

OWNER Foxcroft Condo #1 ADDRESS Foxfire, N.C.

OCCUPANT Condo SUBDIVISION \_\_\_\_\_

HOUSE \_\_\_\_\_ MOBILE HOME \_\_\_\_\_ BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_

SEPTIC TANK: (SIZE 2(1200) GALS.) \_\_\_\_\_

No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_

**LAK 49392**

te \_\_\_\_\_

Garbage Disposal Unit Yes \_\_\_\_\_ No \_\_\_\_\_

te \_\_\_\_\_

Auto. Dishwasher Yes \_\_\_\_\_ No \_\_\_\_\_

**233-236 Foxcroft Dr**

Auto. Wash. Machine Yes \_\_\_\_\_ No \_\_\_\_\_

**System 1**

Public

Nitrification Field @ 3(150'x30') sq. ft.

Depth of stone in lines 12"

Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_

FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_

Distance from nearest pollution \_\_\_\_\_ Ft.

FARMERS HOME ADM. CASE # \_\_\_\_\_

Contractor Robert Crissman

REMARKS: sandy soil

Address \_\_\_\_\_

approved for 1/2 of system 6-5-79

PERMIT # \_\_\_\_\_ DATE 10-5-79

APPROVED: YES \_\_\_\_\_ NO \_\_\_\_\_

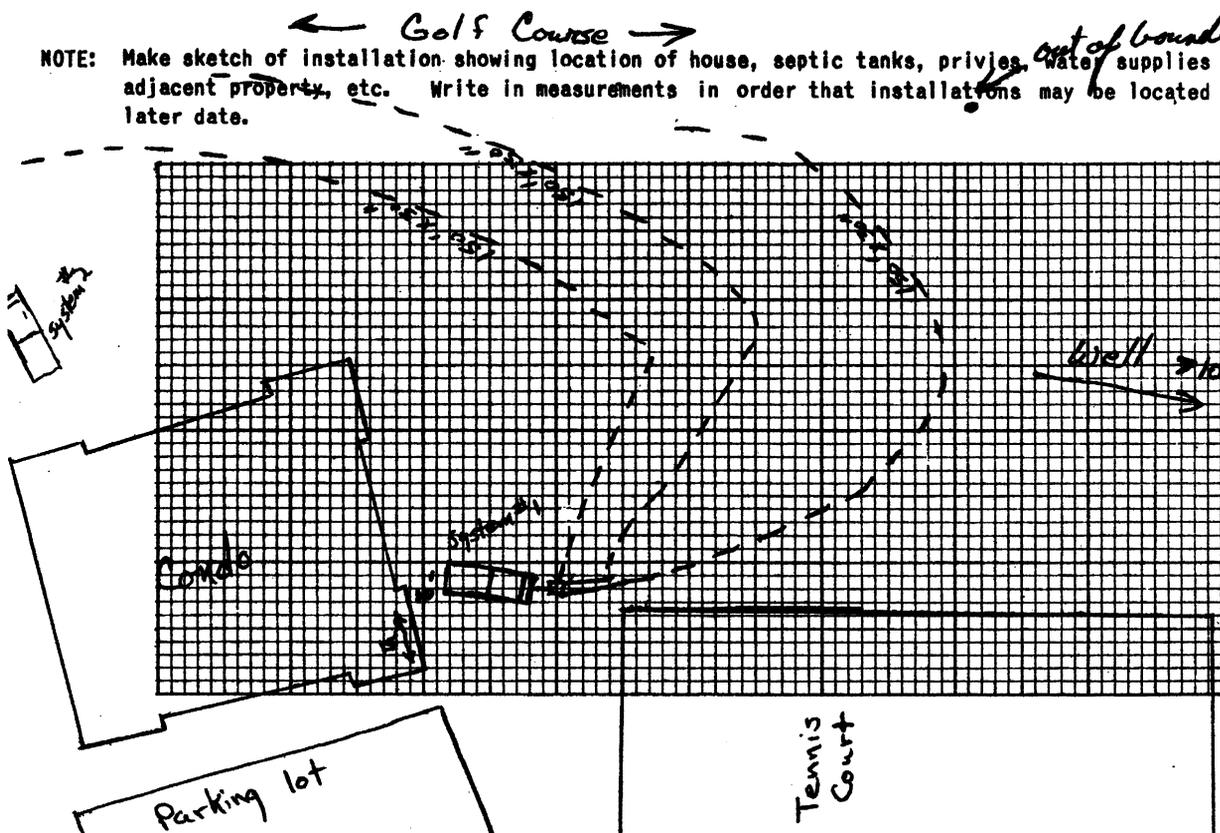
APPROVED BY: A.W. Fields

DHS Form 1108 Rev. 2/75 Sanitation

SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, <sup>out of bounds stake</sup> water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



