09136

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 James Oehler DATE April 21, 89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TR 1179 (Cannonbark) on left at jct. with Broadhill S. R. No. _____

SUBDIVISION NAME Woodland Hills LOT NO. 42 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2 1/2

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

Character & Porosity of Soil clay

Percolation Rate n/f

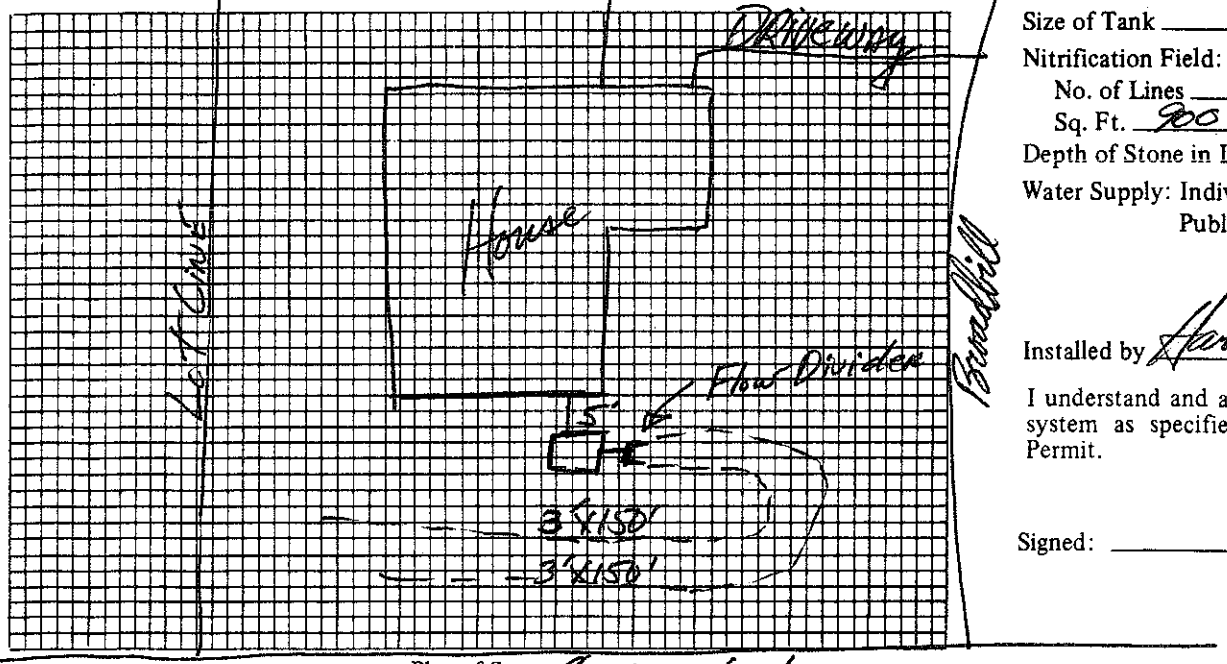
Topography 2-6%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

Lot Area ~1/2 AC.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System CANVAS back

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓) CW

Installed by Harvey Featherman

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ R.S. DATE 4-21-89

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 James Oehler DATE March 16, '89 PERMIT NO. ____

PHONE: Business ____ Home ____

LOCATION 1180 TL 1179 (Canvasback) on left at jct. with Broadbill ____ S. R. No. ____

SUBDIVISION NAME Woodland Hills LOT NO. 42 SECTION OR BLOCK NO. ____

House (✓) Mobile Home ( ) Business ( ) Other * Relayout due to change in house design

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

~~Site Suitable~~ RS Yes (✓) No ( )

