

RANDOLPH COUNTY HEALTH DEPARTMENT
2222-B S. FAYETTEVILLE ST. ASHEBORO NC 27205
ASHEBORO: 318-6262/ GREENSBORO: 218-4262/ ARCHDALE: 819-3262

27006

OPERATION PERMIT

An Operation Permit indicates that the wastewater system has been constructed according to the standards set forth in the regulations, Improvement Permit, and Authorization for Wastewater Construction. Therefore, the wastewater flow shall not increase or the wastewater strength shall not change from what was approved in the Improvements Permit, without approval by the Health Department. Due to the development of clogging mats, which adversely affect the life expectancy of a normally functioning septic systems, and the variability of uses that influence the long-term operation, no guarantee of performance shall be implied.

PERMIT TYPE: NEW

APPLICANT: TERESA GREENE
OWNER: NAPOLEAN AND LINDA THOMAS
LOT SIZE: 1.00 ACRES

APPLICATION NUMBER: 0201110
PIN NUMBER: 7695193535
LOCATOR: 12607

LOCATION:
SUBDIVISION:
DIRECTIONS: SEE IP AND AC

SECT: MAP: LOT:

FACILITY INFORMATION:
PROPOSED USE: DOUBLEWIDE HOME
WASTEWATER TYPE: DOMESTIC
DESIGN FLOW: 360 GPD
NUMBER OF BEDROOMS: 3
NUMBER OF PEOPLE: 6
BASEMENT: NO

NUMBER OF SHIFTS:
BASEMENT FIXTURES: NA

SYSTEM TYPE: GRAVITY CONVENTIONAL
SYSTEM CLASSIFICATION: TYPE II (a) CONV. SNGL-FAMILY or 480 GPD or LESS
DRAINFIELD SIZE: 440 LINEAR FEET
SEPTIC TANK SIZE: 1000 GALLONS
PUMP: ___ GPM@ ___ TDH
TRENCH DEPTH: 20 INCHES
STONE DEPTH: 12 INCHES

PUMP TANK SIZE: ___ GALLONS

TRENCH WIDTH: 36 INCHES
COVER DEPTH: 6 INCHES

CONDITIONS:

NUMBER OF CONDITIONAL ATTACHMENTS:

Operation Permits are subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal, and to conditions of this permit. On-site septic systems are subject to operation and maintenance requirements of rule .1961 of the Laws and Rules for Sewage Treatment and Disposal Systems, and to the inspection and reporting frequencies specified in Tables V (a) & (b). An application for an above ground inspection (ATC) will be required for any system that has been installed for twelve (12) months or longer without obtaining the necessary Building or Setup Permits.

NATHAN HINSON
ISSUED BY: NATHAN HINSON

2-13-03
DATE

INSTALLED BY: RAY POOLE

EXPIRES AFTER:

12607

RANDOLPH COUNTY HEALTH DEPARTMENT
2222-B S. FAYETTEVILLE ST. ASHEBORO NC 27205
ASHEBORO: 318-6262/ GREENSBORO: 218-4262/ ARCHDALE: 819-3262

IMPROVEMENTS PERMIT

Improvements Permits are approvals for wastewater systems only, and are subject to revocation if the site or soil conditions are altered, the proposed facility, site plan or plat have changed, and the designed wastewater flow or wastewater characteristics have increased. **DO NOT GRADE OR DISTURB THE APPROVED SEPTIC SYSTEM AREA!** This is not a Construction Authorization Permit. A Construction Authorization Permit must be issued before any Building Permits can be obtained and before any construction begins on the property. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

PERMIT TYPE: NEW

APPLICANT: GREENE, TERESA
OWNER: THOMAS, NAPOLEAN & LINDA GAIL
LOT SIZE: 1.00 ACRES

APPLICATION NUMBER: 0201110
PIN NUMBER: 7695193535
LOCATOR NUMBER: 12607

LOCATION:
SUBDIVISION: _____ SECT: _____ MAP: _____ LOT: _____
DIRECTIONS: NC HWY 705S - LEFT UNION GROVE CHURCH RD - PROP ON RIGHT JUST BEFORE FORK CREEK MILL RD

FACILITY INFORMATION:
PROPOSED USE: MOBILE HOME
WASTEWATER TYPE: DOMESTIC
DESIGN FLOW: 360 GPD
NUMBER OF BEDROOMS: 3
NUMBER OF PEOPLE: _____
BASEMENT: NO **NUMBER OF SHIFTS:**
BASEMENT FIXTURES: NO

SYSTEM TYPE: GRAVITY CONVENTIONAL

CONDITIONS FOR SITE MODIFICATIONS: 1)SEE AUTHORIZATION FOR CONSTRUCTION

NUMBER OF CONDITIONAL ATTACHMENTS: 2

ISSUED BY: ROBERT N. LOWE
DATE: 6/11/02
EXPIRES AFTER: 6/11/07



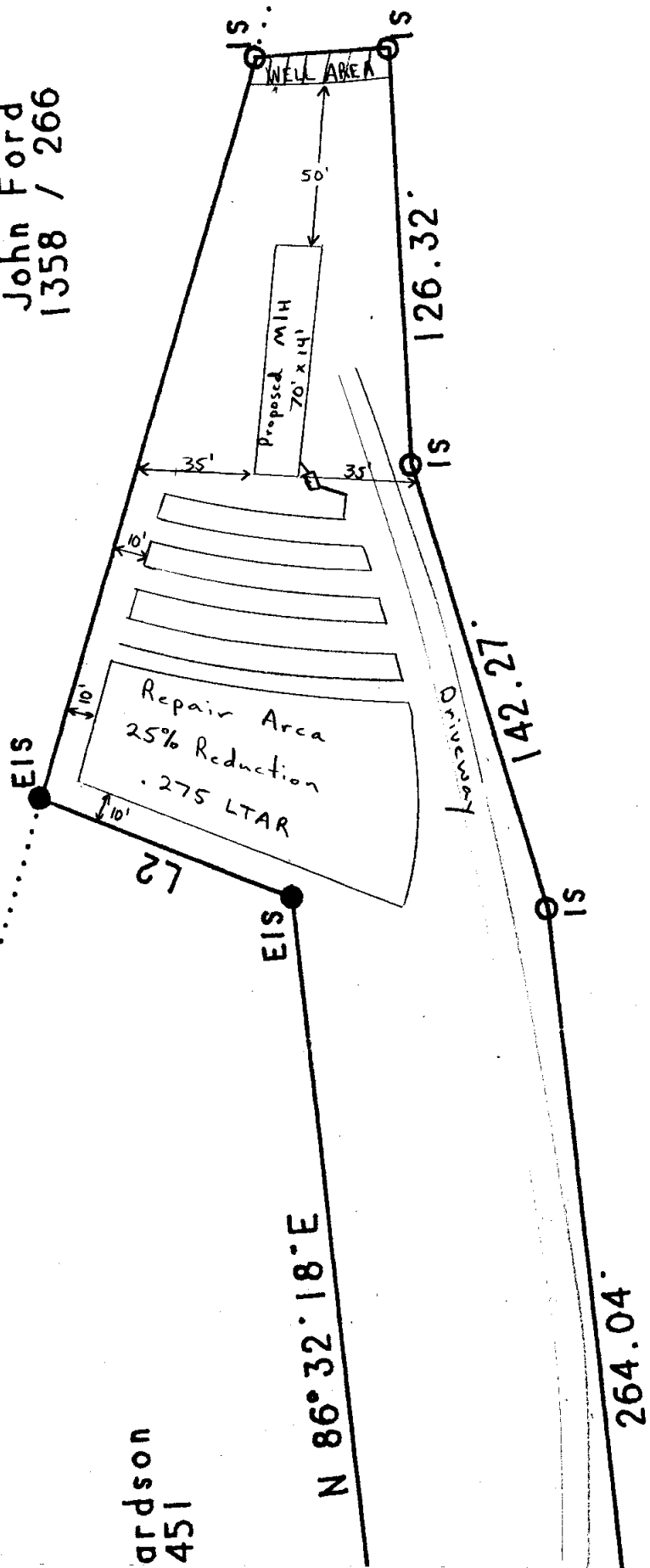
SIGNATURE

App. # 0201110

Robert N. Lowe

6-11-02

John Ford
1358 / 266



ardson
451

Napoleon Thomas
1385 / 1653

DISTANCE
82.94' (Tie Line)

INSTALLATION REQUIREMENTS FOR SHALLOW-PLACED WASTEWATER SYSTEMS

The approved site referenced by this permit was initially classified UNSUITABLE as to soil depth or soil wetness but was reclassified under Rule .1956 (1) of the Laws and Rules for Sewage Treatment and Disposal Systems in North Carolina as PROVISIONALLY SUITABLE by utilizing shallow placement of drainfield trenches in the naturally-occurring soil under the following conditions:

- (1) contractor shall contact health department prior to installation to discuss permit requirements;
- (2) drainfield trenches shall be constructed within the approved area and on contour with the land surface;
- (3) when stepdowns are used utilizing trench depths less than 22 inches, additional soil cover will be necessary above original surface grade and shall be placed at a uniform depth over the entire drainfield, extending laterally 5 feet beyond all trenches;
- (4) minimum 12 inches of stone in trench, if applicable;
- (5) ALL trenches shall remain uncovered prior to inspection;
- (6) soil cover shall be placed over the drainfield only after proper preparation of original ground surface (ie. large rocks removed, etc.);
- (7) type and placement of soil cover subject to approval by the Health Department;
- (8) soil cover shall be placed over the drainfield by track-driven equipment or bobcat (no excavation equipment);
- (9) maintain 2 foot solid earth dam between any distribution device and drainfield trench;
- (10) SYSTEM SHALL BE INSTALLED AND COVERED PER PERMIT REQUIREMENTS PRIOR TO FINAL APPROVAL.

Robert
Lowe
4-17-02

COUNTY OF RANDOLPH
Randolph County Health Department
725 McDowell Rd - PO Box 771 - Asheboro, NC 27204-0771
(336) 318-6262

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL EVALUATION
FOR A RESIDENTIAL STRUCTURE
Page 1

Applicant : GREENE, TERESA Date : 05 Apr 2002
Address : P O BOX 1444 Application Nbr: 0201110
Cty/St/Zip: ASHEBORO, NC 27204 Parcel Id Nbr : 7695193535
Phone : 336 625-0868 *work (629-1447)* EH Locator Nbr : 12607

Prcl Owner: 97704 - THOMAS, NAPOLEAN & LINDA GAIL Phone: 336 879-6061
Address : P O BOX 447
Cty/St/Zip: SEAGROVE, NC 27341

Proposed Use: RMHA2 - RESIDENTIAL - DOUBLE WIDE MANUFACTURED HOME

Location Information:.....
Township : 17 - RICHLAND
Subdvn Name : Subdvn Map Nbr :
Subdvn Lot Nbr: Subdvn Sect Nbr:
Directions : NC HWY 705S - (L) UNION GROVE CHURCH RD - PROP ON (R) JUST
B4 FORK CREEK MILL RD

Wastewater Disposal Information:.....
Facility Type : M - MOBILE HOME
Structure Width : 70 FT
Structure Depth : 28 FT
Existing Structr: MOBILE HOME, WELL, SEPTIC SYSTEM

Future Structure: MOBILE HOME, WELL, SEPTIC SYSTEM

Future Additions: NONE

Water Supply Typ: W - WELL
Orig Date Rcrded: 03/94
Protected Wtland: NO

20" Trench

Residential:.....
Nbr of People : Basement : NO
Nbr of Bedrooms: Fixtures/Bsmnt: NO

EH PDA Comments: HOLD S/S PERMIT FOR ZONING PERMIT & FINAL PLAT APPROVAL

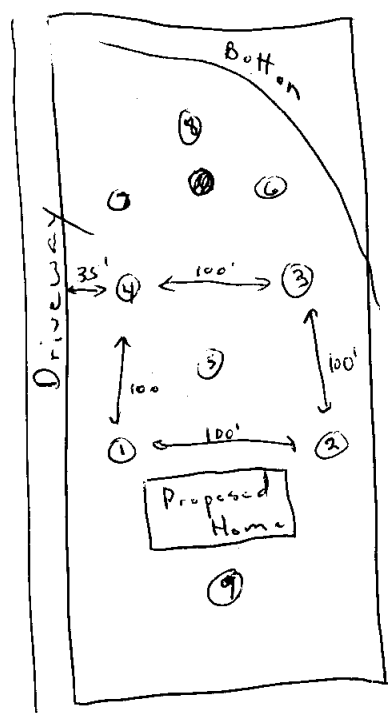
Improvement Permits are approvals for wastewater system sites only and are subject to revocation if the site is altered or if site plans or the intended use change.