OWNER Foxcroft Condo #1 (System 2) ADDRESS Foxfire, N.C.  
 OCCUPANT Condo SUBDIVISION \_\_\_\_\_  
 HOUSE \_\_\_\_\_ MOBILE HOME \_\_\_\_\_ BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_

SEPTIC TANK: (SIZE 2(1200) GALS.) \_\_\_\_\_

No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_  
 Garbage Disposal Unit Yes  No \_\_\_\_\_  
 Auto. Dishwasher Yes  No \_\_\_\_\_  
 Auto. Wash. Machine Yes  No \_\_\_\_\_  
 Nitrification Field 3(150' x 30") sq. ft.  
 Depth of stone in lines 12"

**LRX 49392**

**233-236 Foxcroft Dr**

**System 2**

Public

FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_

Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_

FARMERS HOME ADM. CASE # \_\_\_\_\_

Distance from nearest pollution \_\_\_\_\_ Ft.

Contractor Robert Crissman

REMARKS: sandy soil

Address \_\_\_\_\_

PERMIT # \_\_\_\_\_ DATE 10-10-79

APPROVED: YES  NO \_\_\_\_\_

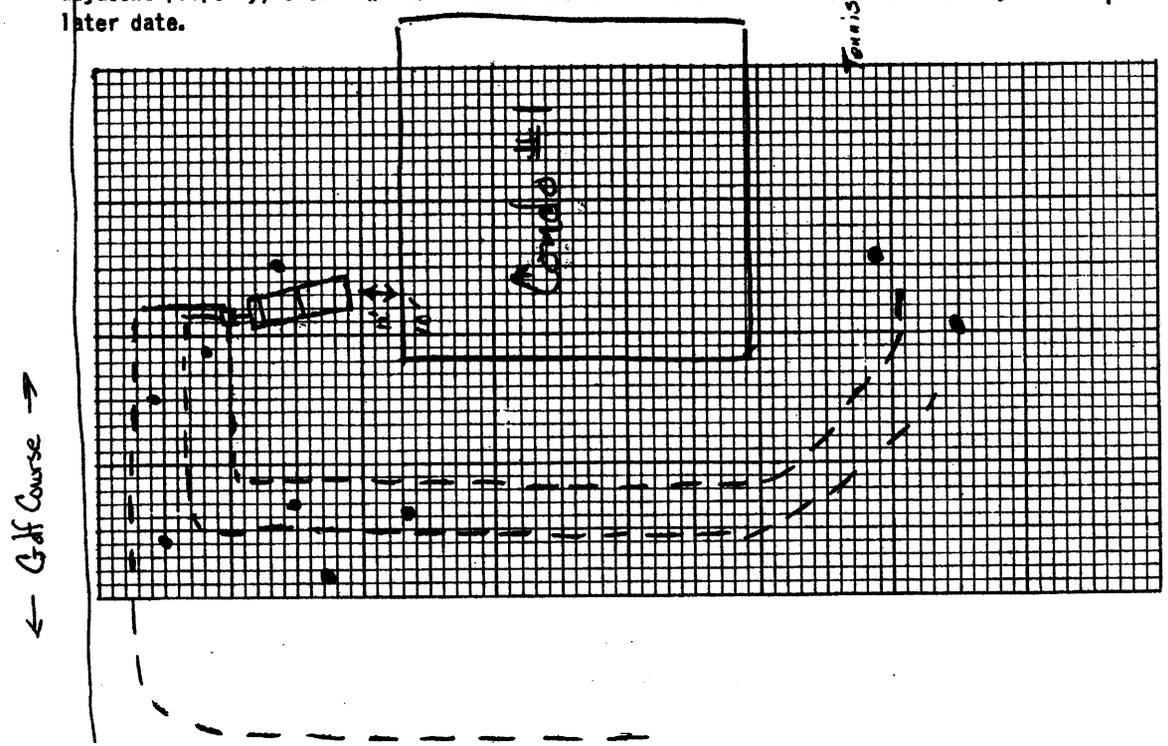
APPROVED BY: Samuel W. Folds

DHS Form 1108 Rev. 2/75 Sanitation

SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



OWNER Foxcroft Condo #2 ADDRESS Foxfire, N.C.  
 OCCUPANT Condo SUBDIVISION \_\_\_\_\_  
 HOUSE \_\_\_\_\_ MOBILE HOME \_\_\_\_\_ BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(1200) GALS.) PRIVY: (NUMBER \_\_\_\_\_)  
 (No. Bedrooms 2) (No. Bathrooms 1 1/2)  
 Garbage Disposal Unit Yes X No \_\_\_\_\_  
 Auto. Dishwasher Yes X No \_\_\_\_\_  
 Auto. Wash. Machine Yes X No \_\_\_\_\_  
 Nitrification Field 3(150'x30') sq. ft. Public   
 Depth of stone in lines 12" \_\_\_\_\_ Dug \_\_\_\_\_  
 FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_  
 FARMERS HOME ADM. CASE # \_\_\_\_\_  
 Contractor Robert Crissman REMARKS: sandy soil  
 Address \_\_\_\_\_  
 PERMIT # \_\_\_\_\_ DATE 10-10-79  
 APPROVED: YES NO  
 APPROVED BY: A.W. Fields

