4634796222

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 William D. McCaffrey DATE 6-19-84 PERMIT NO. 192

PHONE: Business _____ Home _____

LOCATION 1102 on left before All Season's Marina
TL dirt Street off NR S. R. No. _____

SUBDIVISION NAME Former Annie Hawcliff prop LOT NO. 3 SECTION OR BLOCK NO. A

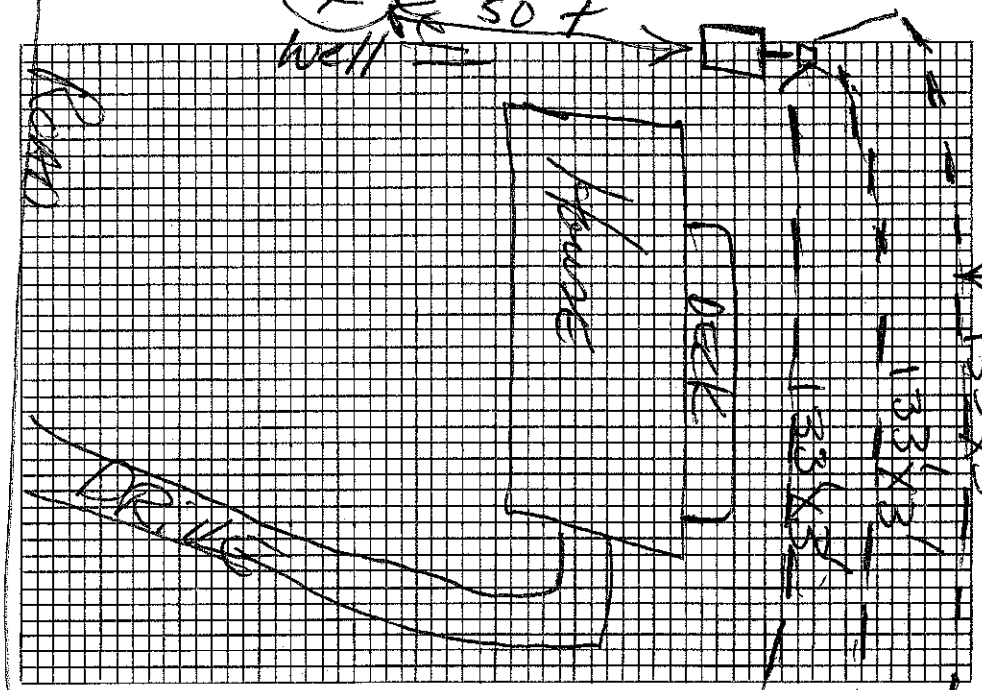
House (X) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No ( )	Percolation Rate		
Auto. Dishwasher	Yes ( )	No ( )	Topography	G-S %	
Auto. Wash. Machine	Yes ( )	No ( )	Depth to Water Table		
Site Suitable	Yes ( )	No ( )	Rock or other impervious formations	NONE observed	

Lot Area 20,000 ft² +

Character & Porosity of Soil Heavy Clay loam – Parent mat Orange Clay



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 200 Linear Ft. 400
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by Bobby Mayhew

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

Signed: _____

IMPROVEMENTS PERMIT BY F. A. Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 6-19-84

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 [redacted] William McCaffrey DATE 1-27-83 PERMIT NO. 28

PHONE: Business _____ Home _____

LOCATION 1102 X I77 3 miles on left TL dirt Road Across From Lakeshore Estates 2nd ENTRANCE (ONR on H2O) S. R. No. _____

SUBDIVISION NAME formerly Annie Knox Honeycutt prop LOT NO. 3 SECTION OR BLOCK NO. A

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

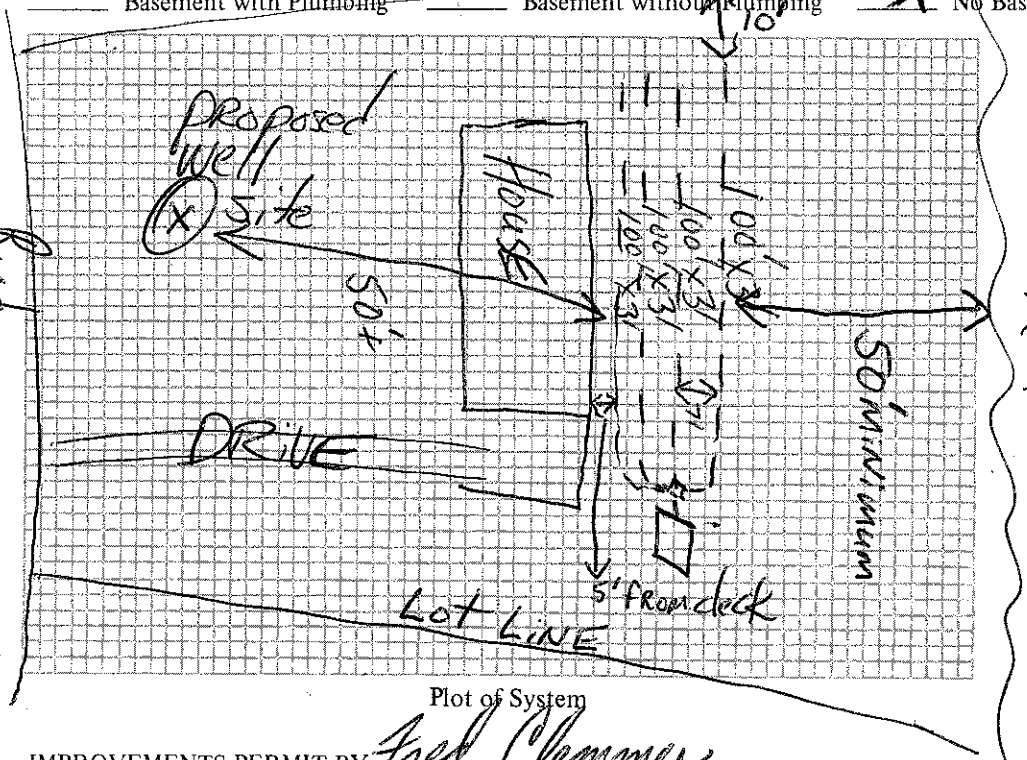
No. Bedrooms 3 No. Bathrooms 2½

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

Character & Porosity of Soil Heavy clay
Percolation Rate .3 gal/ft²/day
Topography 6-10%
Depth to Water Table _____
Rock or other impervious formations NONE observed

Lot Area .6 ACRE

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by _____

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

Signed: *W. T. McCaffrey

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Use well tile to provide Access to Septic tank

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

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