	1	2	3	4	5	6	7	8	9
LANDSCAPE POSITION	L	L	L	L	L	L	L	L	L
% SLOPE	7%	7%	5%	5%	7%	7%	5%	3%	5%
HORIZON 1	0-5	0-7	0-6	0-6	0-5	0-9	0-5	0-5	0-5
TEXTURE	S:Cl	S:Cl	S:Cl	S:Cl	S:Cl	S:Cl	S:Cl	S:Cl	S:Cl
STRUCTURE									
CONSISTENCE									
MINERALOGY									
HORIZON 2	5+	7-41	6-14	6-38	5-24	8-27	5-34	5-19	5-10
TEXTURE	S:G+SAP	C+SAP	S:Cl+SAP	C+SAP	C+SAP	C+SAP	S:Cl+SAP	C+SAP	S:Cl+SAP
STRUCTURE		ABK		ABK	ABK	ABK	ABK	ABK	
CONSISTENCE		F.S.P		F.S.P	F.S.P	F.S.P	F.S.P	F.S.P	
MINERALOGY		SE		SE	SE	SE	SE	SE	
HORIZON 3					24+			18+	
TEXTURE					C+SAP			C+SAP	
STRUCTURE					MASS			MASS	
CONSISTENCE					VF, VS, VP			VF, VS, VP	
MINERALOGY					EXP			EXP	
HORIZON 4									
TEXTURE									
STRUCTURE									
CONSISTENCE									
MINERALOGY									
SOIL WETNESS								20"	
REST. HORIZON									
SAPROLITE	5"		14"			27"			10"
SUITABILITY	U	PS	U	PS				U	U
LTAR		.225		.225	.1	.225	.225	U	U

SITE CLASSIFICATION: PS AVAILABLE SPACE: Yes LTAR--INITIAL: .275 REPAIR: .275
 EVALUATED BY: RNL TITLE: EHS DATE(S):
 OTHERS PRESENT: SYSTEM TYPE--INITIAL: GC REPAIR: 25% R.
 COMMENTS:

REVISED 8/4/98

7%
 10) 0-13
 S:Cl+SAP
 13" SAP
 10%
 11) 0-10
 S:Cl
 10-21
 S:Cl+SAP
 21" SAP



12) L 5%
 0-10
 S:Cl
 10-19
 S:Cl+SAP
 10" SAP
 13) L 5%
 0-10
 S:Cl
 10-17
 S:Cl+SAP
 17" SAP

OVER

5%
14) 0-6
SICI

6-22
C
SBK
F.S.P
SE

22-37
C+SAP
SBK
F.S.P
SE

.275
37" SAP

7%
15) 0-6
SICI

6-24
C
SBK
F.S.P
SE

24-35
C+SAP
SBK
F.S.P
SE

.275
35" SAP

7%
16) 0-7
SICI

7-28
C
SBK
F.S.P
SE

28-38+
C+SAP
SBK
F.S.P
SE

.275

5%
17) 0-8
SICI

8-27
C
SBK
F.S.P

SE
27-40
C+SAP
SBK
F.S.P
SE

.275

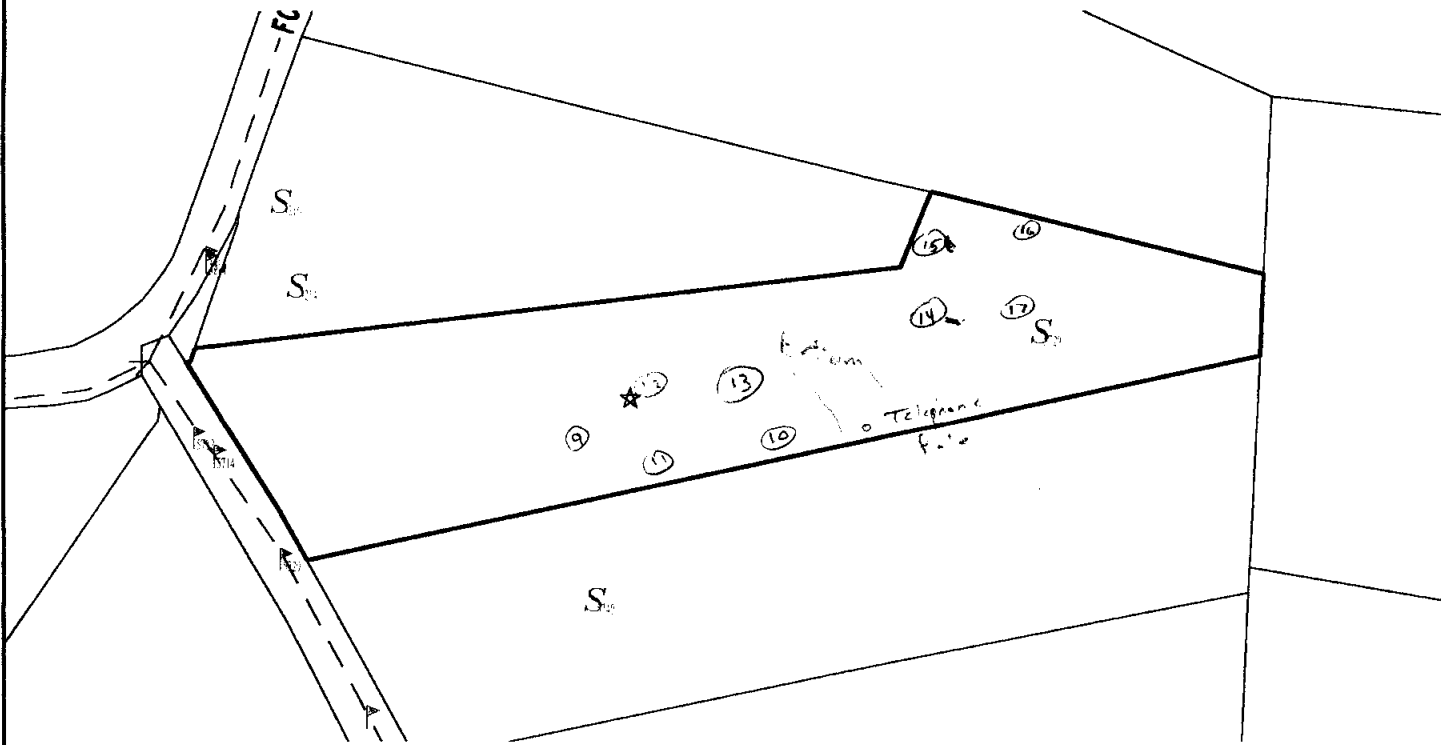
County of Randolph
Department of Planning & Development
725 McDowell Rd - PO Box 771 - Asheboro, NC 27204-0771

Parcel Id Nbr : 7695193535
Owner Name : 'THOMAS, NAPOLEAN & LINDA GAIL'
Parcel Size : 5.83 Acres
Zoning District : RA
Flood Plain : NONE
Water Shed : NONE

Date : 08 Apr 02
Application Nbr: 0201110
Scale : 225 Feet/Inch
Map Page : A6
Postal District : SEAGROVE

****CENTRAL PERMIT USE ONLY REPRODUCTION
AS SURVEY OR LEGAL DESCRIPTION PROHIBITED**

Comments



4. You will be notified if we visit your site and it is found to be improperly prepared or the site plan does not match what is staked on site. It will not be considered ready until it has been properly prepared.

