4635-48-7299

IREDELL COUNTY HEALTH DEPARTMENT

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

OWNER OR CONTRACTOR Jimmy D. Puckett DATE 1/7/92 PERMIT NO. ———

PHONE: Business ——— Home 664-1722

LOCATION Shoreline Lp. 1st entrance, cross & come at lake to 2nd driveway on (R) S. R. No. ———

SUBDIVISION NAME Bayview Estates LOT NO. 13 SECTION OR BLOCK NO. ———

House (Y) Mobile Home ( ) Business ( ) Other ———

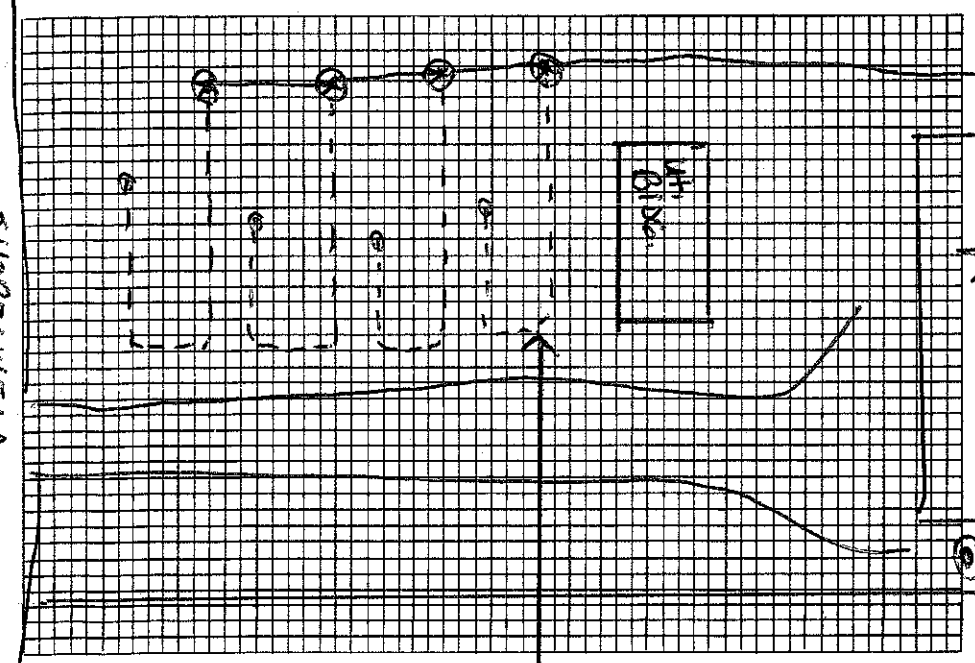
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area Existg

Character & Porosity of Soil P - c (wk) (SS)
Percolation Rate 4
Topography fp
Depth to Water Table fp
Rock or other impervious formations 5

——— Basement with Plumbing ——— Basement without Plumbing ——— No Basement



Plot of System

Size of Tank 1000 / 1000 Gals.
Nitrification Field:
No. of Lines 4 @ 50' x 3'
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (Y)
Public ( )

Installed by T W Simmons

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

Signed: ———

IMPROVEMENTS PERMIT BY ———

COMMENTS: ———

CERTIFICATE OF COMPLETION BY Wesley Sparks DATE 1/7/92

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

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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 Jimmy G. Puckett DATE May 6, '91 PERMIT NO. _____

PHONE: Business _____ Home 664-1722

LOCATION 1100 TR 1112 (Statts Ed.) TR Shoreline Coop (1st entrance around curve at lake 2nd paved driveway to right S. R. No. _____

SUBDIVISION NAME Bayview Estates LOT NO. 13 SECTION OR BLOCK NO. _____

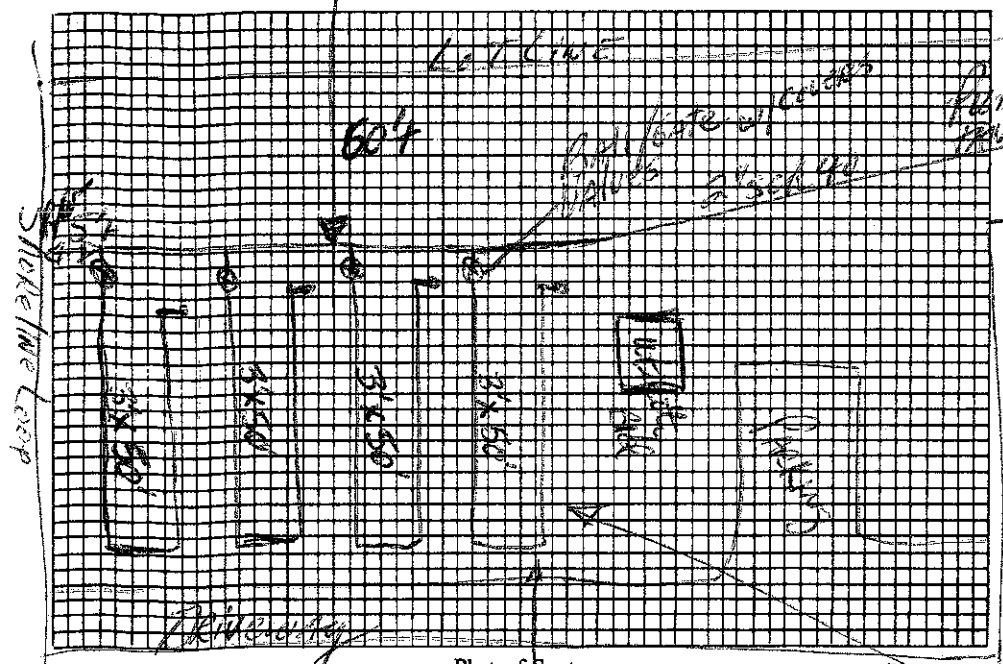
House (✓) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms ~3 No. Bathrooms ~2

