4637345430

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 George Mills DATE July 27 '89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1504 TR 1180 (Woolie Rd) TR Whippoorwill TR Little Acres TR 2nd Driveway yellow siding house at end S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

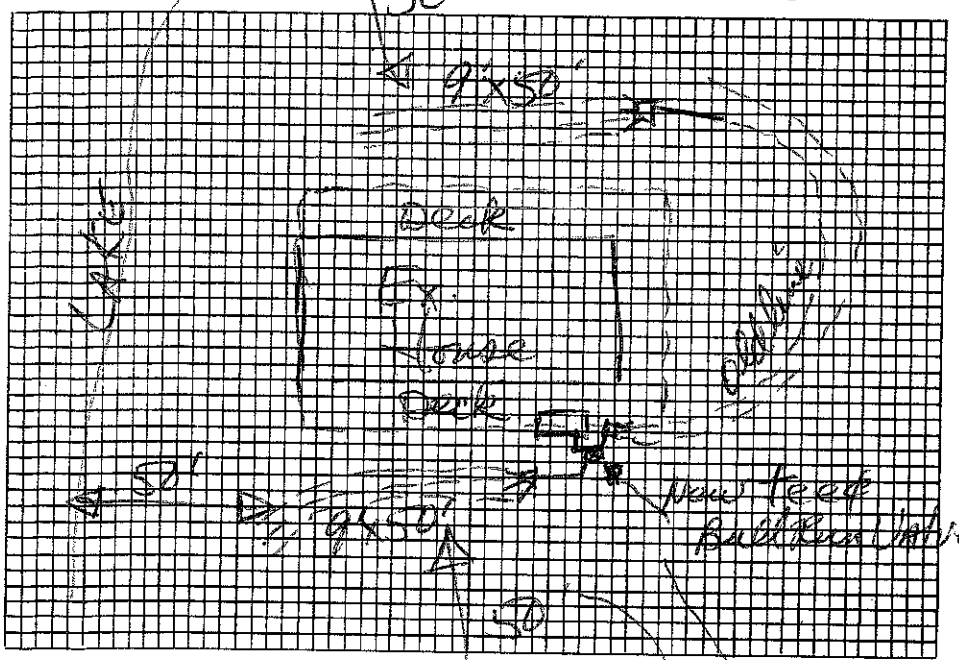
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil clay
Percolation Rate 13-24
Topography 6-8%
Depth to Water Table 84
Rock or other impervious formations none obs.

Lot Area Existing

_____ Basement with Plumbing 50' Basement without Plumbing _____ No Basement ✓



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines (2) 9'x50' Beds
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by J R Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE July 27, 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

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 George Mills DATE June 22, '89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W. TL 1180 (Oodie Road) TR Whippoorwill TL Little Acorn TR 2nd Drive Yellow house at end S. R. No. _____

SUBDIVISION NAME Lot Lake Norman LOT NO. 27 SECTION OR BLOCK NO. 10

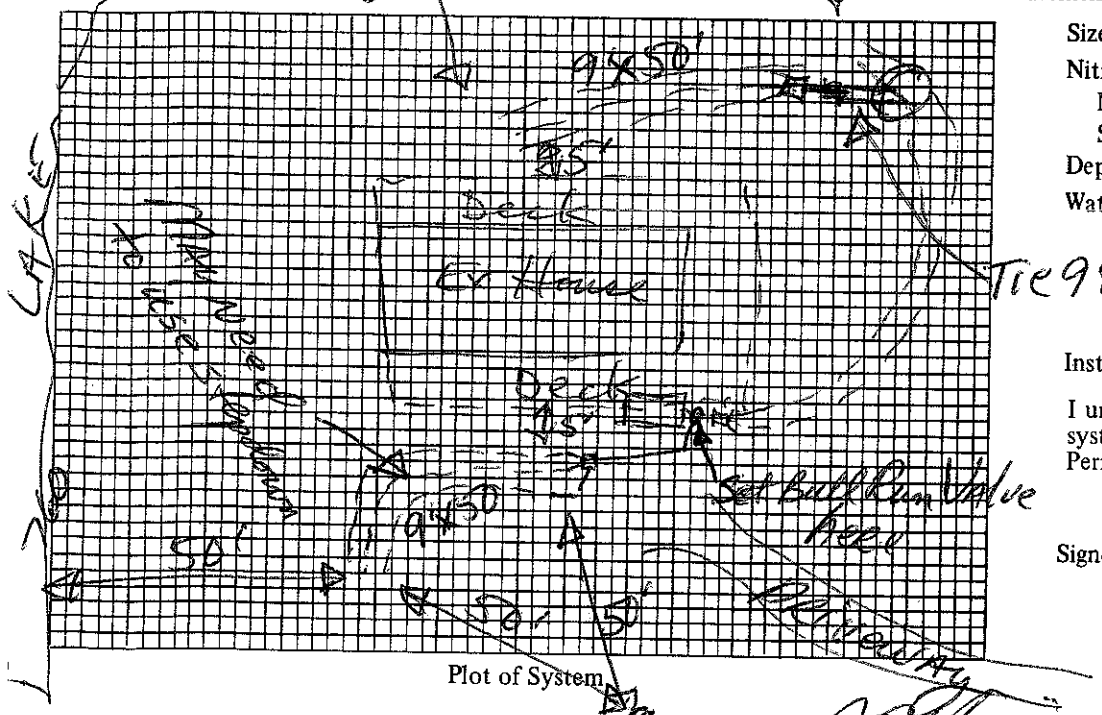
House (✓) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area Existing

____ Basement with Plumbing 50' Basement without Plumbing ____ No Basement



Size of Tank Existing Gals.
Nitrification Field: Split Repair
No. of Lines BR Valve to 2 beds
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public ( )

Installed by _____

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

Signed: George R. Mills

IMPROVEMENTS PERMIT BY _____ DATE _____

COMMENTS: Maintain minimum distances as shown. Use steptowns as needed. Use excess dirt to mound over ends of new repair lines. + Install water saving devices (faucets, shower heads, commodes, etc) in home. Pump as much water out of existing system as possible

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