PERMITTING

1. All zoning requirements must be met, and permits must be issued prior to issuance of the Septic Permit.
2. In some cases the Improvements Permit only will be issued, and not the Authorization for Wastewater System Construction. No Building Permits can be obtained until the Authorization for Wastewater System Construction is issued.
3. Due to complexity in permitting, inspecting the installation, and on going monitoring requirements, some systems require additional fees be paid prior to the issuance of the Septic Permits.
4. If the site is denied an Improvements Permit, you will be notified in writing of our findings. You have the right to an in house review, if the site is still denied you may request in writing a formal review by the State Regional Soil Specialist

GENERAL INFORMATION:

1. The application is valid for one year, in order to obtain a permit all necessary fieldwork must be complete and any fees must be paid for before the application expires.
2. The application is for the lot or tract of land that is specified on the application. This does not preclude the possibility of off site evaluation, however, there will be additional fees required along with all other requirements of this document which must be completed prior to performing the evaluation.
3. The lot or tract of land will be evaluated up to two (2) acres in a single visit, after that you may prepare another site plan and site for evaluation, hire a backhoe operator to meet the Environmental Health Specialist, or hire a private Soil Scientist to attempt to locate an approved area. We will then evaluate that area.

(detach)

201110

SITE READY CARD

I have read and understand the above conditions that must be completed, and the procedure for which the evaluation will occur and hereby inform the Randolph County Health Department that my site is ready for the a soil/site evaluation. I further understand that all activity regarding my application and site must be complete within one year of the date of my application or I will be required to submit a new application.

Teresa Greese
signature

4-16-02
date

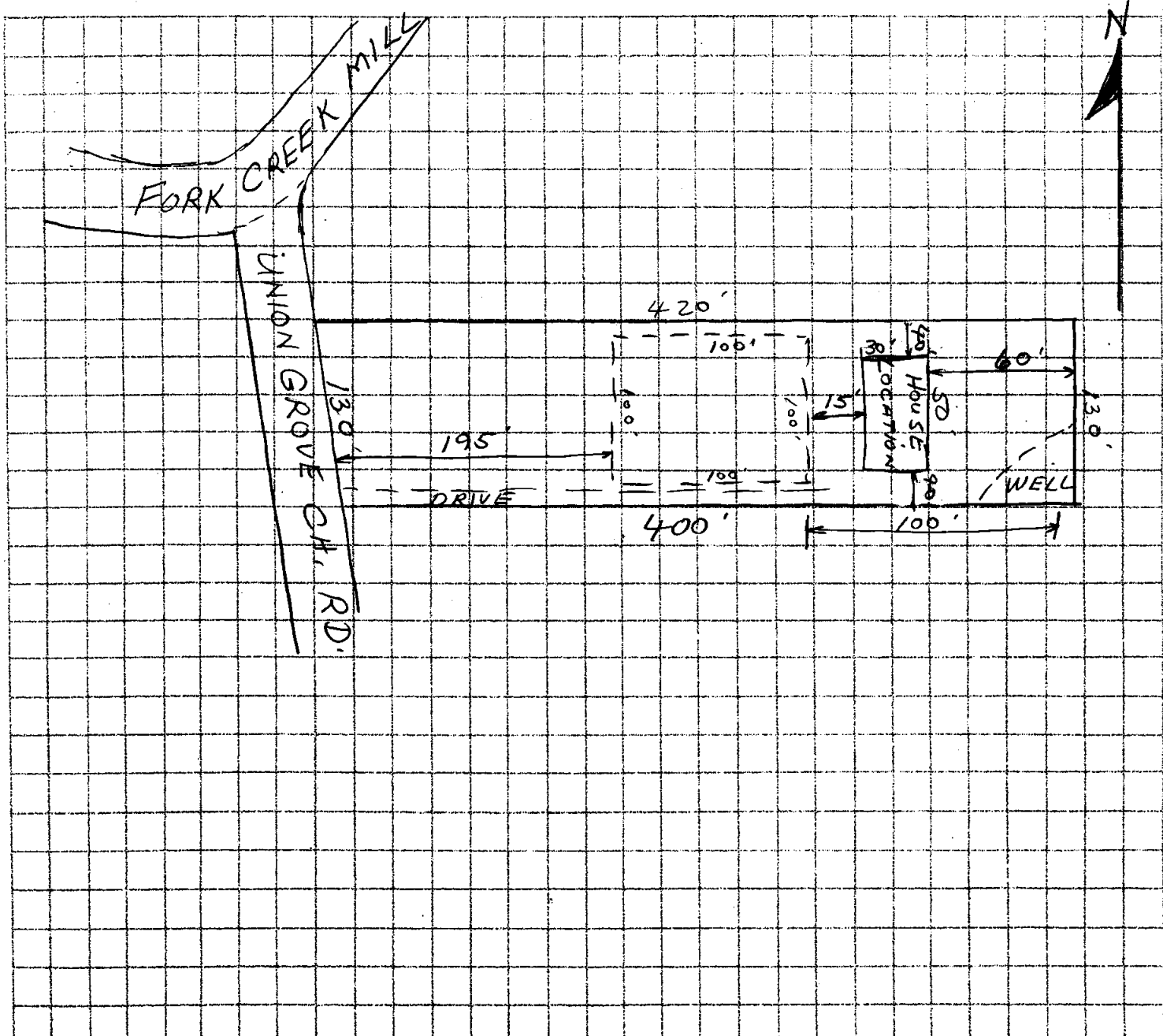
SITE PLAN WORKSHEET

201110

Place a mark (X) beside each item that has been indicated on your site plan, incomplete site plans will be returned to you for completion. Remember: Your property will not be scheduled for an evaluation until we have received a completed application, site plan, and all proposed items are marked on the property.