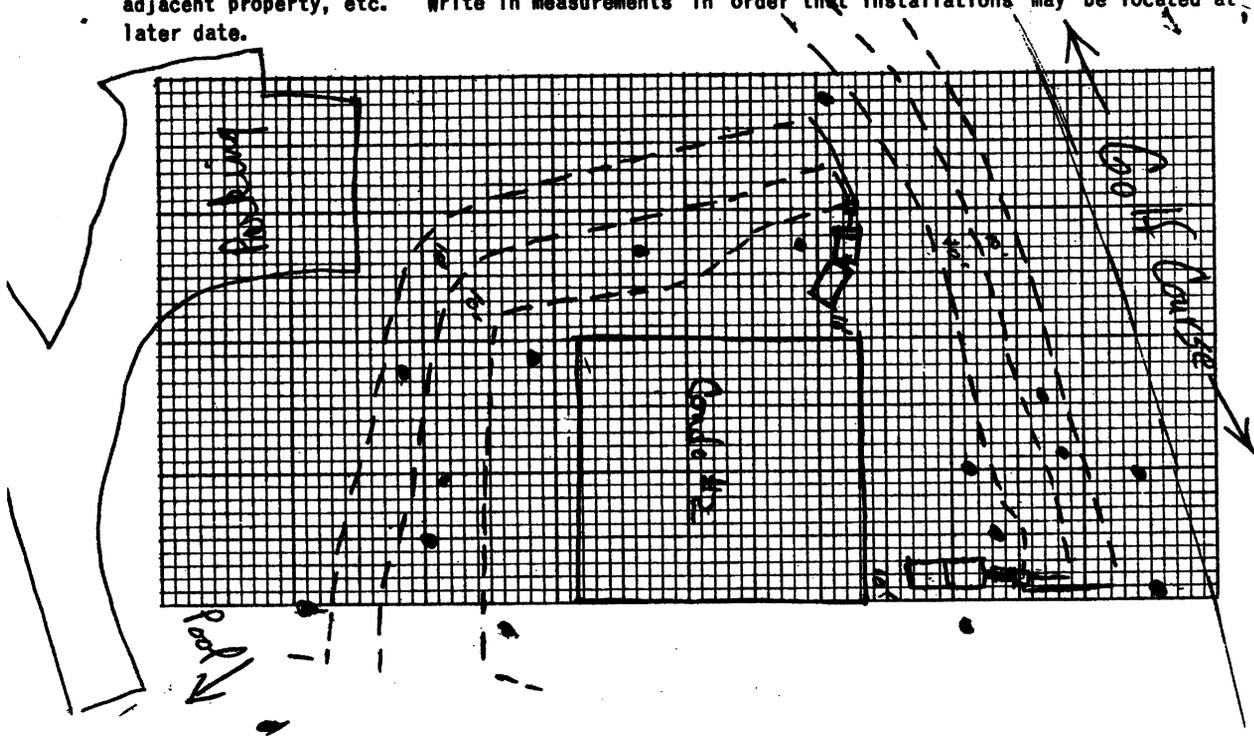
LAK 49392  
 229-232 Foxcroft Dr

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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



