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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 Irwin Belk DATE 10-11-85 PERMIT NO. 457

PHONE: Business CARE TAKERS Home S House

LOCATION 215 X I 77 TL 1206 TR 1608 TL 1181
N 1.2 Mile on left TL Lock Vista Sign on left S. R. No.

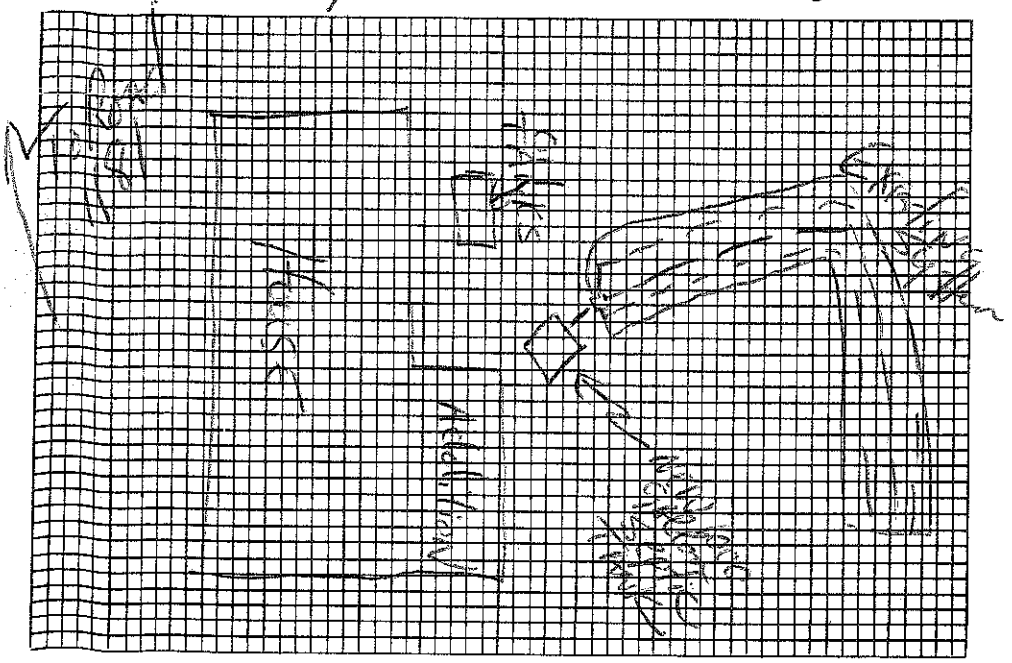
SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

House (X) Mobile Home ( ) Business ( ) Other 1 Bedroom + Kitchen Addition

No. Bedrooms 3 No. Bathrooms 2

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

___ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank 1000 w/baffle Gals.

Nitrification Field:

No. of Lines

Sq. Ft. ___ Linear Ft.

Depth of Stone in Lines

Water Supply: Individual (X)
Public ( )

Within Storage Shed

Installed by J. Ervin Const.

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

Signed:

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS:

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 10-11-85

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 Irwin Belk DATE 10-2-85 PERMIT NO. 340

PHONE: Business CARETAKER'S House Home

LOCATION 115 X 1077 TL 1206 TR 1108 TL 1181

N 1.2 mi on Left Hand Vista Sign S. R. No.

SUBDIVISION NAME CAT CARETAKER'S House LOT NO. SECTION OR BLOCK NO.

REPAIR

House (X) Mobile Home ( ) Business ( ) Other 1 Bedroom + Kitchen Addition

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes (X) No ( )

Character & Porosity of Soil

Percolation Rate

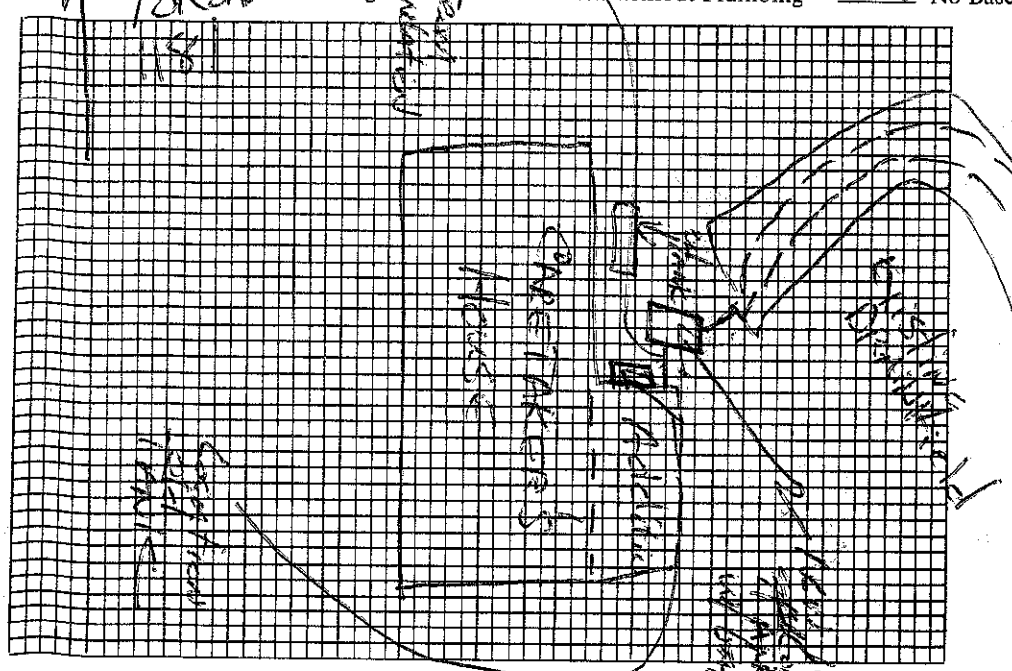
Topography Existing System

Depth to Water Table

Rock or other impervious formations

Lot Area

___ Basement with Plumbing ___ Basement without Plumbing X No Basement



New with overfill

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines

Sq. Ft. Linear Ft.

Depth of Stone in Lines

Water Supply: Individual ( )

Public ( )

well in STORAGE Shed

Installed by

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

Signed: X

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Tie into Existing DRAIN Field - Crush in old Tank + backfill with clean clay

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