- The dimensions of the property.
- The proposed location of all structures (e.g.: facility, wells, water lines, outbuildings, pools). Show the distances from the road and the side property line to all structures. Be sure and give the dimensions for all the structures. If you are unsure as to the structure size, please show the dimensions of the MAXIMUM area of the lot that you anticipate the structure will cover.
- The site you would prefer your septic system to go in.
- The preferred driveway location.
- The proposed well location.
- A north arrow or other sufficient directional indicator.
- N/A - Any proposed structures or improvements to the property such as garages, workshops, pools, etc. If there are none, circle "N/A"
- N/A - The location of any existing septic tank systems and wells on your property and on the adjoining property within 100' of your property line. If there are none, circle "N/A".
- N/A - The location of any easements or rights of way on the property. If there are none, circle "N/A".
- N/A - The location of any designated wetlands on the property. If there are none, circle "N/A"

USE THIS SPACE TO DRAW YOUR SITE PLAN:



DR
son
451

DISTANCE
82.94' (Tie Line)

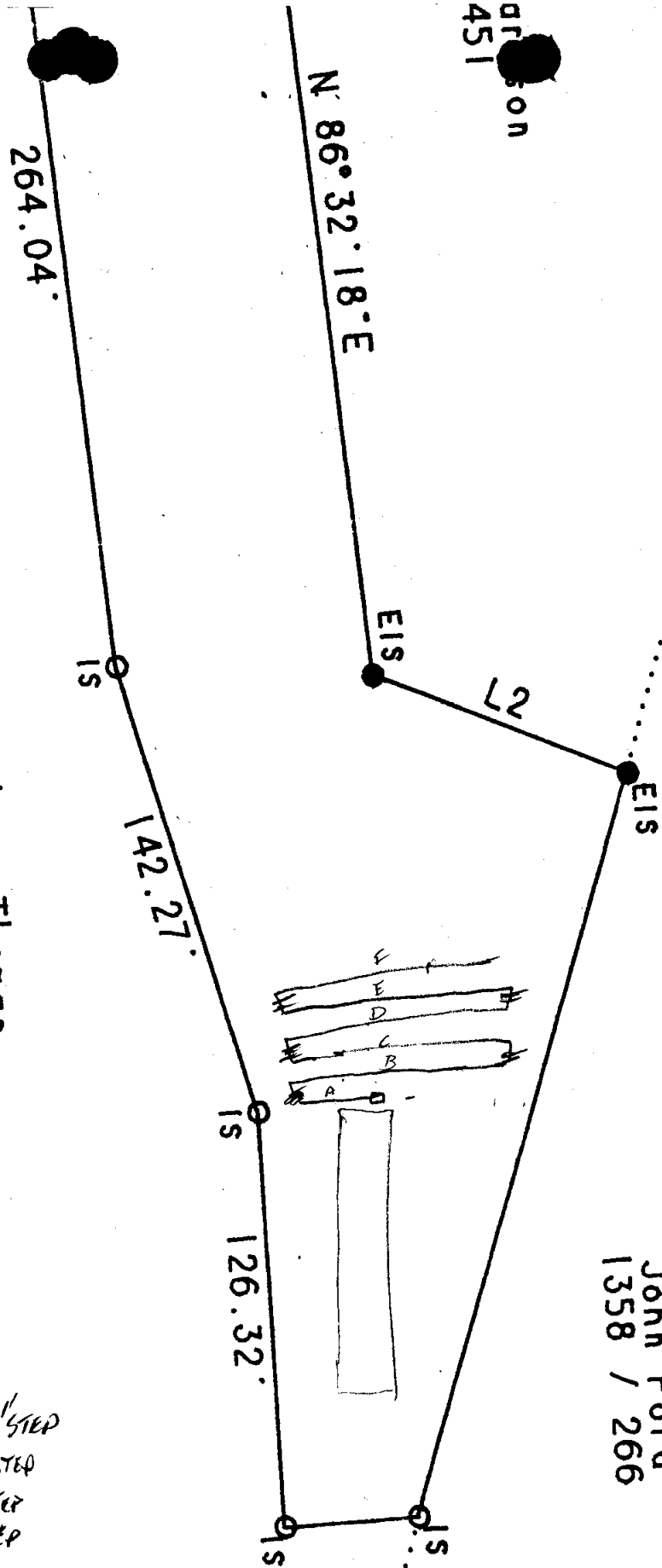
Napolean Thomas
1385 / 1653

John Ford
1358 / 266

ST
HPP 1000
STB 156
11-30

A 40
B. 84 > 1/2" RISE - 4" STEP
C. 90 - 1/2" RISE - 5" STEP
D. 80 - 1/2" FALL - 4" STEP
E. 85 - 1/2" RISE - 4" STEP
F. 85 - 1/2" FALL
444 TOTAL

S 70° 38'
172.4
(Tie Line)



201110 - 27006

The North Carolina Administrative Code requires applications for septic permits to be signed by the owner of the property to be evaluated or by the owner's legal representative. Applications submitted by an owner's legal representative must include this completed and signed document. **Please note that the person named the legal representative on this document must make the application. The signature of the person named the legal representative on this document must also appear at the bottom of this document.**

I, Linda Nail Thomas, hereby authorize
(property owner's full name)

Teresa Thomas Greene to serve as my legal representative
(legal representative's full name)

for submitting an application for an evaluation by the Randolph County Health Department of property owned by me for the purpose of obtaining a permit to install, repair or expand an on-site wastewater system. I understand that submittal of the application for evaluation also authorizes the Randolph County Health Department to perform said evaluation on my property.

Property Owner's Address: 5729 Union Grove Church Road Seagrove, N.C. 27341

Property Owner's Phone: (336) 879-6661

Parcel Identification Number (PIN): 7695193535

Parcel Size: 5.83 A Parcel Location: _____

Signature: Linda Nail Thomas Date: 4/5/02
(property owner's full name)

Signature: Teresa J. Greene Date: 4/5/02
(legal representative's full name)

RANDOLPH COUNTY HEALTH DEPARTMENT
2222-B S. FAYETTEVILLE ST. ASHEBORO NC 27205
ASHEBORO: 318-6262/ GREENSBORO: 218-4262/ ARCHDALE: 819-3262

2-13-03
2-14-03
11:30

Well Permits are valid for 5 years from the date of issuance and are subject to suspension and/or revocation for non-compliance with appropriate State and Local Rules and Regulations, or if false information was given in order to obtain a Permit. Wells shall be constructed in accordance with all regulations and rules. The Well Completion Report work must be submitted to the Health Department with in 15 days upon completion of a well.

WELL PERMIT

PROPOSED USE: MOBILE HOME

APPLICANT: GREENE, TERESA
OWNER: THOMAS, NAPOLEAN & LINDA GAIL
LOT SIZE: 1.00 ACRES

APPLICATION NUMBER: 0201110
PIN NUMBER: 7698193535- 7695197712
LOCATOR NUMBER: 12607- 27006

LOCATION:

SUBDIVISION: LEFT RALPH LAWRENCE RD **SECT:** **MAP:** **LOT:**
DIRECTIONS: 7055 - LEFT UNION GROVE CHURCH RD - PROP ON RIGHT JUST BEFORE FORK
CREEK MILL RD LEFT UNION GROVE CHURCH RD.