Lot Area ~½ Ac

Character & Porosity of Soil clay

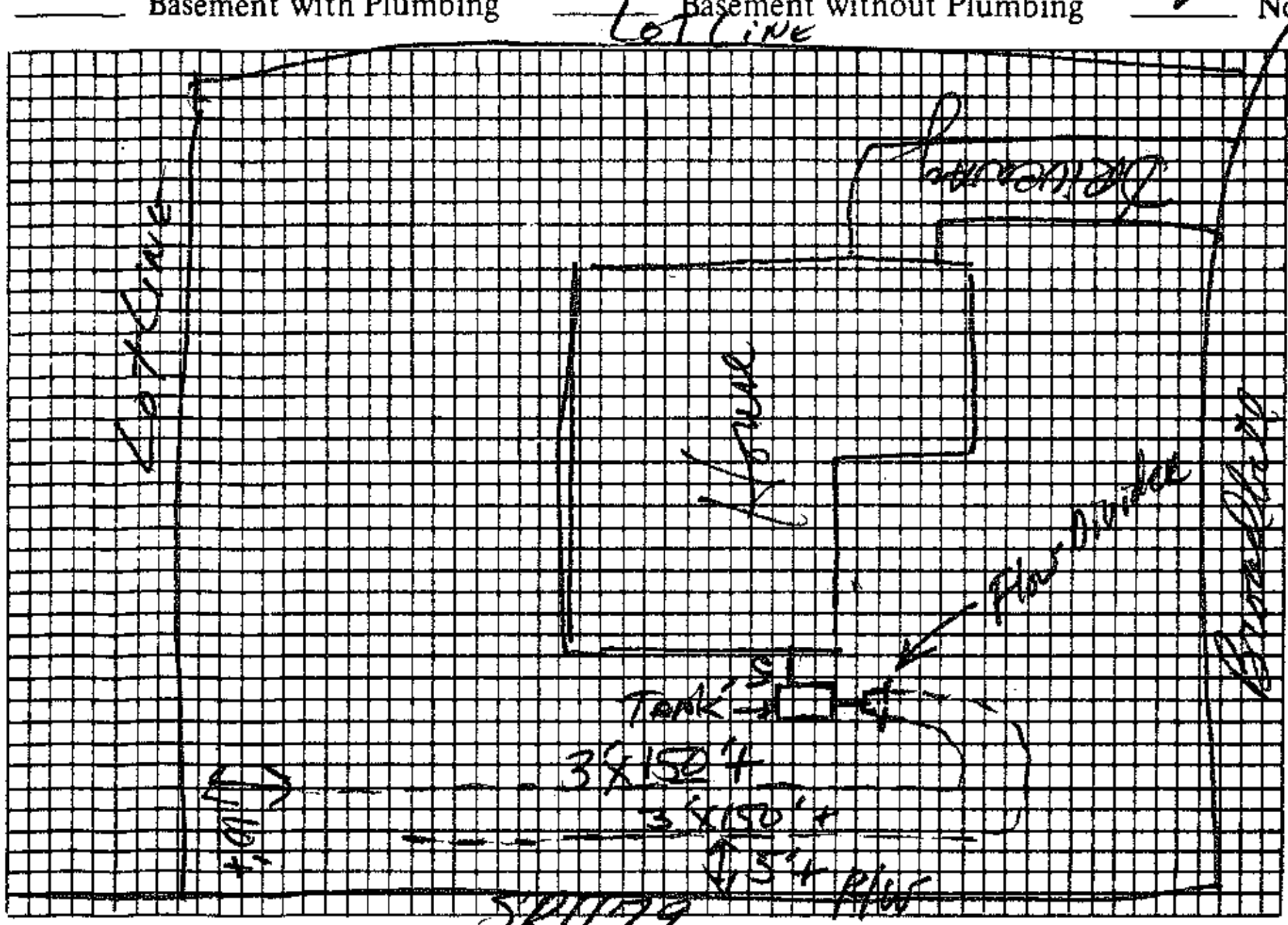
Percolation Rate ~.4

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

Size of Tank 1250 + Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 900 Linear Ft. 300+

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓) CW

Installed by ____

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

Signed X Harvey Leatherman

IMPROVEMENTS PERMIT BY D.R. Hinson, RS.

COMMENTS: Keep system on contour and trench bottom between 24 to 36". Repair area to be left in front and rear of house.

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 James Adler DATE Oct 17, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TL 1179 (Cannaback) TL Bradford 1st house on left (corner house) S. R. No. _____

SUBDIVISION NAME Woodland Hills LOT NO. 42 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~/S Yes ( ) No ( )

Lot Area ~½ AC

Character & Porosity of Soil clay

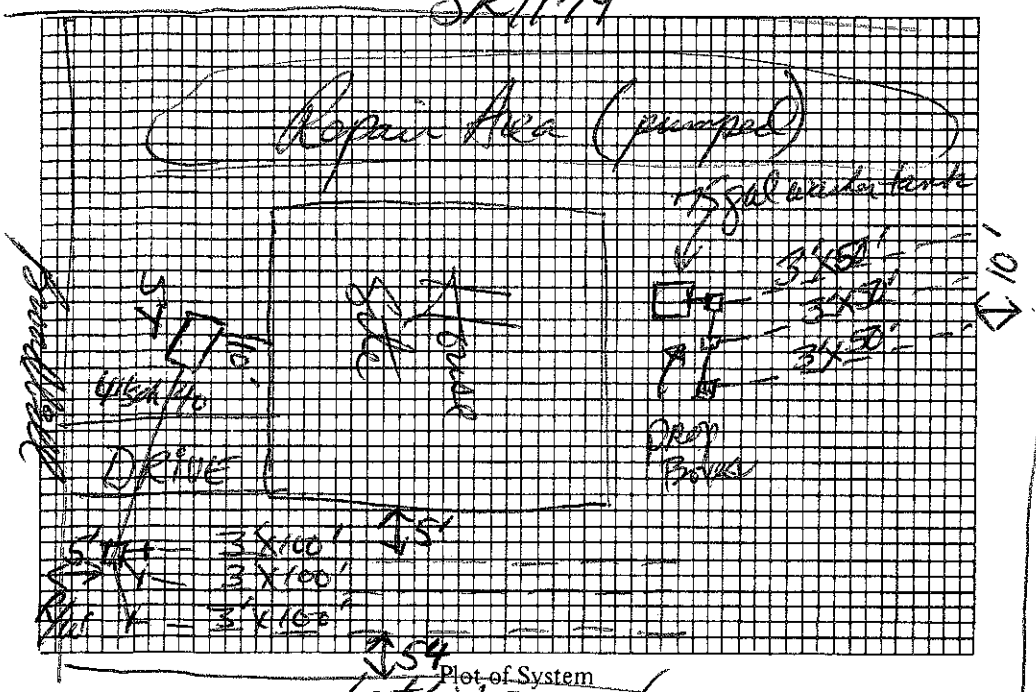
Percolation Rate 103

Topography Flat

Depth to Water Table 3½'+

Rock or other impervious formations none obs.

_____ Basement with Plumbing SR 1179 _____ Basement without Plumbing ✓ No Basement



Main System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓) CWS

Installed by _____

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

Signed _____

Washer System

75 gal washer tank

150' linear feet

IMPROVEMENTS PERMIT BY DR Tinnin, RS

COMMENTS: Install all drainfield lines shallow (not deeper than 30" max) Provide good surface drainage around sewage system.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

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