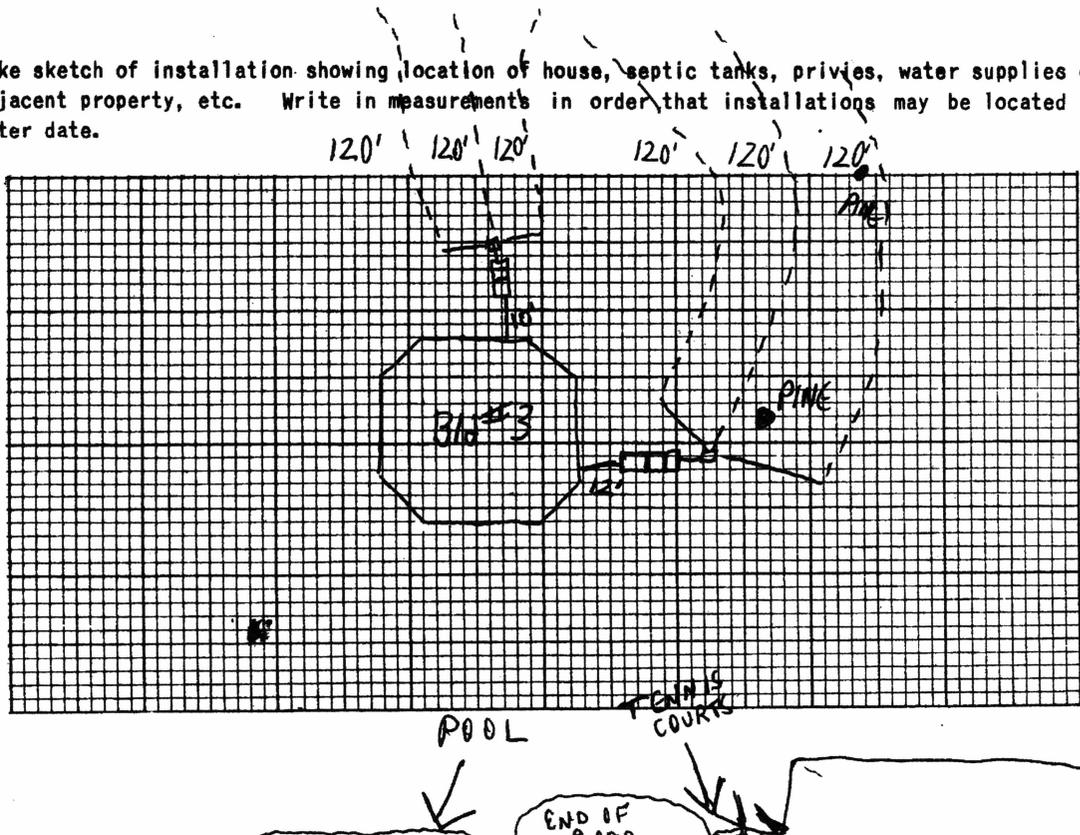
OWNER Foxfire Condominiums No. 3 LKK 49392 225-228 Foxcroft Dr  
 ADDRESS Foxfire  
 OCCUPANT CONDOMINIUM SUBDIVISION Foxfire  
 HOUSE MOBILE HOME BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(1200) GALS.) + 2(1200) gals. PRIVY: (NUMBER \_\_\_\_\_)  
 No. Bedrooms 3 BR/ea No. Bathrooms \_\_\_\_\_ New \_\_\_\_\_ Date \_\_\_\_\_  
 Garbage Disposal Unit Yes \_\_\_\_\_ No \_\_\_\_\_ Repaired \_\_\_\_\_ Date \_\_\_\_\_  
 Auto. Dishwasher Yes \_\_\_\_\_ No \_\_\_\_\_ WATER SUPPLY:  
 Auto. Wash. Machine Yes \_\_\_\_\_ No \_\_\_\_\_ Individual  Public \_\_\_\_\_  
 Nitrification Field 3(120'x30") and 3(120'x30") sq. ft. If well, type:  
 Depth of stone in lines 12" Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_  
 FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_ Distance from nearest  
 FARMERS HOME ADM. CASE # \_\_\_\_\_ pollution \_\_\_\_\_ Ft.  
 Contractor Robert Crum REMARKS: Sandy soil  
 Address Carriage 2 systems  
 PERMIT # \_\_\_\_\_ DATE 10/8/76  
 APPROVED: YES  NO \_\_\_\_\_  
 APPROVED BY: Mark E. Fry

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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



