4627310090

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 Charles E. Williams DATE 12-16-86 PERMIT NO. 633

PHONE: Business _____ Home _____

LOCATION 1100 TR 1115 TR 1455 (E. Lakeviews) ~½ - ¾ mile on Rt.

S. R. No. _____

SUBDIVISION NAME L.N. LOT NO. 339 SECTION OR BLOCK NO. 8

Future Temporary

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 Yes (✓) No ( )

Lot Area 20000 SQ FT

Character & Porosity of Soil clay

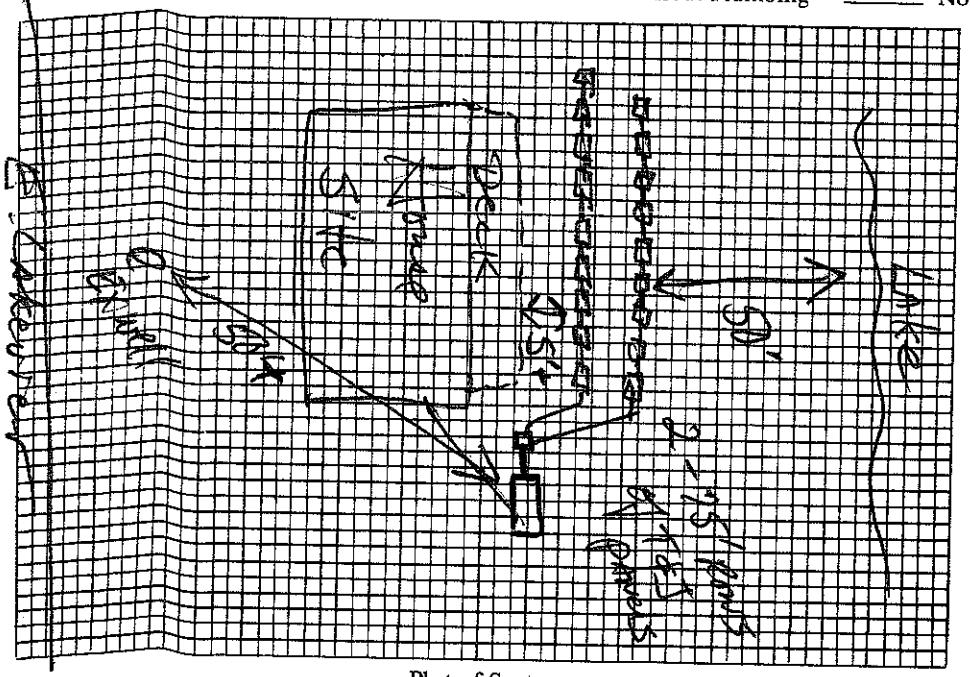
Percolation Rate 4

Topography ~10%

Depth to Water Table 4FT

Rock or other impervious formations some scattered rock

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. _____ Linear Ft. 150'

Depth of Stone in Lines 24" Trench

Water Supply: Individual (✓) ponds

Public ( )

Installed by J. H. Erwin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. H. Erwin, RS. DATE 12-16-86

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

10:30

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 Charles E. Williams DATE 9-22-86 PERMIT NO. 394

PHONE: Business ______ Home ______

LOCATION 1100 TR 1115 TR 1453 (E. Lakeview) ~1/2-3/4 mile on Rt. S. R. No. ______

SUBDIVISION NAME L.N. LOT NO. 339 SECTION OR BLOCK NO. 8

Temporary

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 Yes (✓) No ( )

