4637328053

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 Donald Bedford DATE 4-19-85 PERMIT NO. 137

PHONE: Business ______ Home ______

LOCATION 1100 TR (Oak Tree Rd) 1250 Bear left at sign on 1250 near end on R S. R. No. ______

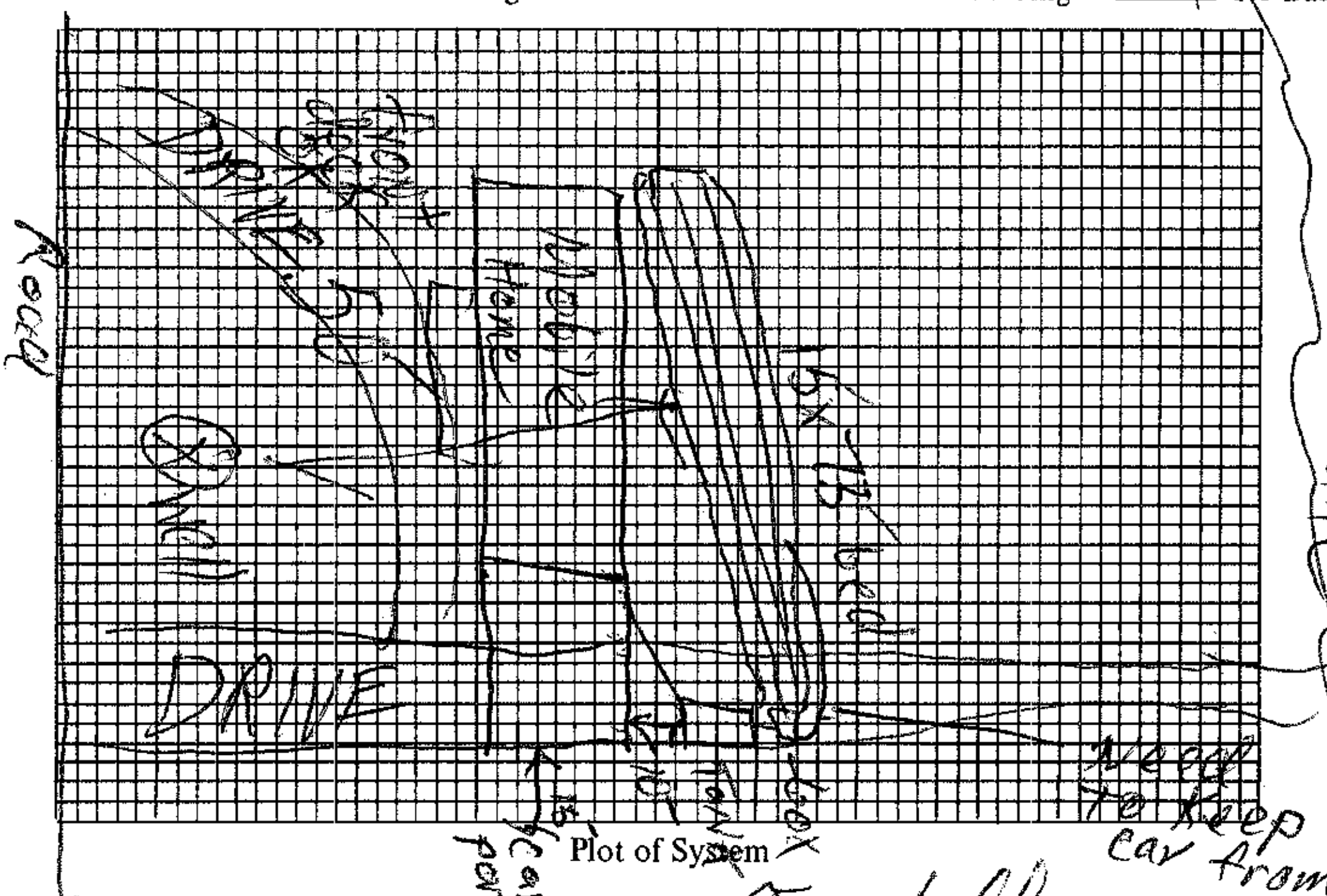
SUBDIVISION NAME Lake Norman LOT NO. 215 SECTION OR BLOCK NO. 9

