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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 Harmon James DATE 2/4/87 PERMIT NO. 60

PHONE: Business _____ Home _____

LOCATION 1100 N Mallard Way last home on left before Cul-D-Sac S. R. No. _____

SUBDIVISION NAME Mallard Head LOT NO. 174 SECTION OR BLOCK NO. _____

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

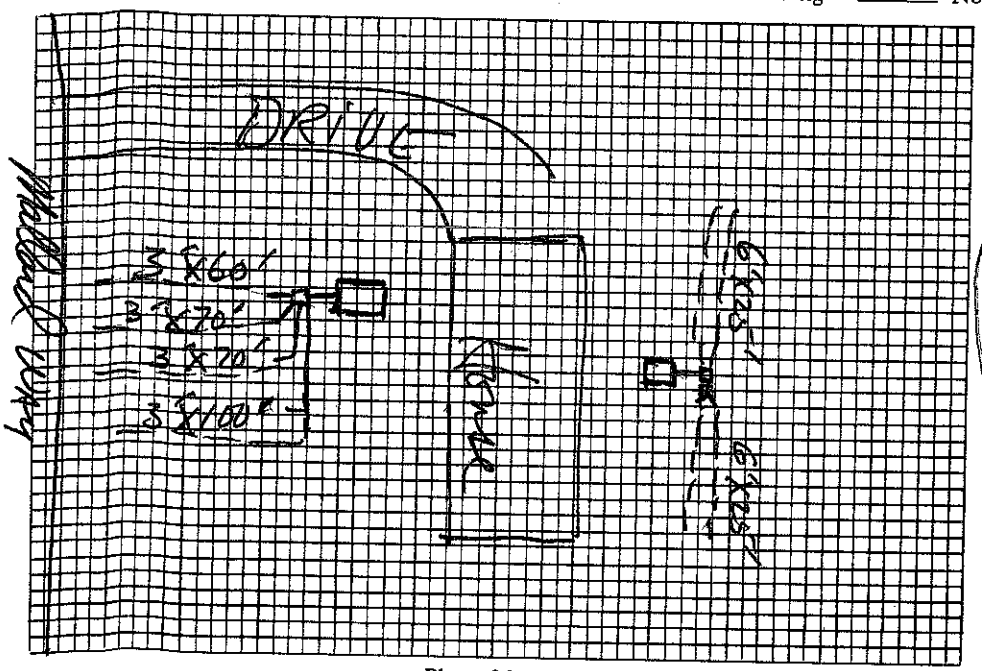
No. Bedrooms 3 No. Bathrooms 3

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

Lot Area 125'X200'

Character & Porosity of Soil Clay
Percolation Rate 2-45
Topography 2-6%
Depth to Water Table 4'
Rock or other impervious formations none obs.

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

UPPER System
Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Dubroon

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

Signed: _____

Lower System
440 gal tank w/ PVC tee
2 - 6'X25' ditches
300 ft² - 100 lin ft.

IMPROVEMENTS PERMIT BY TCP

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D R Harmon, RS. DATE 2/11/87

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

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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 Harmon James DATE 07-30-86 PERMIT NO. 339

PHONE: Business _____ Home _____

LOCATION Brawley School Rd, T.L. on Mallard Way, last house on left before cul-de-sac. S. R. No. _____

SUBDIVISION NAME Mallard Head LOT NO. 174 SECTION OR BLOCK NO. _____

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

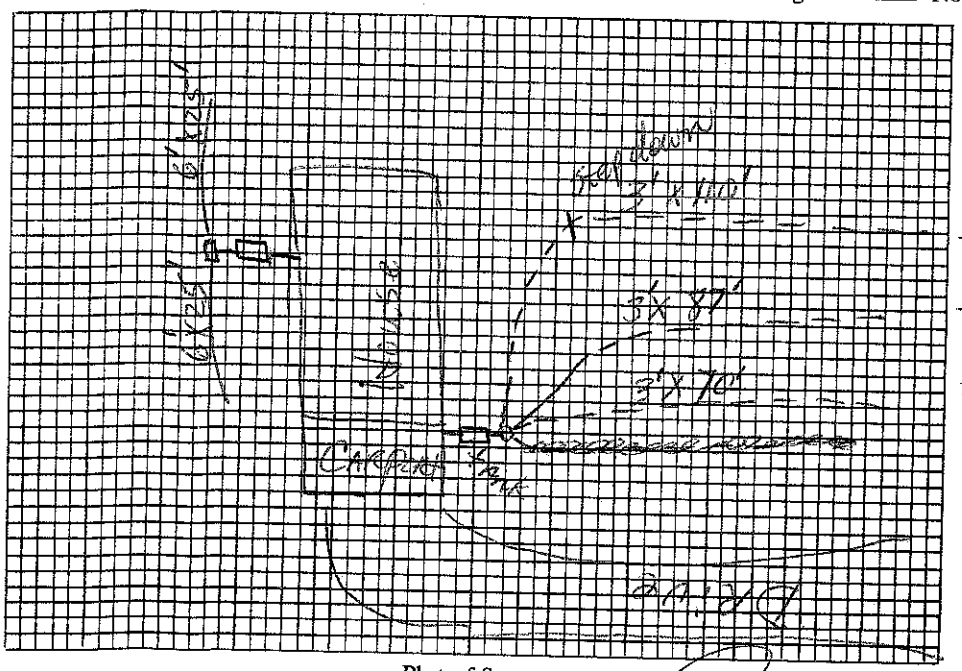
No. Bedrooms 3 No. Bathrooms 3

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

Lot Area 125'X200'

Character & Porosity of Soil Prov. Suitable
Percolation Rate 0.45 gal/ft²/day
Topography 2-6% Slope
Depth to Water Table 10'+
Rock or other impervious formations parent material

(✓) Basement with Plumbing ____ Basement without Plumbing ____ No Basement upper system



Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 800 Linear Ft. 267
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓) Comm. Supply
+ Basement system
Installed by 440 gal tank
100 ft² - 12" stone

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

Signed: Chris Schulze

IMPROVEMENTS PERMIT BY Terry L Price

COMMENTS: Split system for basement (1 toilet, 1 lavatory). Keep system shallow, follow contour. Remove trees as necessary to install system. Stay ten feet from all property lines

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