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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 Thomas & Betty Sanders DATE 10-16-86 PERMIT NO. 536

PHONE: Business _____ Home _____

LOCATION 1100 TR 1115 TR across from Church graveyard
Bear Rt on left S. R. No. _____

SUBDIVISION NAME L.W. LOT NO. 483 SECTION OR BLOCK NO. 8

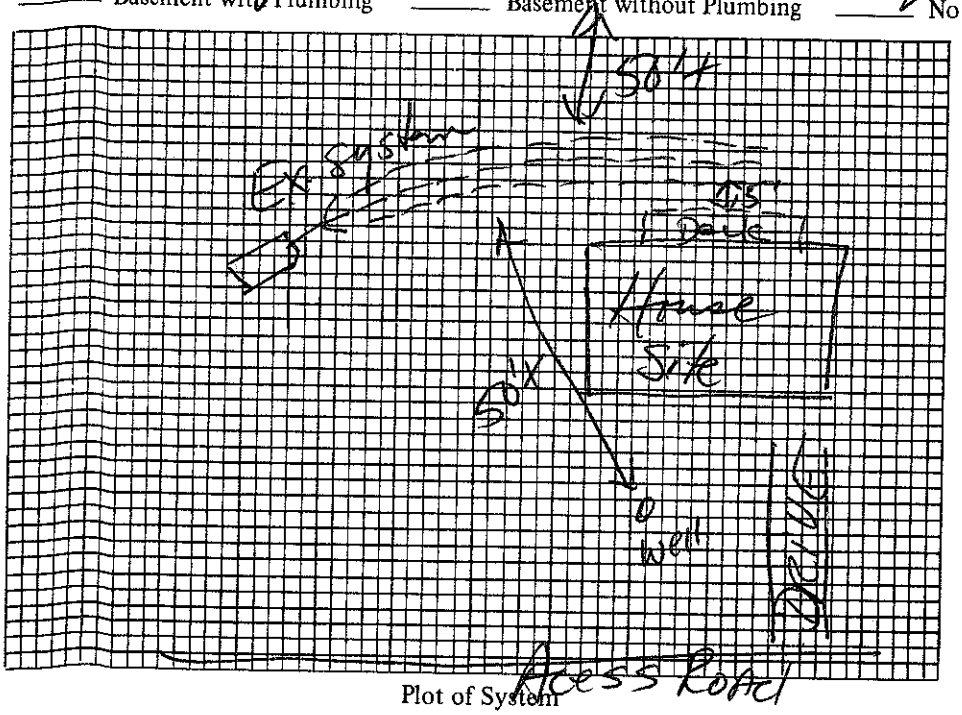
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil		
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate		
Auto. Wash. Machine	Yes (✓)	No ( )	Topography		
Site Suitable	Yes (✓)	No ( )	Depth to Water Table		
			Rock or other impervious formations		

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system OK at time of inspection
Existing D.W. Mobile Home to be moved off when house is complete.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: David R. Hinson, R.S. DATE 10-16-86

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

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

OWNER OR CONTRACTOR Thomas R Davidson DATE 4-20-82 PERMIT NO. _____

PHONE: Business _____ Home 873-1905

LOCATION Hwy 70 W on US 70 Past Eight Stay right at fork 1.3 mile _____ S. R. No. 1115

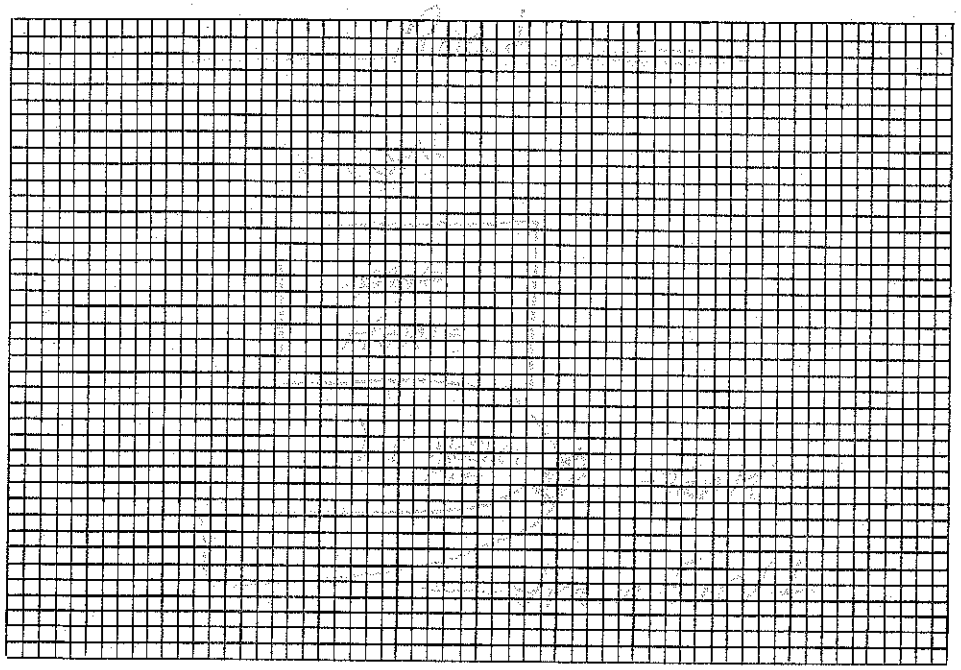
SUBDIVISION NAME Lake Norman LOT NO. 4693 SECTION OR BLOCK NO. 5

House ( ) Mobile Home ( ) Business ( ) Other Double wide

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes	( )	No	(✓)	Character & Porosity of Soil Existing System
Auto. Dishwasher	Yes	( )	No	( )	Percolation Rate
Auto. Wash. Machine	Yes	(✓)	No	( )	Topography
Site Suitable	Yes	( )	No	( )	Depth to Water Table
					Rock or other impervious formations

Lot Area Over ½ acre



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 240
Depth of Stone in Lines 24
Water Supply: Individual ( )
Public ( )

Installed by E. T. Erwin
March 1982

IMPROVEMENTS PERMIT BY _____

COMMENTS: Washing machine waste water to run into pit

CERTIFICATE OF COMPLETION BY J. C. Wright DATE 4-20-82

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

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