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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 Frank H. Mitchell DATE 6/11/87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W, Rt on Waddell, Lf at Old Soc

S. R. No. _____

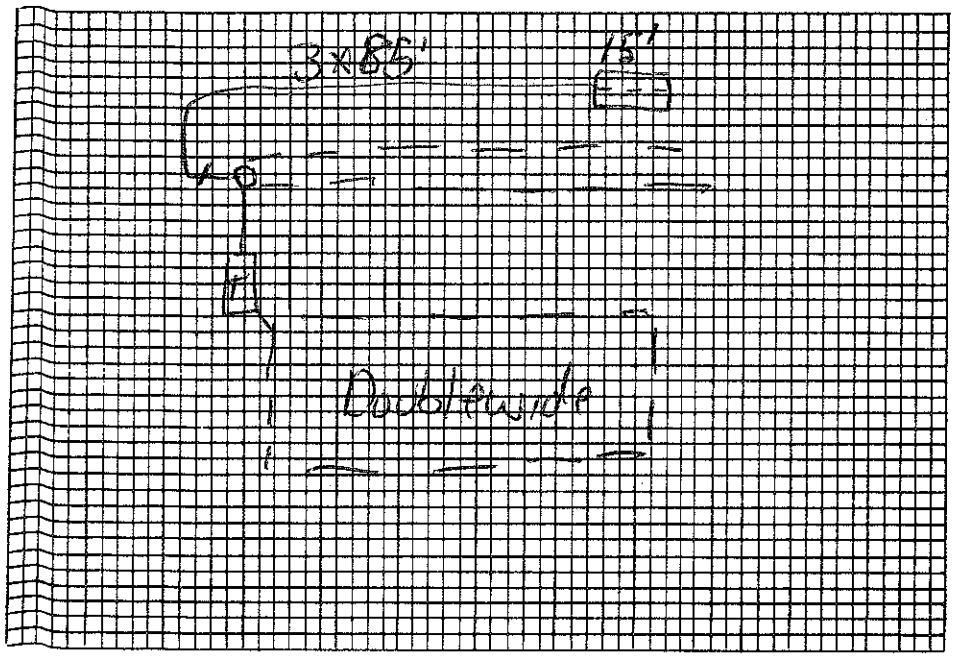
SUBDIVISION NAME CLT LOT NO. 301 SECTION OR BLOCK NO. 11

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

No. Bedrooms 3	No. Bathrooms 2		Character & Porosity of Soil		
Garbage Disposal Unit	Yes ( )	No (✓)	Percolation Rate		
Auto. Dishwasher	Yes (✓)	No ( )	Topography	Exist	
Auto. Wash. Machine	Yes (✓)	No ( )	Depth to Water Table		
Site Suitable	Yes (✓)	No ( )	Rock or other impervious formations		

Lot Area _____

___ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank Exist Gals.

Nitrification Field:
No. of Lines _____
Sq. Ft. 900 Linear Ft. 85' + 16' In Bed
Depth of Stone in Lines _____

Water Supply: Individual (✓)
Public ( )

Installed by Lavon Benton

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

Signed: _____

IMPROVEMENTS PERMIT BY David Hinson RS

COMMENTS: 15' in bed at end of trench

CERTIFICATE OF COMPLETION BY _____ DATE 6/11/87

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 Frank M. Mitchell DATE 3-21-79 PERMIT NO. 66

PHONE: Business _____ Home 704 554 6438

LOCATION 150w TR on 1458 near end of Lot

SUBDIVISION NAME L-M S. R. No. _____

LOT NO. 301 SECTION OR BLOCK NO. 11

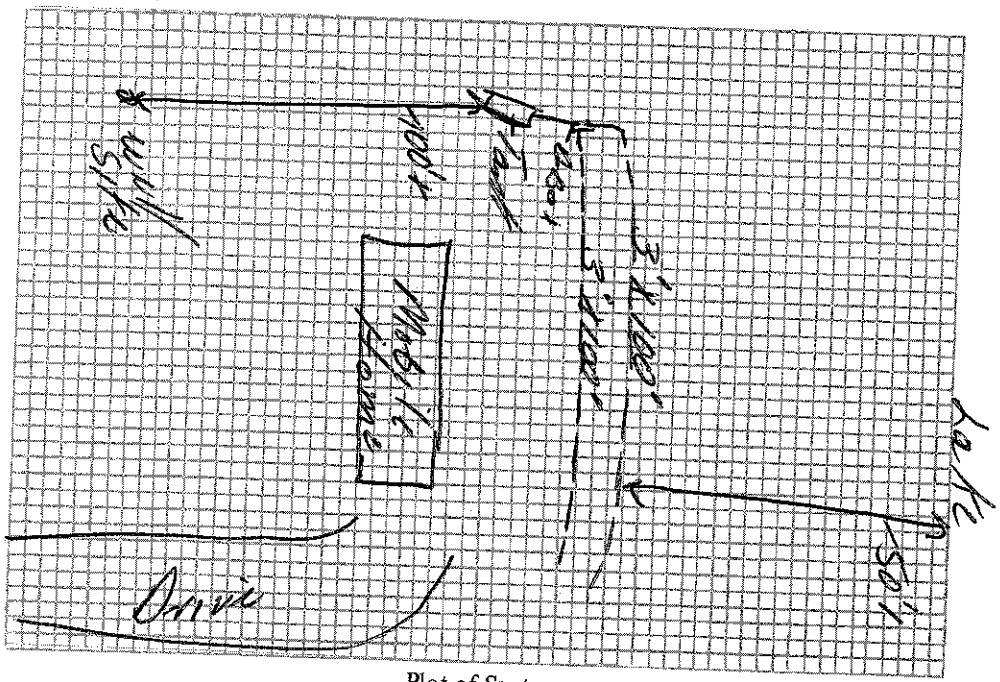
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 3 3/4 ac

Character & Porosity of Soil Clay loam
Percolation Rate 60 min/in
Topography 10 to 15 % Slope
Depth to Water Table 6 to 8'
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Wayne Gibson

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY John Houston DATE 3-21-79

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