GROUTING DEPTH: MINIMUM 20 FEET

SETBACKS:

- | | |
|-------------------------------------------|---------|
| 1. BUILDING FOUNDATIONS | 25 FT. |
| 2. EXISTING & PROPOSED SEPTIC SYSTEMS | 100 FT. |
| 3. EXISTING & PROPOSED SEPTIC REPAIR AREA | 100 FT. |
| 4. SEWAGE PUMP SUPPLY LINE | 50 FT. |
| 5. BARN | 100 FT. |
| 6. CHICKEN HOUSES | 100 FT. |
| 7. CHICKEN PITS | 100 FT. |
| 8. CHURCH CEMETARIES | 100 FT. |
| 9. UNDERGROUND STORAGE TANKS | 100 FT. |
| 10. STREAMS/BROOKS/ CREEKS | 25 FT. |
| 11. LAKES/PONDS/RESEVIORS | 50 FT. |
- The well driller must verify that all separations are adhered to before drilling the well
 - If the well driller is unable to maintain any of the above separations, contact the Health Department @ (336) 318-6262 before drilling the well.

ISSUED BY: ROBERT N. LOWE
DATE: 6/13/02
EXPIRES AFTER: 6/13/07

Robert N. Lowe
SIGNATURE

WELL INSPECTION:

GROUTED DEPTH: 20' 35'
APPROVED CASING: PVC STEEL
CASING HEIGHT 12" ABOVE LAND SURFACE:
WELL COMPLETION REPORT RECEIVED:
WELL HEAD APPROVED:

DATE: 2/13/03 INITIALS: LVE
DATE: 2/13/03 INITIALS: LVE
DATE: 2/13/03 INITIALS: LVE
DATE: 2/13/03 INITIALS: LVE
DATE: 3-5-03 INITIALS: BDF

ISSUED BY: *[Signature]*
DATE: 2-13-03
DRILLED BY: C+C #36

Belinda D. James, RD.
SIGNATURE

Partial Grouting on 2/13/03. Will call back. LVE
Grouting in approved area 2/14/03. LVE
3-5-03 VISIT- WELL HEAD APPROVED. *(BDF)*

DISTANCE 82.94 (Tie Line)

Napoleon Thomas
1385 / 1653

264.04

142.27

IS

126.32

IS

Driveway

N 86° 32' 18" E

Proposed MH
70' x 14'

35'

35'

10'

Repair Area
25% Reduction
.275 LTAR

L2

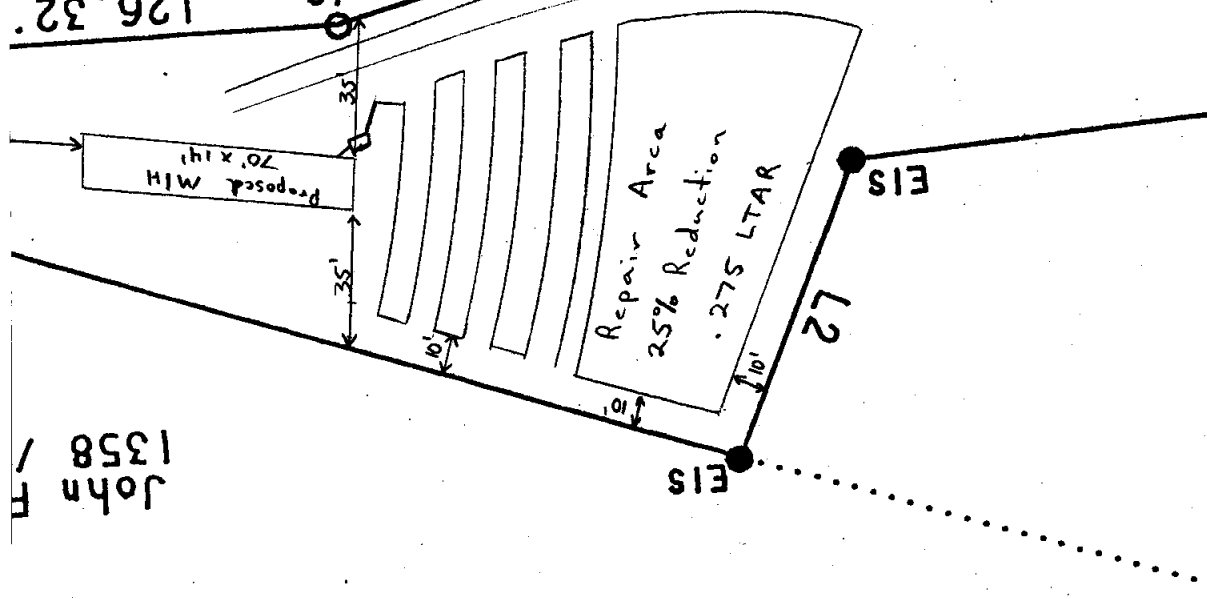
10'

