4627968090

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 F. J. Beasley DATE 10/28/87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W. TL Paradise Peninsula TL Greenbay Gov 1.5 miles TR on dirt access on point S. R. No. _____

SUBDIVISION NAME CL+T LOT NO. 101 SECTION OR BLOCK NO. 10

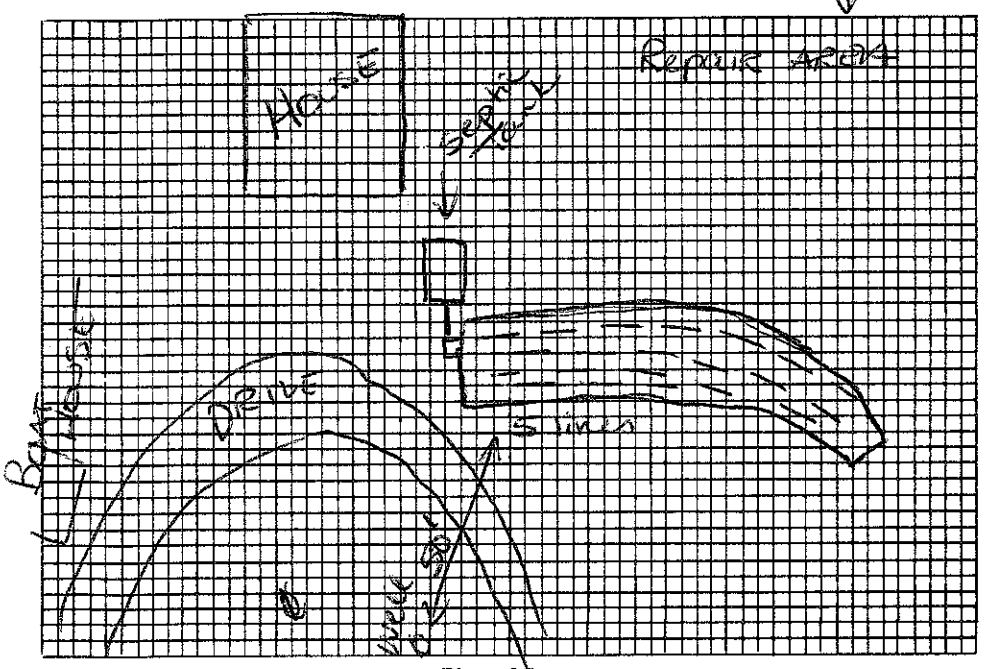
House (✓) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms 2 No. Bathrooms 1-2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No ( )
Auto. Wash. Machine Yes ( ) No ( )
Site Suitable Yes ( ) No ( )

Character & Porosity of Soil clay
Percolation Rate ~1.4
Topography 2-6%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area existing

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 5
Sq. Ft. ~750 Linear Ft. ~250
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by MASSEY SEPTIC TANK/CABARRUS Co.
I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: bed narrows @ end to 6' to maintain distances from lake and property line

CERTIFICATE OF COMPLETION BY Andie C Bruce DATE 10/28/87

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

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

OWNER OR CONTRACTOR F.J. Beasley DATE Oct 8, '87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150W TR Paradise Peninsula TR Cranbay Go ~ 1.5 miles TR on dirt access road on point S. R. No. _____

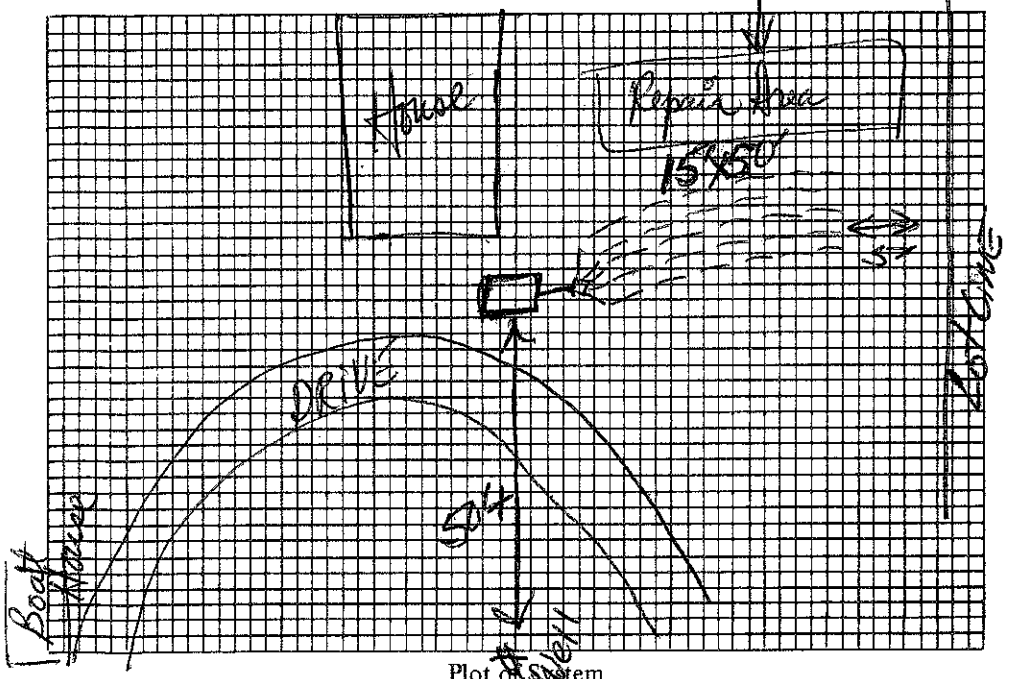
SUBDIVISION NAME CL&T LAKE NORMAN LOT NO. 101 SECTION OR BLOCK NO. 10

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

No. Bedrooms 2 No. Bathrooms 1-2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No ( )
Auto. Wash. Machine Yes ( ) No ( )
Site Suitable Yes ( ) No ( )
Lot Area Existing

Character & Porosity of Soil clay
Percolation Rate 2, 4
Topography 2 6a 4+
Depth to Water Table
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 5 (15'X50')
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed Todd Beasley

IMPROVEMENTS PERMIT BY David R. Henson, L.S.

COMMENTS: Pull plumbing out at existing ground level. Set tank so top is at ground level; use excess dirt to mound over tank. Keep drainfield as shallow as possible

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULA

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

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