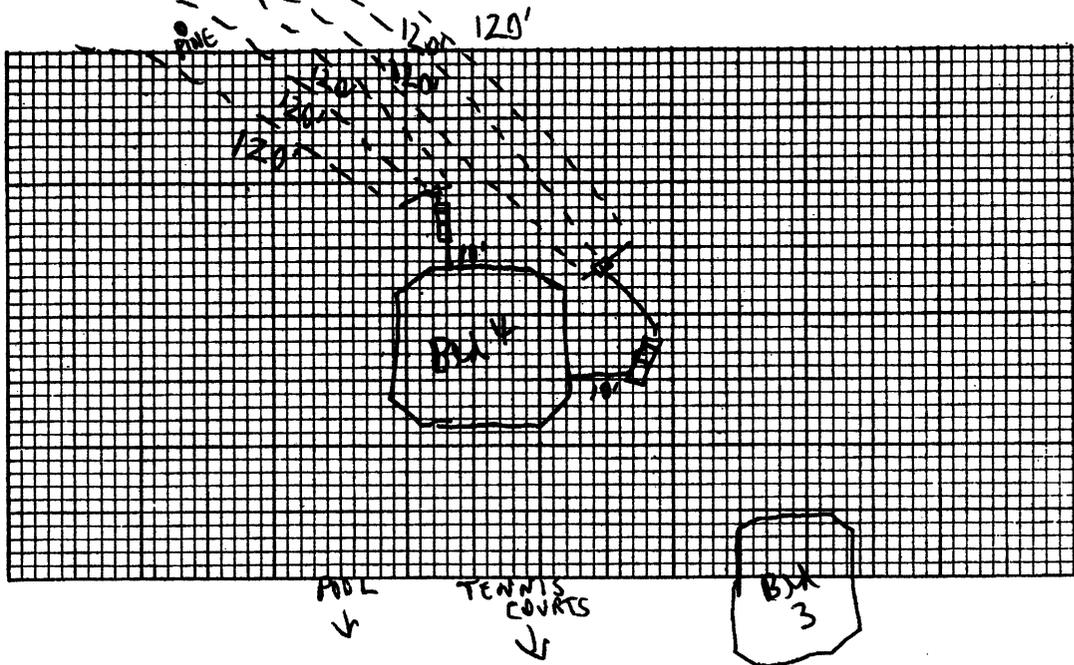
OWNER Foxfield Condominium Bld #4 ADDRESS Foxfield  
 OCCUPANT \_\_\_\_\_ SUBDIVISION \_\_\_\_\_  
 HOUSE \_\_\_\_\_ MOBILE HOME CONDOMINIUM BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(120) 2(120) GALS.) PRIVY: (NUMBER) \_\_\_\_\_  
 No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_ New \_\_\_\_\_ D<sub>1</sub> \_\_\_\_\_  
 Garbage Disposal Unit Yes \_\_\_\_\_ No \_\_\_\_\_ Repaired \_\_\_\_\_ D<sub>2</sub> \_\_\_\_\_  
 Auto. Dishwasher Yes \_\_\_\_\_ No \_\_\_\_\_ WATER SUPPLY:  
 Auto. Wash. Machine Yes \_\_\_\_\_ No \_\_\_\_\_ Individual   
 Nitrification Field 3(120'x30") 3(120'x30") Ft. If well, type:  
 Depth of stone in lines 12" Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_  
 FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_ Distance from nearest  
 FARMERS HOME ADM. CASE # \_\_\_\_\_ pollution \_\_\_\_\_ Ft.  
 Contractor Crisman REMARKS: Sandy  
 Address Carthage  
 PERMIT # \_\_\_\_\_ DATE 10/12/76  
 APPROVED: YES  NO \_\_\_\_\_  
 APPROVED BY: Mark L. Fry

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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



OWNER Foxfire Condominium #5 ADDRESS FOXFIRE  
 OCCUPANT \_\_\_\_\_ SUBDIVISION \_\_\_\_\_  
 HOUSE \_\_\_\_\_ MOBILE HOME Condo BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(120) GALS.) \_\_\_\_\_  
 No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_  
 Garbage Disposal Unit Yes \_\_\_\_\_ No \_\_\_\_\_  
 Auto. Dishwasher Yes \_\_\_\_\_ No \_\_\_\_\_  
 Auto. Wash. Machine Yes \_\_\_\_\_ No \_\_\_\_\_  
 Nitrification Field 2/3(120' X 30') sq. ft. \_\_\_\_\_  
 Depth of stone in lines \_\_\_\_\_  
 FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_  
 FARMERS HOME ADM. CASE # \_\_\_\_\_  
 Contractor Robert Cassman  
 Address Carthage D.C.  
 PERMIT # \_\_\_\_\_ DATE 5-13-77  
 APPROVED: YES \_\_\_\_\_ NO \_\_\_\_\_  
 APPROVED BY: James W. Dielli

LRK 49392

Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_  
 Distance from nearest pollution \_\_\_\_\_ Ft.