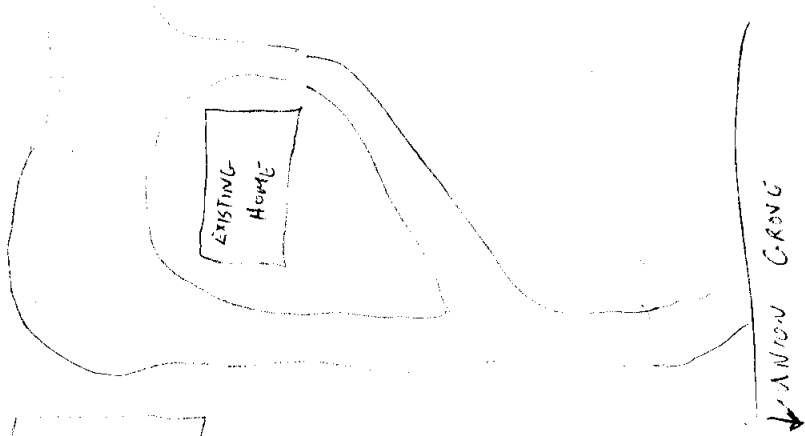
EIS

EIS

451
ardson

John F
1358 /

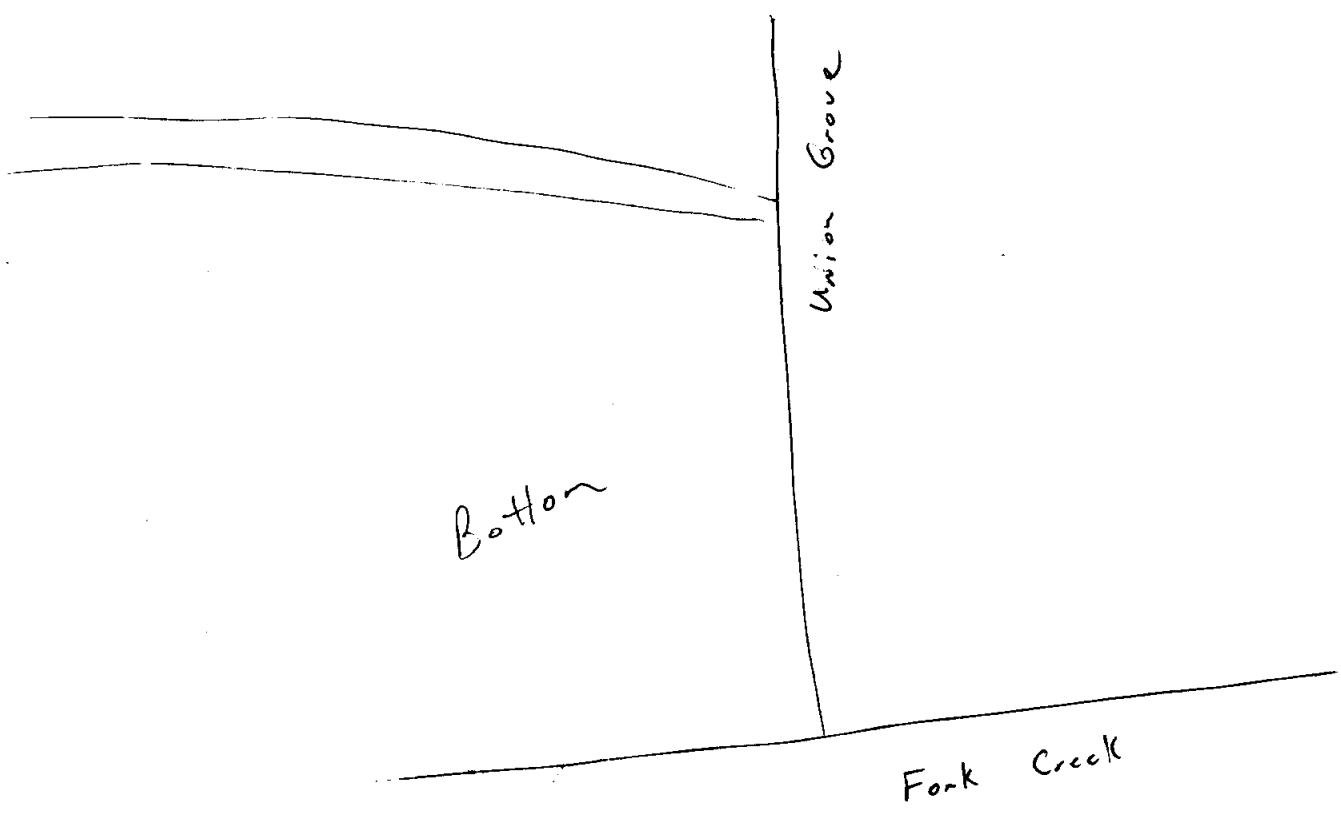




WELL



NEW HOME



COUNTY OF RANDOLPH
Randolph County Health Department
2222-B South Fayetteville St - Asheboro, NC 27204-0771
(336) 318-6262

APPLICATION FOR WELL PERMIT
Page 1

Applicant : GREENE, TERESA
Address : P O BOX 1444
Cty/St/Zip: ASHEBORO, NC 27204
Phone : 336 625-0868
Date : 11 Jun 2002
Application Nbr: 0201110
Parcel Id Nbr : 7695193535
EH Locator Nbr : 12607

Prcl Owner: 97704 - THOMAS, NAPOLEAN & LINDA GAIL
Address : P O BOX 447
Cty/St/Zip: SEAGROVE, NC 27341
Phone: 336 879-6061

Proposed Use: RMHA2 - RESIDENTIAL - DOUBLE WIDE MANUFACTURED HOME

Location Information:.....
Township : 17 - RICHLAND
Subdvn Name : Subdvn Map Nbr :
Subdvn Lot Nbr: Subdvn Sect Nbr:
Directions : NC HWY 705S - (L) UNION GROVE CHURCH RD - PROP ON (R) JUST
B4 FORK CREEK MILL RD

Water Supply and Fee Information:.....
Facility Type : M - MOBILE HOME Permit Fee :
Structure Width : 70 FT
Structure Depth : 28 FT
Existing Structr: MOBILE HOME, WELL, SEPTIC SYSTEM
Future Structure: MOBILE HOME, WELL, SEPTIC SYSTEM

Well Type: D - DRILLED
Less Than 15 Connections: YES
To Supply Less Than 25 Persons: YES

Existing Septic Tank: NO
Permit Applied For : NO
Permit Issued To :

Comments:

Signature of (circle one): Owner's Designated Agent Owner

Issued by: _____, Technician Date: _____

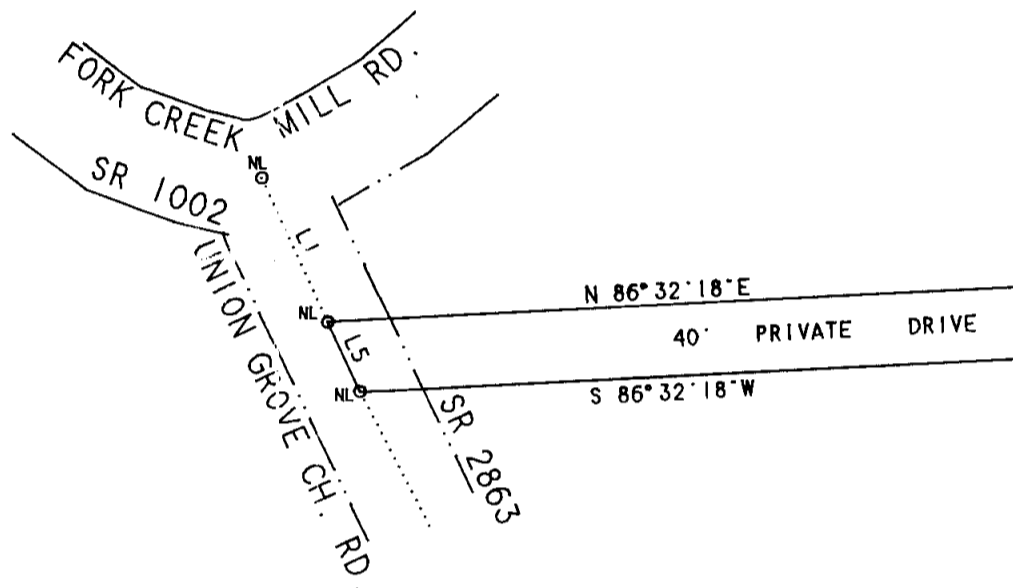
MINOR SUBDIVISION
 FOR
 TERESA THOMAS GREENE
 RICHLAND TOWNSHIP RANDOLPH COUNTY NORTH CAROLINA
 JUNE 4, 2002 SCALE: 1"=100'
 SURVEY BY: BURROW SURVEYS, INC.
 4483 FORK CREEK MILL RD.
 SEAGROVE, NC 27341
 (336) 879 - 5553