Lot Area 20000 ft²

Character & Porosity of Soil Clay

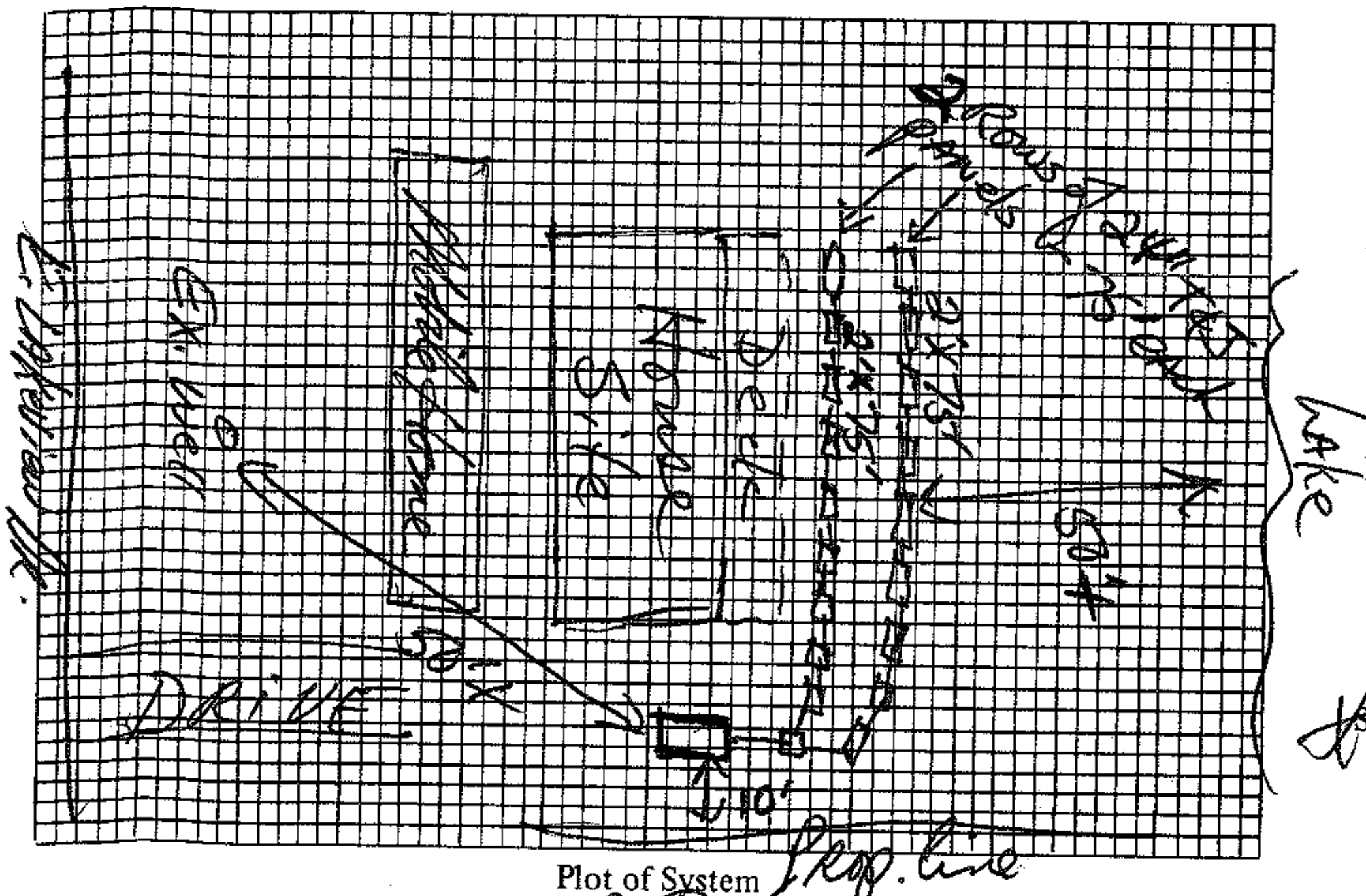
Percolation Rate ______

Topography 10-15%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

____ Basement with Plumbing ____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals 24"

Nitrification Field:

No. of Lines 2 Rows of 2x75 Panels

Sq. Ft. ______ Linear Ft. 150

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 Charles Williams

IMPROVEMENTS PERMIT BY [signature], R.S.

COMMENTS: Existing sewage system to be abandoned and filled in. Mobile home to be moved off lot when house is finished.

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