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

No. Bedrooms 3 No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No ( )
Auto. Dishwasher Yes ( ) No ( )
Auto. Wash. Machine Yes ( ) No ( )
Site Suitable Yes ( ) No ( ) Existing
Lot Area ______

Character & Porosity of Soil ______
Percolation Rate ______
Topography ______
Depth to Water Table ______ Existing
Rock or other impervious formations ______

______ Basement with Plumbing ______ Basement without Plumbing X No Basement



Plot of System

Size of Tank E Gals.
Nitrification Field:
No. of Lines Existing
Sq. Ft. ______ Linear Ft. ______
Depth of Stone in Lines ______
Water Supply: Individual (X)
Public ( )

Installed by ______

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

Signed: ______

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: existing system working ok at date of inspection, ok build carport but deck can not be built because deck would be on top of system

CERTIFICATE OF COMPLETION BY ______ DATE ______
EXISTING SYSTEM CHECKED BY: Charles L. Barnett DATE 4-18-85

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 Donald Bedford DATE 3-23-83 PERMIT NO. 83

PHONE: Business _____ Home _____

LOCATION 1100 TR (Oak Tree Road) 1250 Bear left at S. 9N on 1250, Near end on R S. R. No. _____

SUBDIVISION NAME LAKE NORMAN LOT NO. 215 SECTION OR BLOCK NO. 9

House ( ) Mobile Home (X) 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 ~3/4 Acre

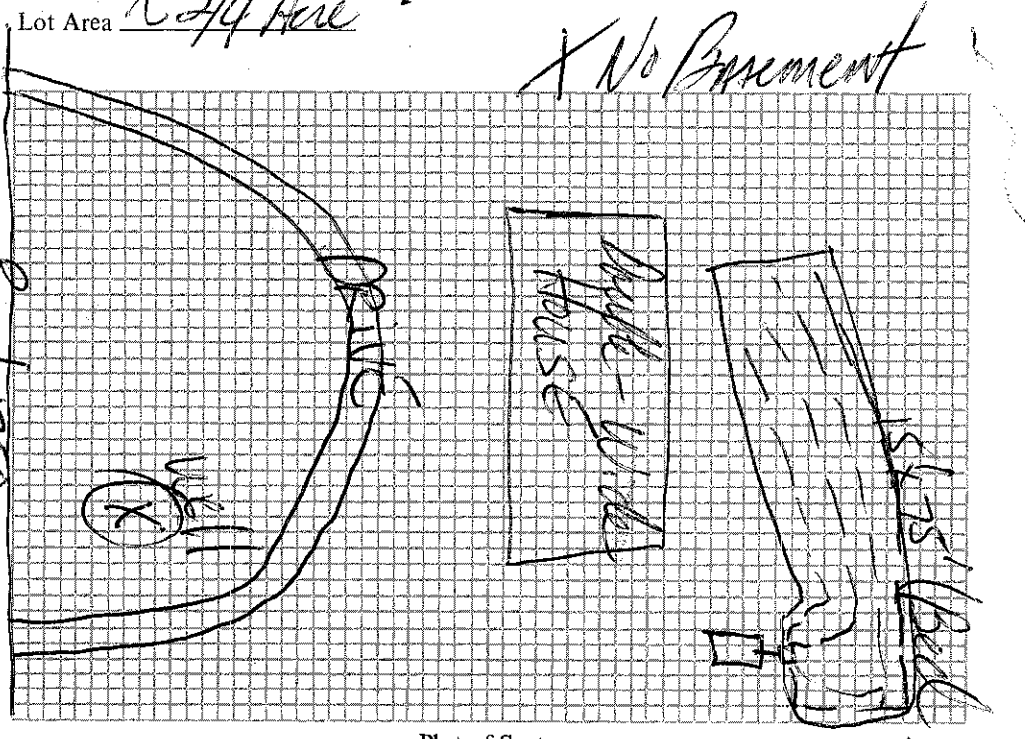
Character & Porosity of Soil Clay loam 2/day

Percolation Rate 0.5 60"

Topography _____

Depth to Water Table _____

Rock or other impervious formations None observed



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 5

Sq. Ft. 1080 Linear Ft. 360

Depth of Stone in Lines 12"

Water Supply: Individual (X)

Public ( )

Installed by R. T. Erwin Co.

