

Permit #: 173 New owner: Edward, Charles & Jill
 Agent/Owner: COX, DONALD Mailing Address: 173 GLEN CANNON DR. PLYMOUTH FOREST NC

Home Phone #: 984-7440 Work Phone #: _____
 Proposed Buyer: _____ Mailing Address: _____

Home Phone #: _____ Work Phone #: _____
 Property Location: Glen Spray Subdivision: GLEN CANNON Phase/Sec: _____ Lot #: 35

Directions to property: Wilson Road to Glen Cannon Drive - 1st Right on Campbell - 1st RT on Aberdean - 1st Right on Skye - Left on Glen Spray - 2 blocks - prop on right - 1st Right on Skye on prop

Flood Zone	
Is the property in a flood zone?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inspections	
Flood Zone	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Initials _____	Date _____

Installation for: Mobile Home Single Double House No. Bedrooms: 3 Basement: Yes No
 If Indust./Commercial/Other: _____ Operation: (Describe) _____ Property contains designated wet lands: Yes No

Lot size: 1.35 AC Date lot recorded: 1995 Right of ways, easements, etc. ROAD
 Water Supply: Private Spring Well Shared Supply Public/Community

I certify, the above to be correct to the best of my knowledge. Permission is hereby granted to perform a site/soil evaluation on the property described above. If the information submitted in this application is falsified or changed, the permit shall become void. I understand that it is my responsibility as the applicant/agent/owner to comply with all applicable ordinances, laws, and rules from other agencies that may affect the development of this property.

Applicant/Agent Signature: _____ Date: 11/10/05

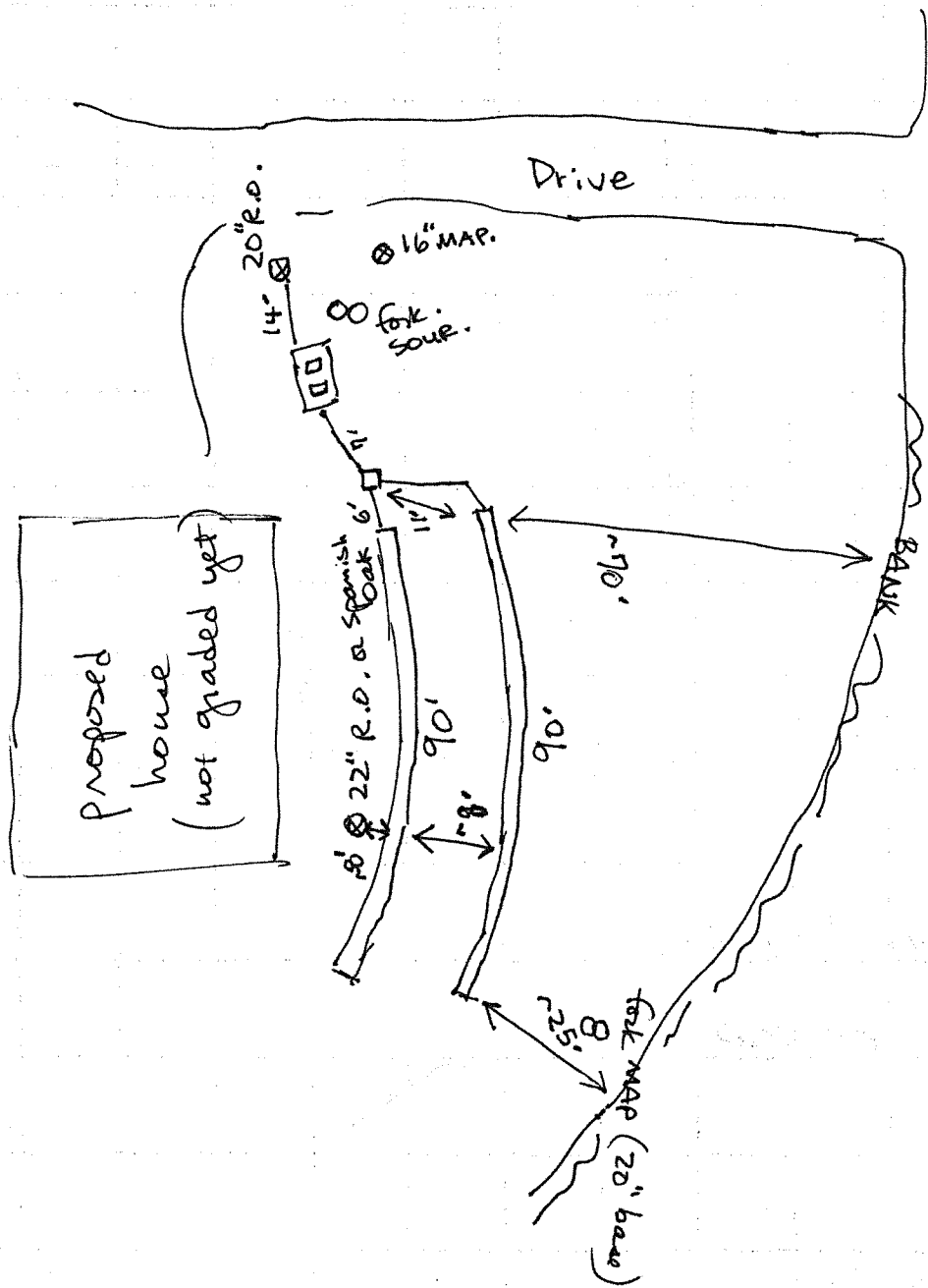
ON-SITE WASTEWATER DISPOSAL SYSTEM OPERATIONS PERMIT

The issuance of this operations permit certifies that the system described on the improvement permit and the construction authorization is properly installed or repaired and that the system is capable of being operated in accordance with the conditions of the improvement permit, Article 11 of Chapter 130A of the General Statutes of North Carolina and the rules adopted pursuant to this Article. This operation permit shall remain in effect as long as the system is operated and maintained as required by the Laws and Rules for Sewage Treatment and Disposal Systems as issued by the North Carolina Department of Environment and Natural Resources, Division of Environmental Health.