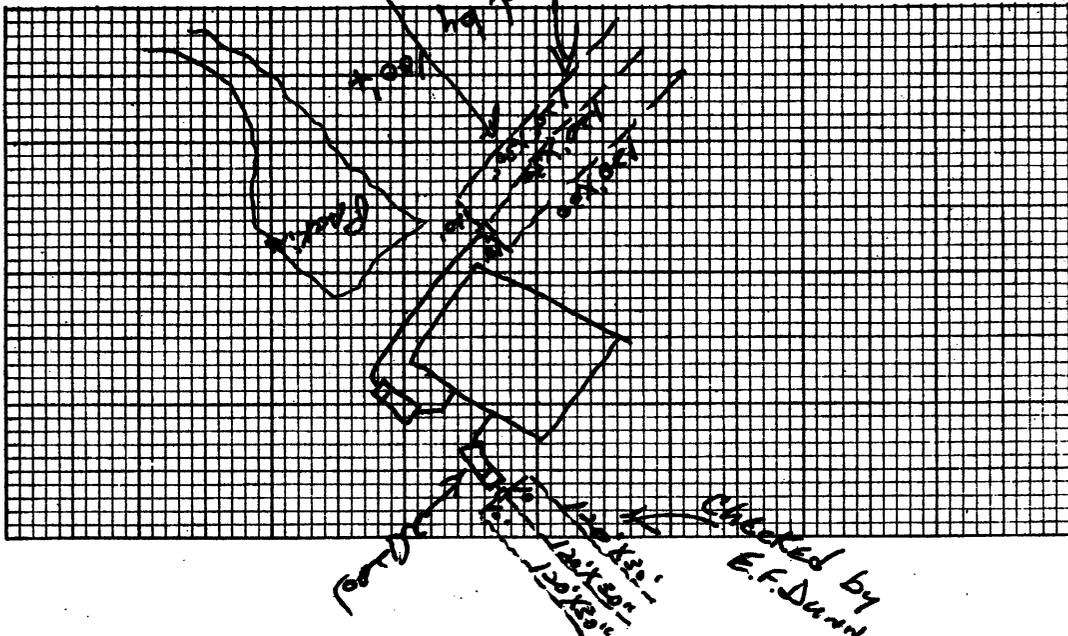
REMARKS: \_\_\_\_\_

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Sanitation

SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



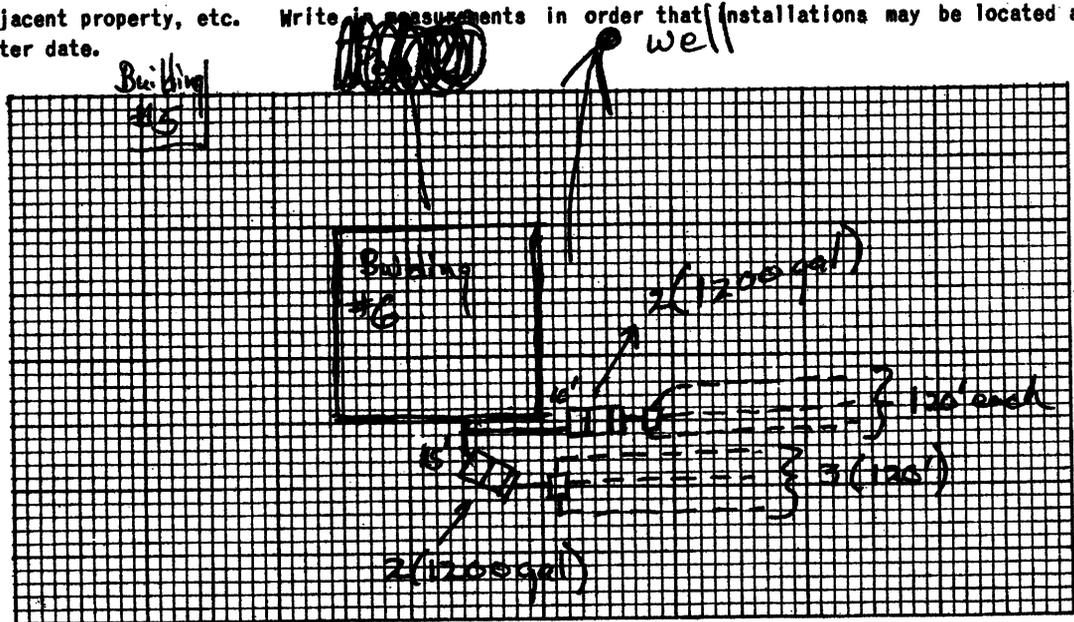
OWNER Foxfire Condominium #6 ADDRESS West End  
 OCCUPANT \_\_\_\_\_ SUBDIVISION Foxfire  
 HOUSE MOBILE HOME BUSINESS \_\_\_\_\_ LOT AREA \_\_\_\_\_ LOT # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(1200 gal), GALS.) PRIVY: (NUMBER \_\_\_\_\_)  
 No. Bedrooms \_\_\_\_\_ No. Bathrooms 2 (1200 gal) New \_\_\_\_\_ Date \_\_\_\_\_  
 Garbage Disposal Unit Yes \_\_\_\_\_ No \_\_\_\_\_ Repaired \_\_\_\_\_ Date LRK 49392  
 Auto. Dishwasher Yes \_\_\_\_\_ No \_\_\_\_\_  
 Auto. Wash. Machine Yes \_\_\_\_\_ No \_\_\_\_\_  
 Nitrification Field 2(12' x 30") & 3(12' x 30") WATER SUPPLY:  
 Depth of stone in lines 12 Individual   
 If well, type:  
 Bored \_\_\_\_\_ Drilled  Dug \_\_\_\_\_  
 Distance from nearest pollution 100 Ft.  
 FARMERS HOME ADM. CASE # \_\_\_\_\_  
 Contractor Robert Crisman REMARKS: good sandy soil  
 Address Carthage no parking on drain lines  
 PERMIT # \_\_\_\_\_ DATE 5-13-77  
 APPROVED: YES  NO \_\_\_\_\_  
 APPROVED BY: Samuel W. Fields

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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write measurements in order that installations may be located at later date.