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 3-23-83

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

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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 Donald Bedford DATE 3-8-84 PERMIT NO. 42

PHONE: Business _____ Home _____

LOCATION 1100 TR Oak Tree Road (1250) Bear left at sign on 1250, NEAR END ONR S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 215 SECTION OR BLOCK NO. 9

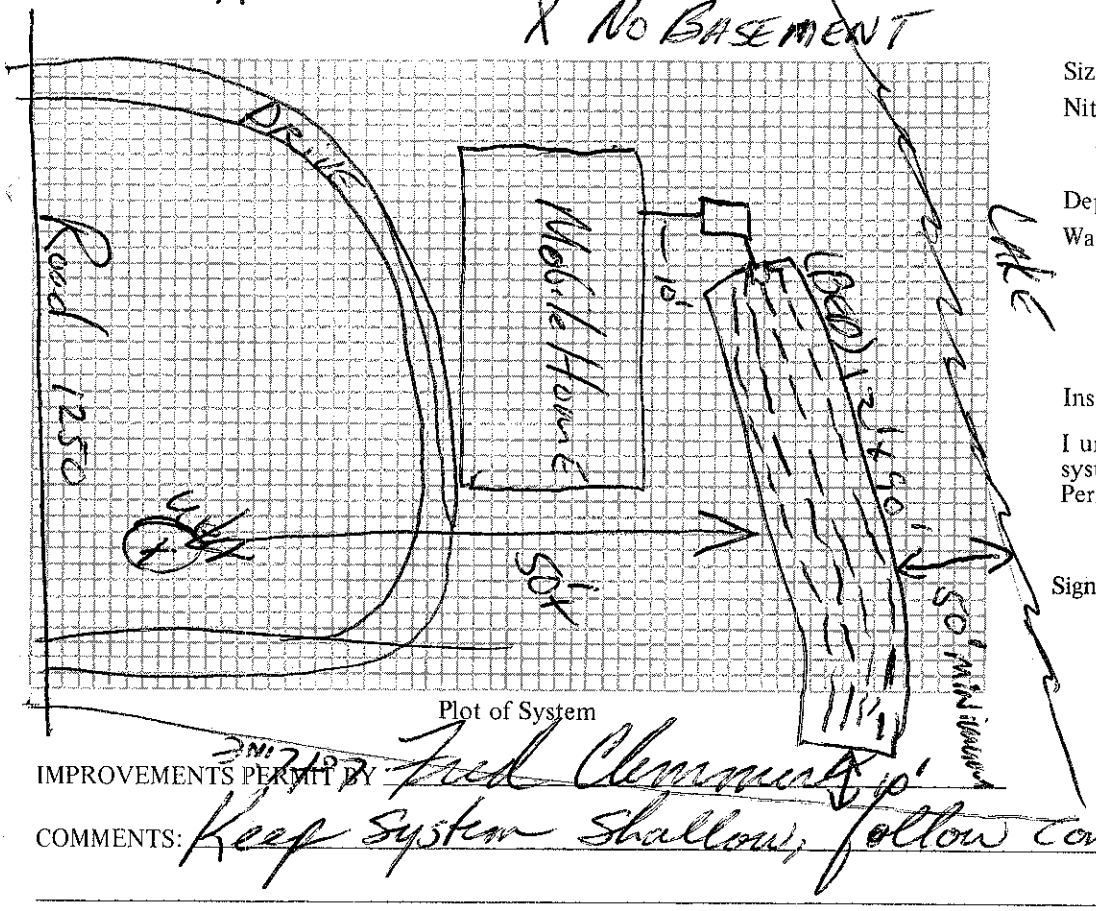
House ~~X~~ Mobile Home (X) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam	
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	0.5 gpf/ft²/day	
Auto. Wash. Machine	Yes (X)	No ( )	Topography	2-5%	
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4'	
			Rock or other impervious formations	None observed	

Lot Area 2 3/4 Acre

X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1080 Linear Ft. 360'
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: X Donald R. Bedford

IMPROVEMENTS PERMIT BY 3/7/84 Fred Clement

COMMENTS: 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.

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