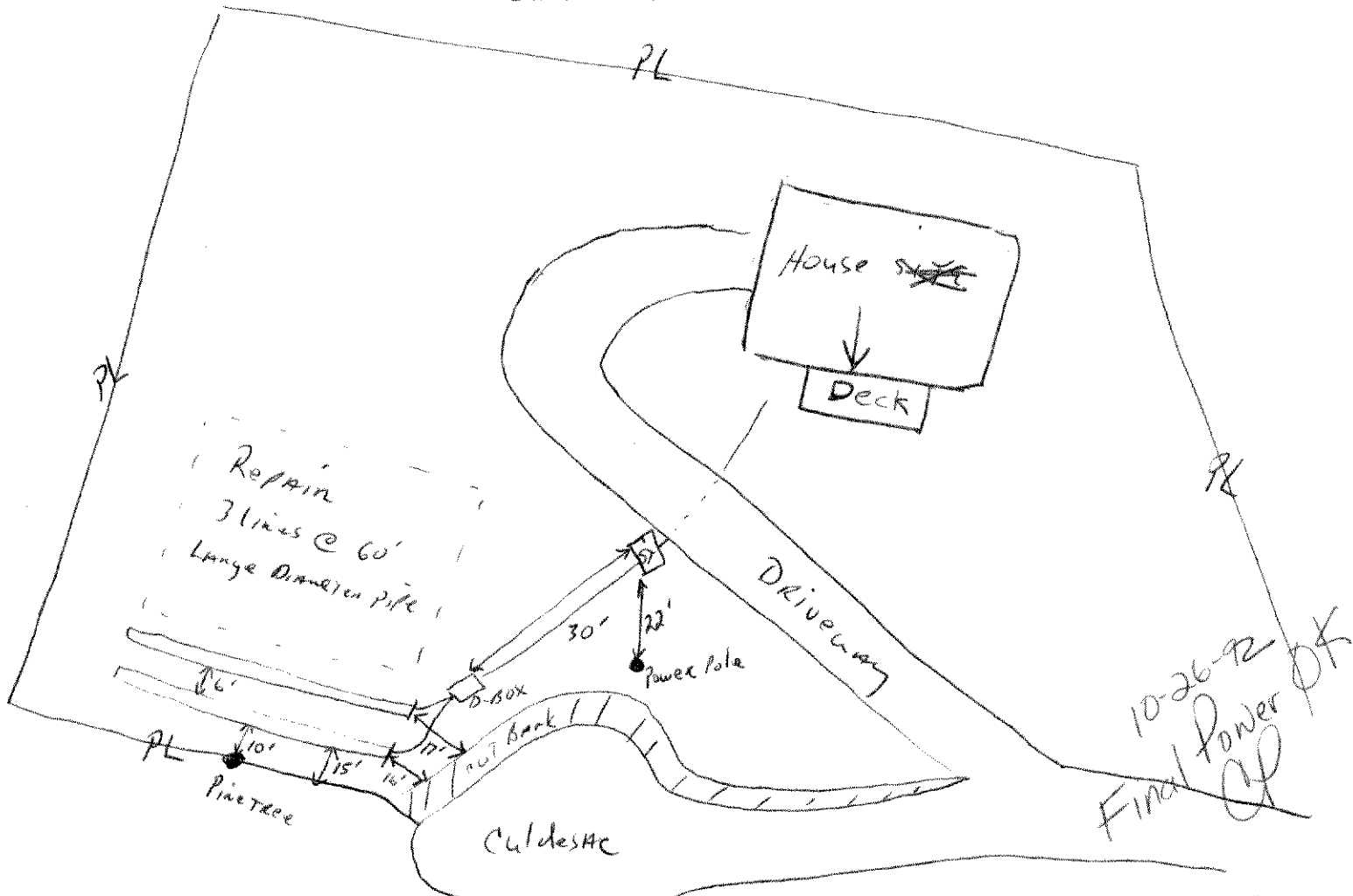
MACON COUNTY HEALTH DEPARTMENT
FRANKLIN, NORTH CAROLINA 28734 • (704) 369-9526

Certificate of Completion

NAME OF OWNER JEAN CHADL
TOWNSHIP FRANKLIN PARCEL# LOT # 9
LOCATION Hillside Subdivision
INSTALLER F.B. VISION PERMITTED 1-27-92

TYPE OF SYSTEM CONVENTIONAL WATER SOURCE: ☐ CITY
SIZE OF TANK STB 43 4-8-92 ☒ COMMUNITY
TRENCH BOTTOM DEPTH 18" ☐ INDIVIDUAL WELL / SPRING
DATE IMPROVEMENTS PERMIT ISSUED 1-27-92

DIAGRAM (Not to Scale)



A representative of the Macon County Health Department has inspected this septic system and finds that it conforms to state guidelines. The area designated as repair area is required for future use and can not be disturbed in any way. This certificate indicates that the septic system has been inspected; however, this certificate is not a guarantee.

