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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 Robert Darcy DATE 11-15-85 PERMIT NO. 505

PHONE: Business _____ Home _____

LOCATION 1100 TR Blume TL on Beaten Path TRon Colrain 2 lot on left

SUBDIVISION NAME L. N LOT NO. 1512 SECTION OR BLOCK NO. 9 S. R. No. _____

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

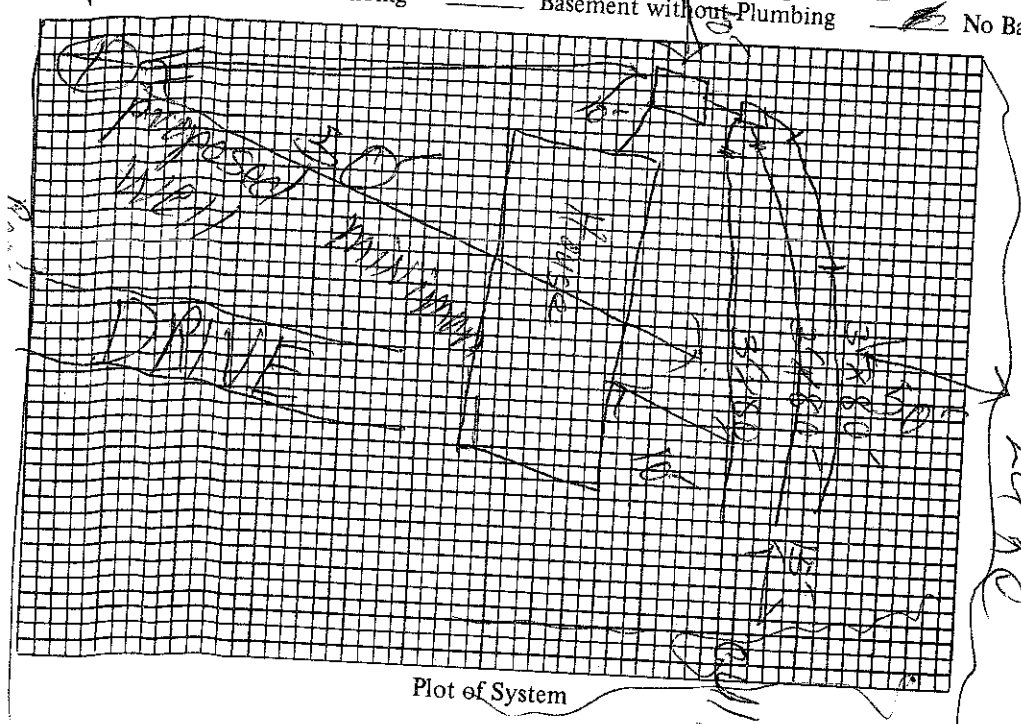
No. Bedrooms _____ No. Bathrooms _____

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

Lot Area 20,000 Ft2

Character & Porosity of Soil clay
Percolation Rate 0.5 gal/ft2/day
Topography 2-8%
Depth to Water Table 4'
Rock or other impervious formations None obs.

X Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by F J Ervin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Charles K. Bennett DATE 11-15-85

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 Robert Dancy DATE 10-28-85 PERMIT NO. 350

PHONE: Business _____ Home _____

LOCATION 150W TL 1109 TR 1100 TR Blume Rd/TL on Beaton Patt Rd
2 lot on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 1512 SECTION OR BLOCK NO. _____

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

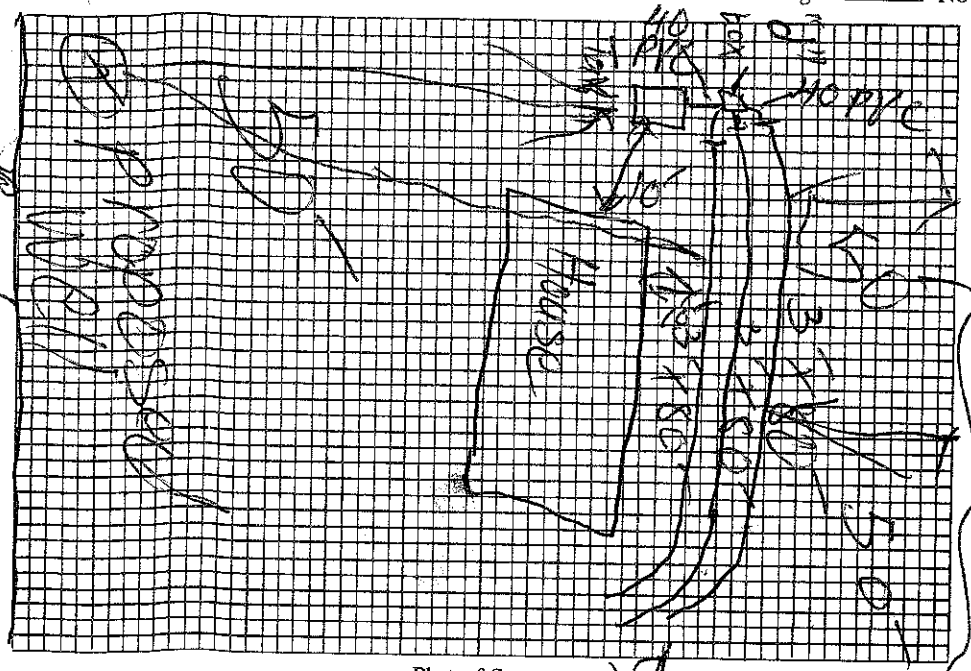
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 20,000 ft²

Character & Porosity of Soil C/LG
Percolation Rate 03 gal/ft²/day
Topography 2-10%
Depth to Water Table 41
Rock or other impervious formations None obs

(X) Basement with Plumbing ( ) Basement without Plumbing ( ) No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
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: Robert E. Dancy

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: 4/1 NO keep system shallow & follow contours

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