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	ps clay	
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	1"	
Auto. Wash. Machine	Yes ( )	No ( )	Topography	~2%	
Site Suitable	Yes ( )	No ( )	Depth to Water Table	4'+	
			Rock or other impervious formations	none	

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank Existing Gals. 1000 gal. pump tank

Nitrification Field:

No. of Lines 4

Sq. Ft. 600 Linear Ft. 200

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 Improvements Permit.

Signed: ✗ Patty Puckett

* Watch out for underground powerlines, etc.

IMPROVEMENTS PERMIT BY _____

COMMENTS: Set Ball Run Drive between existing septic tank & drainfield. Divert flow to pump tank. Use 1½" sch 40 laterals with one 5/32" hole drilled every 5 feet. 2' pressure head. Pump specs 17 gpm at approx. ~20' total head.

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

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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 Jimmy G. Puckett DATE May 19, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TC 1112 TR 1st Shoreline Loop round about curve to left (at lake) S. R. No. _____

SUBDIVISION NAME Bayview Estates LOT NO. 13 SECTION OR BLOCK NO. _____

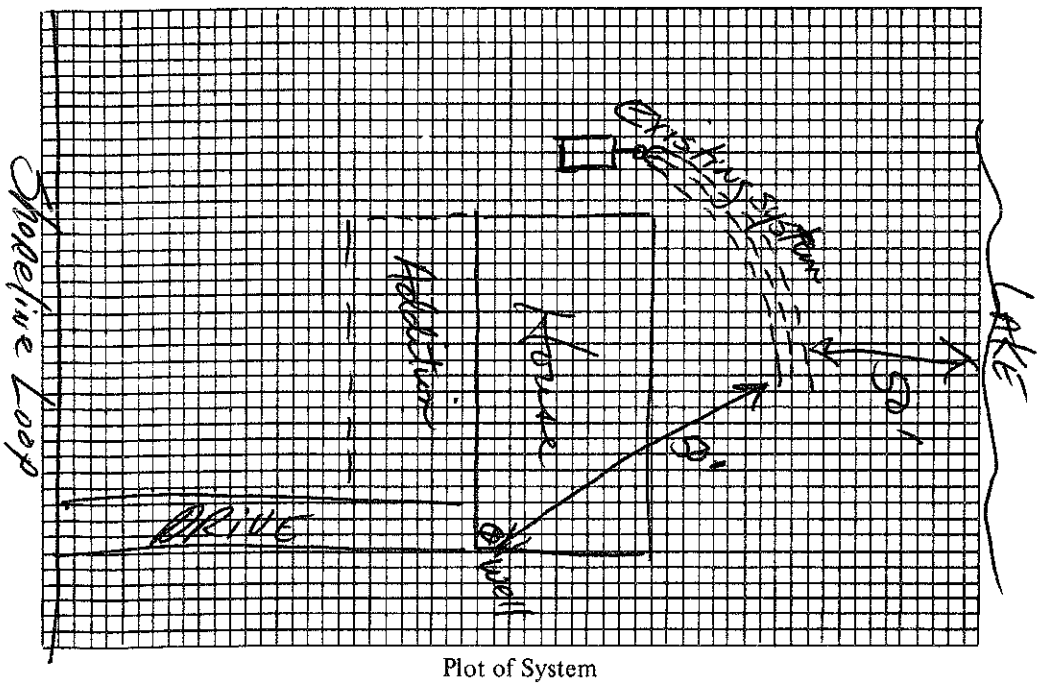
House (✓) Mobile Home ( ) Business ( ) Other Addition of Rec. room & office

No. Bedrooms existing 2 No. Bathrooms 1-2

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

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines Existing

Sq. Ft. _____ Linear Ft. _____

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: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system showing no sign of malfunction at time of inspection.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: [signature], RS. 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