System Classification Type: IIIg Management Entity: Owner Certified Operator Minimum inspection/maintenance review frequency _____ years.

Comments: EZ Flow drainfield.

Installed by: Ron McGuire Final Inspection by: Jim R. [Signature] RS Date: 8.23.05



SCM 1000
 Stb 862

EZ Flow
 drainfield

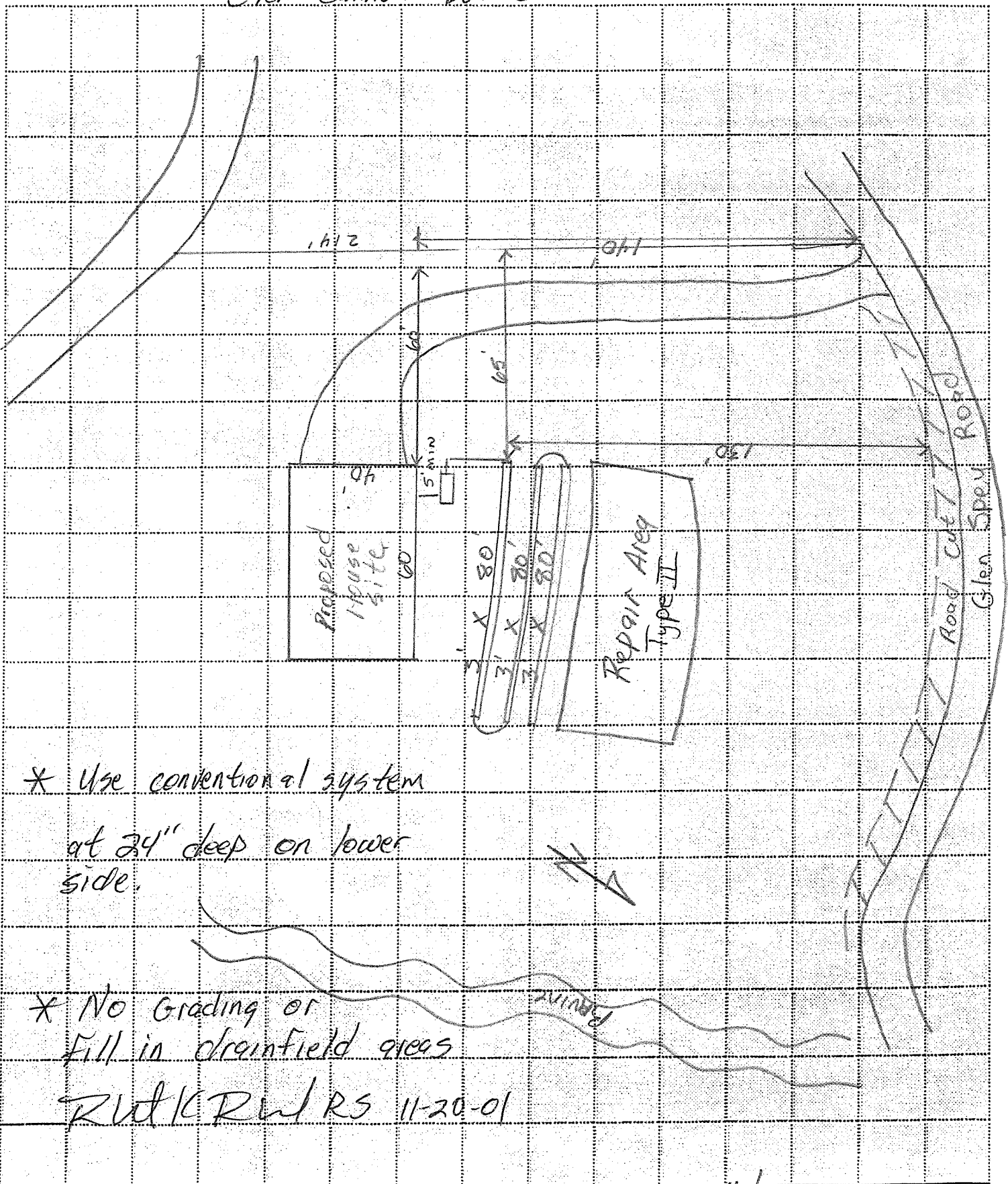
8.23.05

FZ

TRANSYLVANIA COUNTY HEALTH DEPARTMENT IMPROVEMENT PERMIT DIAGRAM

File Name: Cox, Donald Permit No.: 01-448 Pin No.: 9505-29-1480

new owner: Charles Sid Elliott
Glen Cannon Lot 38



* Use conventional system
at 24" deep on lower
side.

* No Grading or
fill in drainfield areas

Rut/C Rut RS 11-20-01

SCALE: 1" = 40'