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12076

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Benton & Wanda Moffett DATE Dec. 7, '90 PERMIT NO 20-1-A61

PHONE: Business _____ Home _____

LOCATION 1100 TR 1236 (Stonemanden) TR Tiger Lane at end S. R. No. _____

SUBDIVISION NAME CUT LAKE NORMAN LOT NO. 61 SECTION OR BLOCK NO. 6

House (✓) Mobile Home ( ) Business ( ) Other Upgrading sewage system

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Lot Area EXISTING

Character & Porosity of Soil ps clay

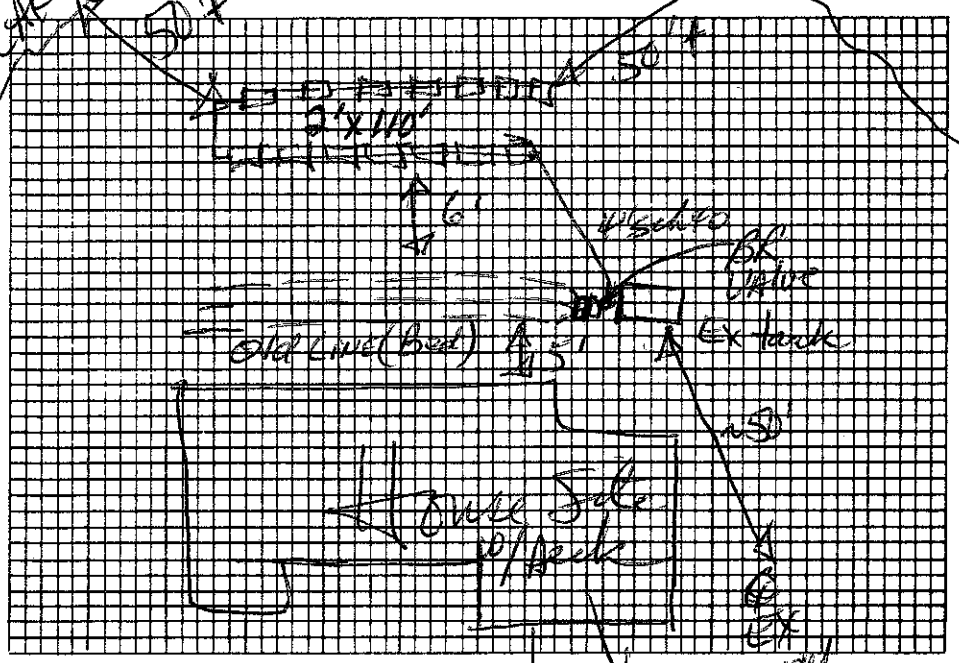
Percolation Rate 1.3

Topography 2-4%

Depth to Water Table 6+

Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 1

Sq. Ft. _____ Linear Ft. 110'

Depth of Stone in Lines 16" 24"

Water Supply: Individual (✓) panel GF

Public ( )

Installed by John Hovis

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 12-7-90

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

IREDELL COUNTY HEALTH DEPARTMENT

12076

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Benton and Wanda Moffett DATE Nov-1, 90 PERMIT NO 2D-1-A-61

PHONE: Business _____ Home _____

LOCATION 1100 TR 1236 (Stonemaker) TR Tegi Lane at end on Lft S. R. No. _____

SUBDIVISION NAME CLAT Lake Norman LOT NO. 61 SECTION OR BLOCK NO. 6

House (✓) Mobile Home ( ) Business ( ) Other _____

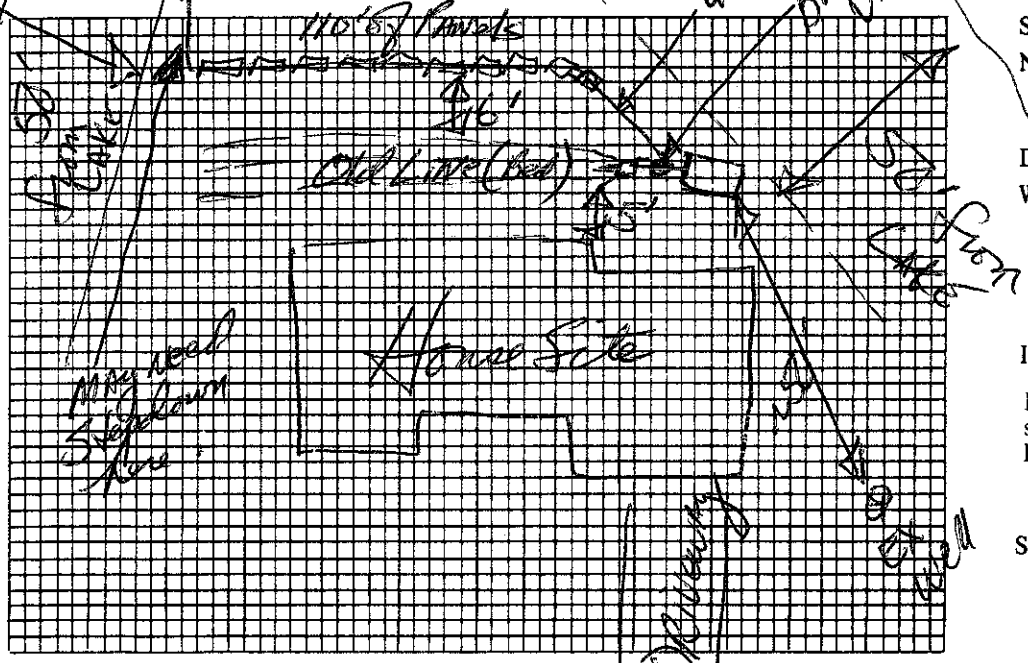
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site ~~Suitable~~ PS Yes (✓) No ( )

Character & Porosity of Soil _____
Percolation Rate _____
Topography _____
Depth to Water Table _____
Rock or other impervious formations _____

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field: Existing +
No. of Lines 1 new line
Sq. Ft. _____ Linear Ft. 110' & 16'
Depth of Stone in Lines 18"
Water Supply: Individual (✓) panels
Public ( ) Gravity flow

Installed by _____

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: Wanda Moffett

IMPROVEMENTS PERMIT BY David R. Hinson

COMMENTS: Set Ball Ren Valve as shown. Use stepdown in new line only if needed.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold