

HEREBY CERTIFY THAT THE INDIVIDUAL WATER SUPPLY SYSTEM AND INDIVIDUAL SEWAGE DISPOSAL SYSTEM INSTALLED OR PROPOSED FOR INSTALLATION IN THE SUBDIVISION ENTITLED FULLY MEETS THE REQUIREMENTS OF THE NORTHAMPTON COUNTY HEALTH DEPARTMENT AND HEREBY APPROVED AS SHOWN.

COUNTY HEALTH DIRECTOR OR AUTHORIZED REPRESENTATIVE



ALBERT LEWIS INGRAM

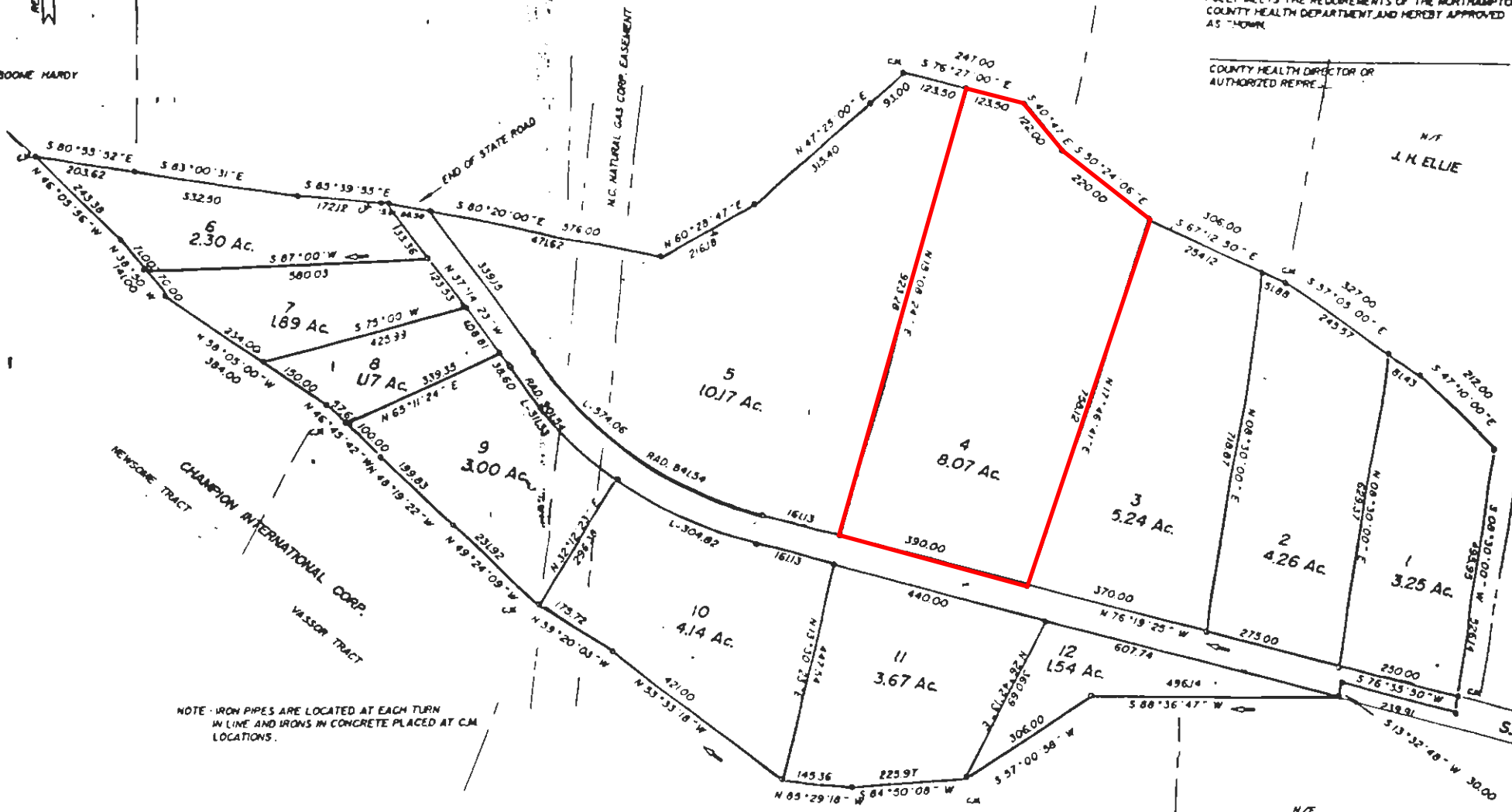
TWIN CITY RIFLE CLUB

MARY BOOME HARDY

N/T J.H. ELLIE

N/T LARRY HARDY, JR.

N/T LEWIS INGRAM



NOTE - IRON PIPES ARE LOCATED AT EACH TURN IN LINE AND IRONS IN CONCRETE PLACED AT C.M. LOCATIONS.

Scale bar markings: 0, 1000, 2000, 3000, 4000, 5000, 6000, 7000, 8000

Scale bar markings: 0, 100, 200, 300, 400, 500, 600, 700, 800, 900, 1000