DATE INSPECTED 5-14-92 SANITARIAN [Signature]

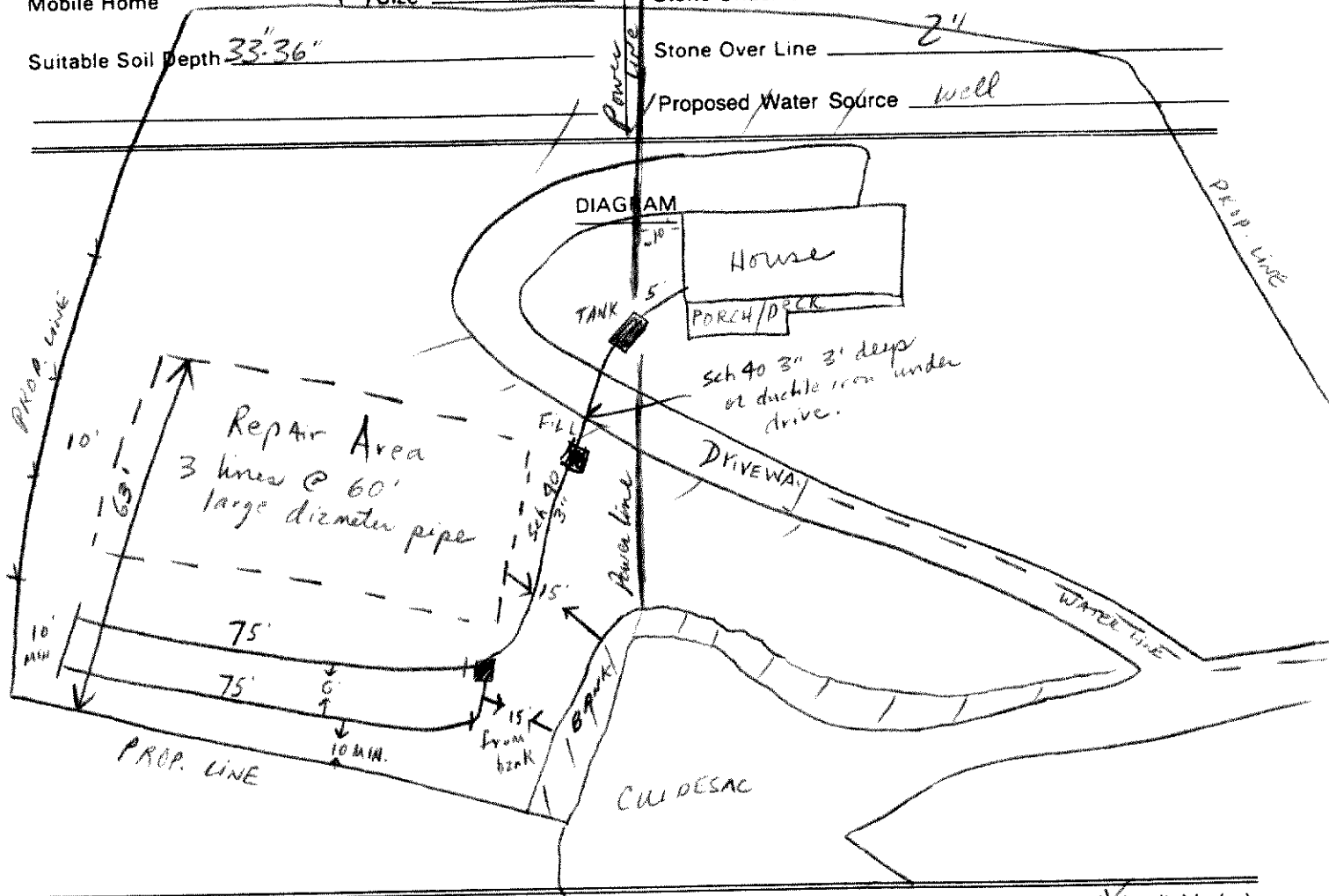
5-6-92
OK for tank to be
set below driveway
gmoys - RS

Owner Jean Chodl - off S. Skenech Rd
Location Hill Side Subdivision Lot 9
Township Franklin Parcel# _____
Area of Lot .70 acre

Mobile Home () Size

Suitable Soil Depth 33-36"

Proposed Water Source well



This conforms to State Guidelines and is not a GUARANTEE.

DATE 1-27-92 SANITARIAN me / [signature] / Cindy Kentland

I, Norman J. Russell state that the above information is correct to the best of my knowledge. Notes: 1) Water line must be 18" above Sch 40 3" line under drive way

knowledge. NOTES: 1) Water line must be 18" above Sch 40 3" line under driveway
2) Tank location may vary as long as 5' is maintained from fire hydrant
3) Any changes must be approved by MCHD.
4) No fill to be over repair area.