

*Follow records
Ockona*

*Final Approval PHA held up until
lot is properly landscaped. C. Od*

Form: HB-296
CCHD

**ENVIRONMENTAL HEALTH DIVISION
CARTERET COUNTY HEALTH DEPARTMENT**

92192

CERTIFICATE OF COMPLETION: (Ground Absorption Sewage Disposal System - G-S Chapter 130 - Article 13c)

OWNER: ~~John Doe~~ *Joe Palazzo* DATE: *06-09-82*

INSTALLER: *Glenw. Kaylor* DATE COMPLETED: *7-12-82*

Notice: This certification of completion in no way binds the Public Health Sanitation Division of Carteret County Health Department nor implies a guarantee that this system will function in all circumstances, but that the system is properly installed in accordance with applicable rules and regulations of the Carteret County Health Department and can reasonably be expected to perform properly under normal conditions of use and maintenance.

By: *[Signature]*

ENVIRONMENTAL HEALTH DIVISION
 CARTERET COUNTY HEALTH DEPARTMENT

LAND USE: _____
 IMPROVEMENT PERMIT
 OWNER: Joe Palazzo
501 St. Rose

PHONE: 223-5316 DATE: 9 Aug. 1982
 92192

ADDRESS: Highway 24, M. City

PROPERTY LOCATION: Religious
Church # 12

TYPE STRUCTURE: Home

NO. BEDROOMS: 3 NO. BATHS: 2

WATER SOURCE: Private

GARBAGE GRINDER: YES () NO (X)

AUTO DISHWASHER: YES (X) NO ()

AUTO WASHING MACHINE: YES (X) NO ()

Perc. Rate (if applicable): _____

SIZE OF TANK: 1000 GAL.

NO. LINES: 2 WIDTH: 3 1/2"

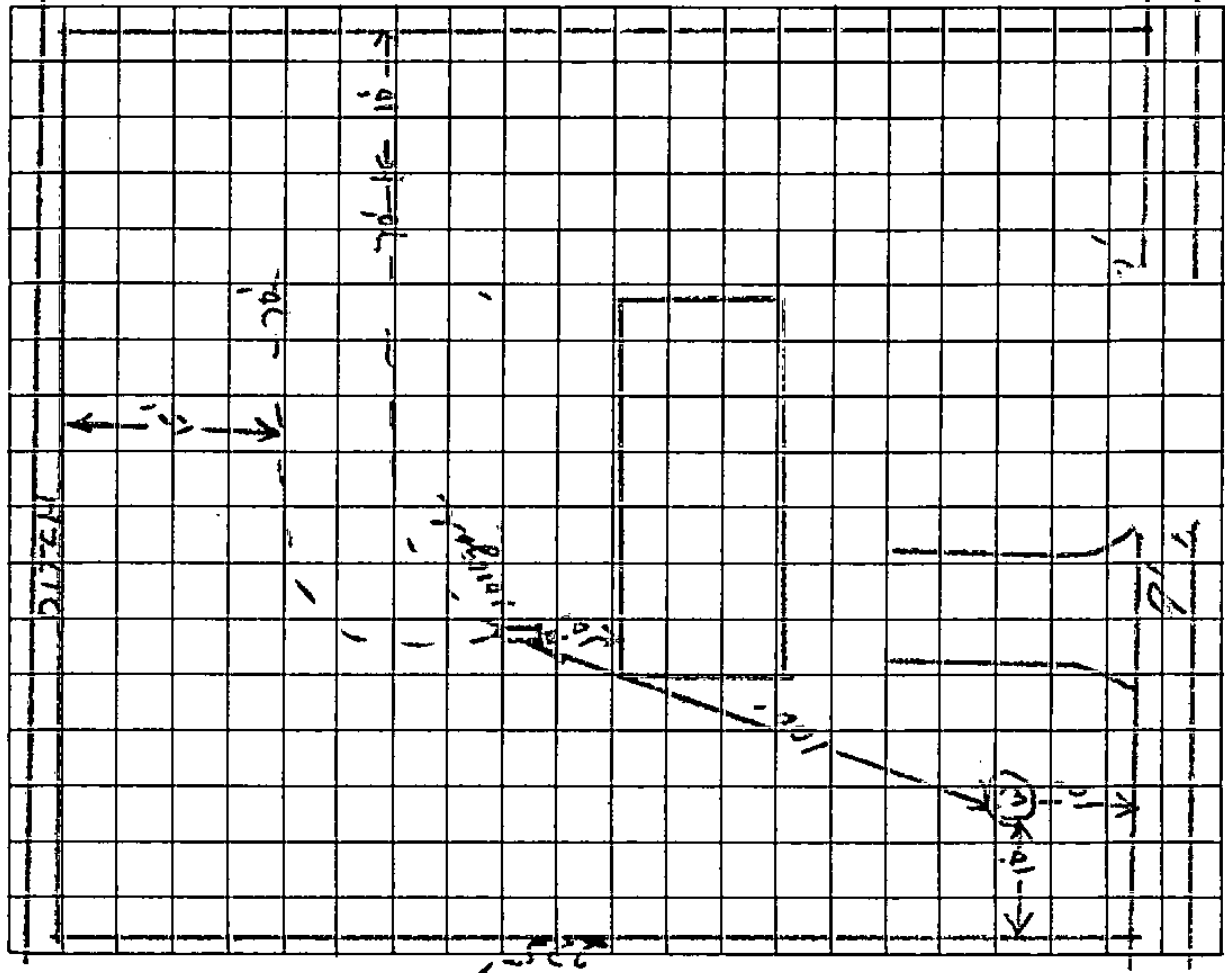
TOTAL: 420 SQ. FT.

TOTAL LENGTH: 140 FT.

HORIZONTAL DISTANCE FROM WELL: 100 FT.

NOTICE: Construction must comply with all state and local regulations. Do not install well until well site has been approved. Do not cover any portion of system until approved on final inspection.

IMPROVEMENTS PERMIT BY: _____
 Agent



ENVIRONMENTAL HEALTH DIVISION
 CARTERET COUNTY HEALTH DEPARTMENT
 BEAUFORT, N.C. 28516