I, William C. Burrow, do hereby certify that this plat was drawn under my supervision from an actual survey made under my supervision using references shown hereon: that the boundaries not surveyed are shown as broken lines plotted from information shown hereon: that the ratio of precision as calculated by latitudes and departures is 1:10,000 that this plat was prepared in accordance with G.S. 47-30 as amended. Witness my original signature, registration number and seal, this 4 day of JUNE, A.D. 2002.



William C. Burrow
 Surveyor
 L-2497

NOTES
 1. FOR DEED REFERENCE SEE DEED BOOK 1385 PAGE 1653.



... THIS DIVISION SOLELY AMONG FAMILY MEMBERS ...

THIS PLAT IS OF A SURVEY THAT CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT REGULATES PARCELS OF LAND.

William C. Burrow
 SURVEYOR L-2497

MINOR SUBDIVISION CERTIFICATE OF APPROVAL

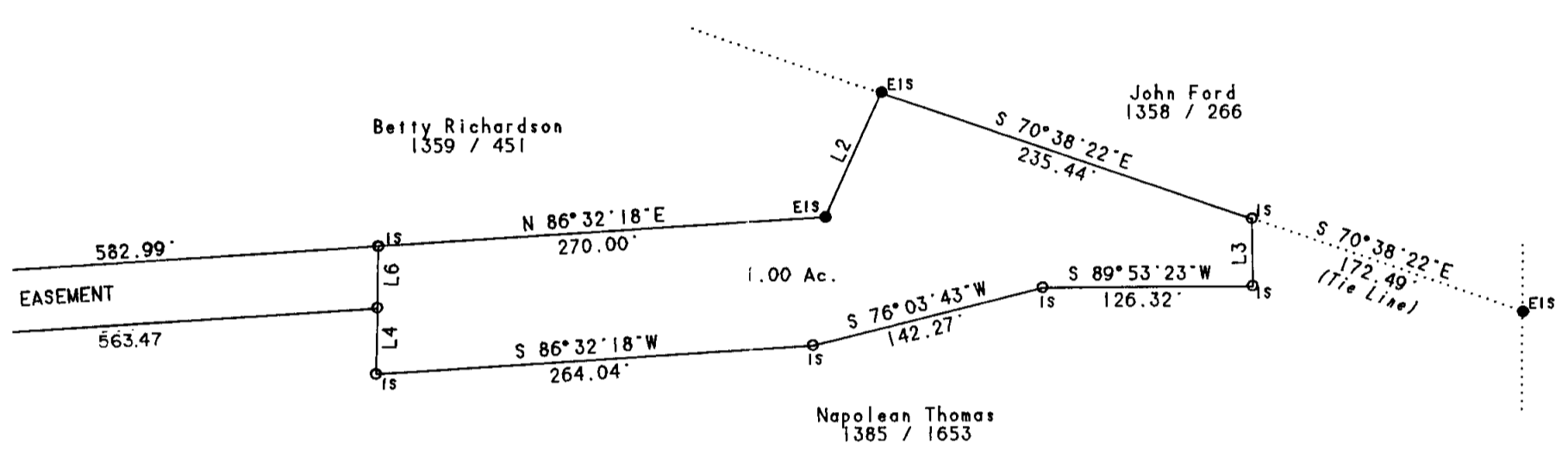
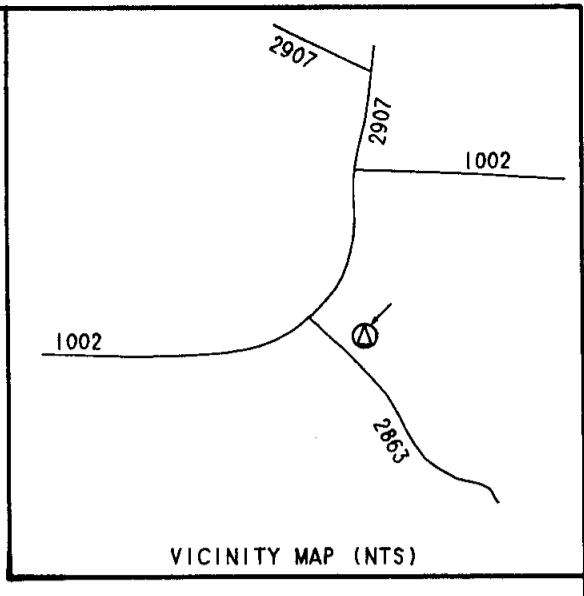
I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS FOR RANDOLPH COUNTY, NORTH CAROLINA, AND THAT THIS PLAT HAS BEEN APPROVED ACCORDING TO THE PROCEDURES FOR APPROVAL OF MINOR SUBDIVISIONS.

6-5-02 W. Johnson
 DATE PLANNING DIRECTOR

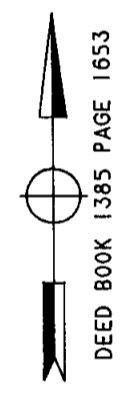
RANDOLPH COUNTY, NORTH CAROLINA

I, REVIEW OFFICER OF RANDOLPH COUNTY CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING

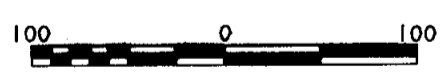
6-5-02 OK
 DATE REVIEW OFFICER



LINE	BEARING	DISTANCE
L 1	S 25°24'10"E	82.94' (Tie Line)
L 2	N 24°11'03"E	83.09'
L 3	S 00°32'22"E	40.93'
L 4	N 01°24'29"E	37.21
L 5	N 25°24'10"W	43.12
L 6	N 01°24'29"E	40.15



LEGEND
 EIS- EXISTING IRON STAKE
 IS- IRON STAKE (SET)
 NL- NAIL



PROJECT NO. 2212