10' x 10' all lines

OWNER Foxcroft Condo #8 ADDRESS Foxfire N.C.  
 OCCUPANT \_\_\_\_\_ SUB \_\_\_\_\_  
 HOUSE  MOBILE HOME \_\_\_\_\_ BUSINESS \_\_\_\_\_ LOT LAK 49392 # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(1200) GALS.) \_\_\_\_\_ )  
 No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_  
 Garbage Disposal Unit Yes \_\_\_\_\_ No \_\_\_\_\_  
 Auto. Dishwasher Yes \_\_\_\_\_ No \_\_\_\_\_  
 Auto. Wash. Machine Yes \_\_\_\_\_ No \_\_\_\_\_  
 Nitrification Field 3(150' x 30') sq. ft.  
 Depth of stone in lines 12"  
 FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_  
 FARMERS HOME ADM. CASE # \_\_\_\_\_  
 Contractor Walt Holm  
 Address Box 711 Pinehurst, N.C.  
 PERMIT # \_\_\_\_\_ DATE 10-5-79  
 APPROVED: YES 1 NO \_\_\_\_\_  
 APPROVED BY: A. W. Fields

205-208 Foxcroft Dr

Individual \_\_\_\_\_ Public   
 If well, type:  
 Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_  
 Distance from nearest  
 pollution \_\_\_\_\_ Ft.

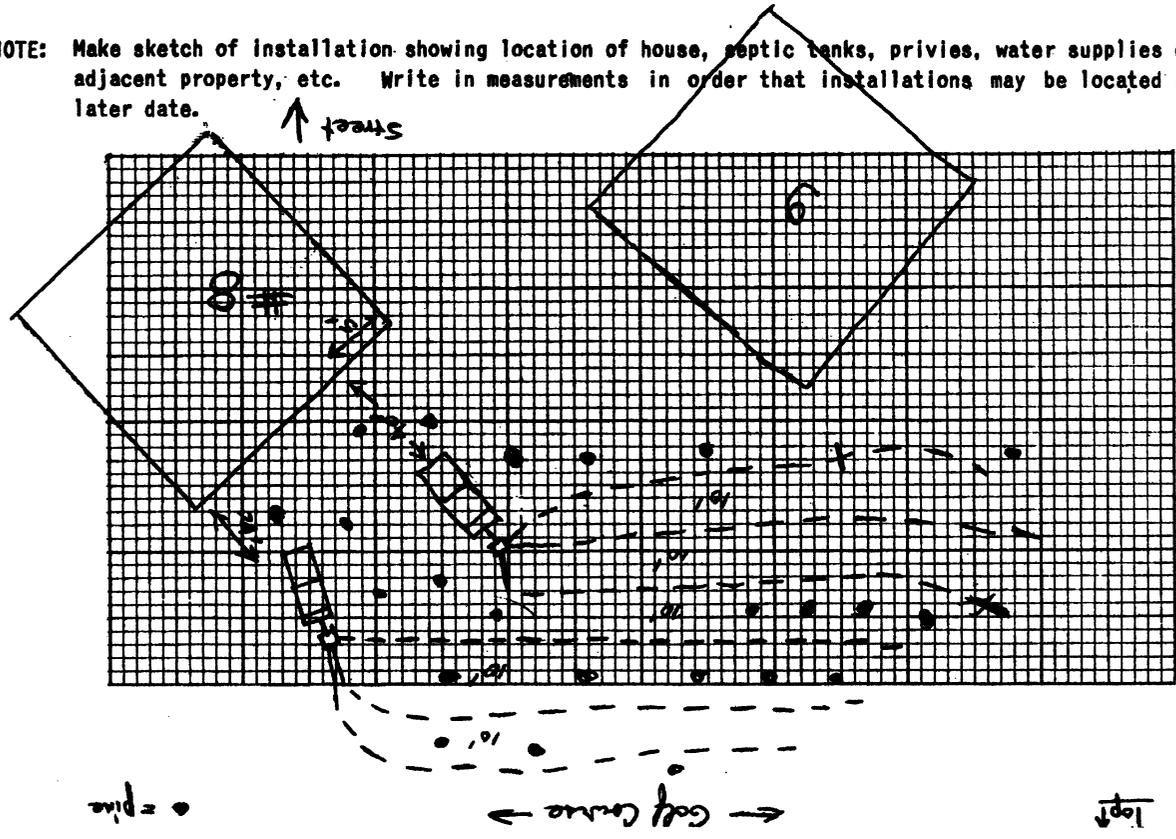
REMARKS: sandy soil

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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.



