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 Melvin E. Jones DATE 5-18-81 PERMIT NO. 141

PHONE: Business _____ Home _____

LOCATION 150 W. to 1211. Turn left on 1219 1 mile on left

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 137 SECTION OR BLOCK NO. 10

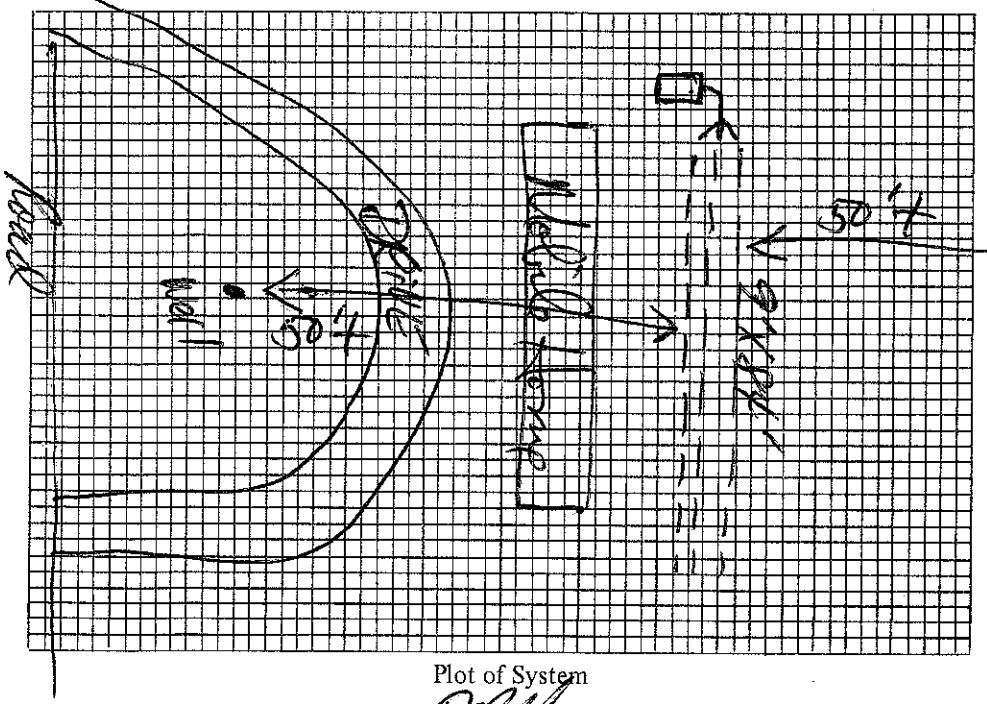
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area ± 3/4 AC.

Character & Porosity of Soil clay loam
Percolation Rate 5 Mpi
Topography S-10%
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.
Nitrification Field:
No. of Lines 3
Sq. Ft. 210 + Linear Ft. 250+
Depth of Stone in Lines 16"+
Water Supply: Individual (✓)
Public ( )

Installed by Owner

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

Signed: _____

IMPROVEMENTS PERMIT BY DKH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David K. Hanson DATE 5-18-81

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

9.45

EDELL 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 Melvin E. Jonas DATE 4-22-81 PERMIT NO. 92

PHONE: Business 376-8131 Home

LOCATION 150 W. TC 1211 Bear left on 1219 1 mile on left S. R. No.

SUBDIVISION NAME L.N. LOT NO. 137 SECTION OR BLOCK NO. 10

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area ~3/4 AC

Character & Porosity of Soil Clay loam

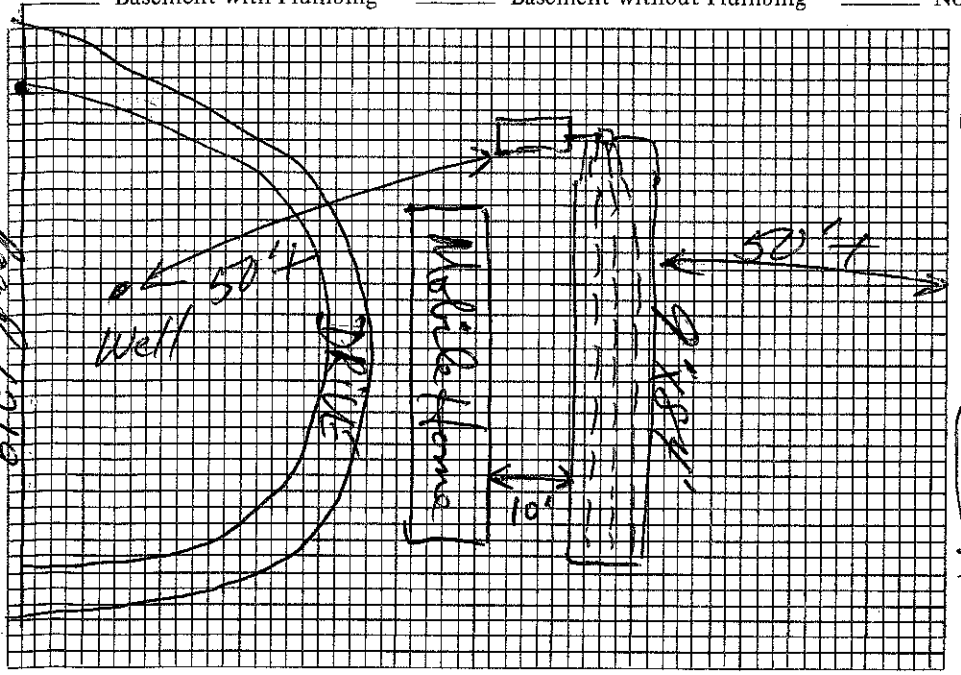
Percolation Rate 30 min/in

Topography 8-10% slope

Depth to Water Table unk. 4'+

Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines 16"

Water Supply: Individual (✓)

Public ( )

Installed by

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

X Signed: Melvin E Jonas

IMPROVEMENTS PERMIT BY David R. Hinson

COMMENTS:

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