OWNER Foxfire Condominium #7 ADDRESS Foxfire LLC  
 OCCUPANT Condominium SUBDIVISION LRK 49392  
 HOUSE  MOBILE HOME  BUSINESS  LOT AREA \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(1200) GALS.) PI 209-212 Foxcroft Dr  
 No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_  
 Garbage Disposal Unit Yes  No   
 Auto. Dishwasher Yes  No   
 Auto. Wash. Machine Yes  No   
 Nitrification Field 3(150'x36") sq. ft. & 4(112'x36")  
 Depth of stone in lines 12"  
 FHA CASE # \_\_\_\_\_ VA CASE # \_\_\_\_\_  
 FARMERS HOME ADM. CASE # \_\_\_\_\_  
 Contractor \_\_\_\_\_  
 Address \_\_\_\_\_  
 PERMIT # \_\_\_\_\_ DATE 10-1-79  
 APPROVED: YES  NO   
 APPROVED BY: Samuel W. Fields

WATER SUPPLY: Individual \_\_\_\_\_ Public   
 If well, type:  
 Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_  
 Distance from nearest pollution \_\_\_\_\_ Ft.  
 REMARKS: sandy soil

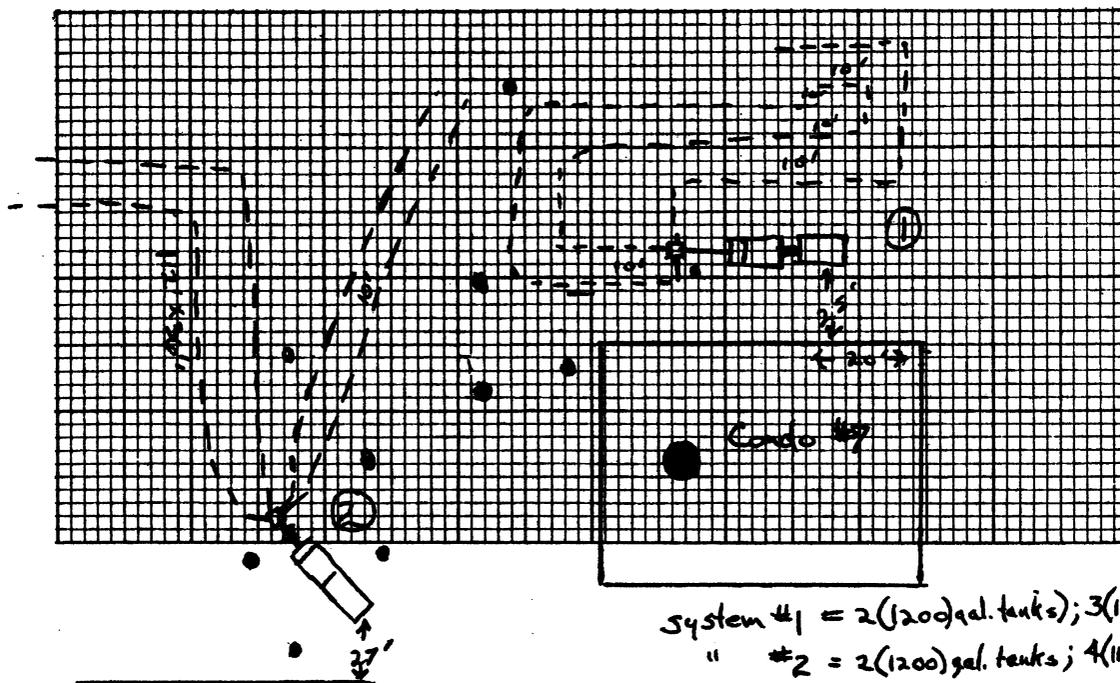
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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH SERVICES

NOTE: Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.

← Golf course →



OWNER Foxcroft Condo #9 ADDRESS Foxfire, N.C.  
 OCCUPANT Condo SUBDIVISION \_\_\_\_\_  
 HOUSE \_\_\_\_\_ MOBILE HOME \_\_\_\_\_ BUSINESS \_\_\_\_\_ LOT # \_\_\_\_\_  
 SEPTIC TANK: (SIZE 2(1200) GALS.) (BER \_\_\_\_\_)  
 No. Bedrooms \_\_\_\_\_ No. Bathrooms \_\_\_\_\_ Date \_\_\_\_\_  
 Garbage Disposal Unit Yes X No \_\_\_\_\_ Date \_\_\_\_\_  
 Auto. Dishwasher Yes X No \_\_\_\_\_  
 Auto. Wash. Machine Yes X No \_\_\_\_\_  
 Nitrification Field 3(150'x30') sq. ft. Drive \_\_\_\_\_ Public   
 Depth of stone in lines 12"  
 If well, type: Bored \_\_\_\_\_ Drilled \_\_\_\_\_ Dug \_\_\_\_\_  
 Distance from nearest pollution \_\_\_\_\_ Ft.  
 REMARKS: sandy clay soil  
 Contractor Walter Hobbs  
 Address Box 711 Pinehurst N.C.  
 PERMIT # \_\_\_\_\_ DATE 10-5-79  
 APPROVED: YES  NO \_\_\_\_\_  
 APPROVED BY: Samuel W. Fields

LRK 49392  
 201-204 Foxcroft Drive

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SEWAGE DISPOSAL RECORD

DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES

NOTE: <sup>Top ↑</sup> Make sketch of installation showing location of house, septic tanks, privies, water supplies on adjacent property, etc. Write in measurements in order that installations may be located at later date.

