4637 80 7738

IREDELL COUNTY HEALTH DEPARTMENT

13348

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Mark L Needham DATE Oct 15, '92 PERMIT NO. 2K21A8

PHONE: Business _____ Home _____

LOCATION 1100 TR just past D&G MART II on left

S.R. No. _____

SUBDIVISION NAME ~~Promenade Place~~ Peninsula Place LOT NO. 2 SECTION OR BLOCK NO. _____

House ☐ Mobile Home ☐ Business ☐ Other Duplex Apt (480 gpd)

No. Bedrooms 4 total No. Bathrooms 4

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 30,000 ft²

Soil Characteristics ps clay

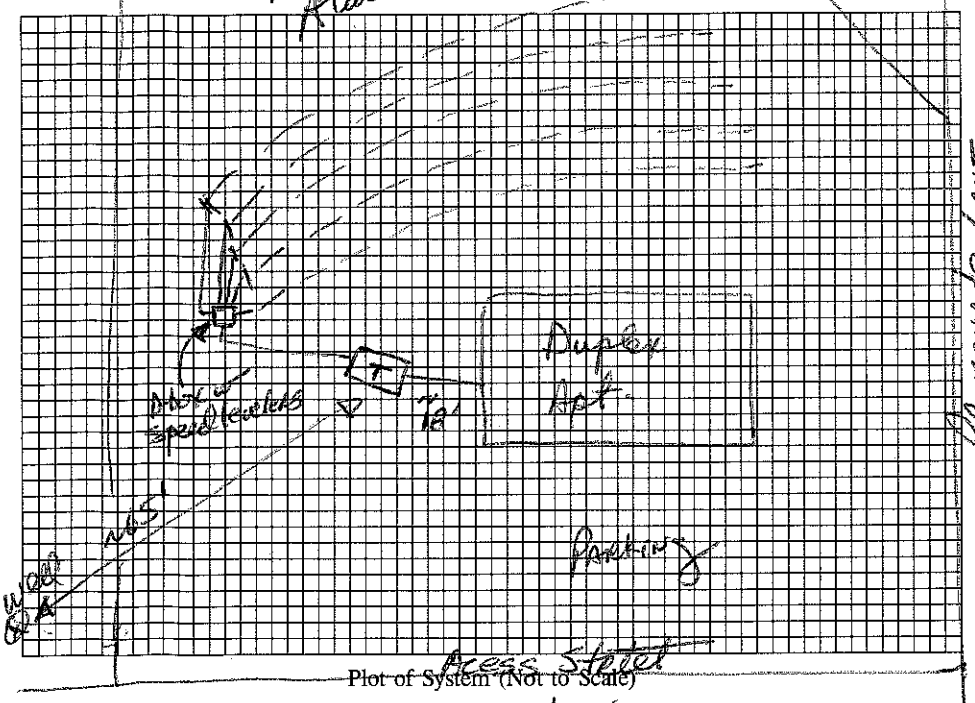
Application Rate .3 gal/ft²/day

Topography ~4%

Depth to Water Table 7 ft

Rock or other impervious formations none obs

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement (slab) _____ Crawl Space



Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 5

Sq. Ft. 1602+ Linear Ft. 540+

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐

Installed by HJ Erwin

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY DRH

COMMENTS _____

CERTIFICATE OF COMPLETION BY DR Hinson, RS DATE 10/15/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

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

IREDELL COUNTY HEALTH DEPARTMENT

13348

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Mark L. Needham DATE Oct. 4 '91 PERMIT NO. 2K-21-A-8

PHONE: Business _____ Home _____

LOCATION 1100 TR just past 66 Mart H on left

S. R. No. _____

SUBDIVISION NAME Promenade Place LOT NO. 2 SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Duplex Syst. 480 gpd.

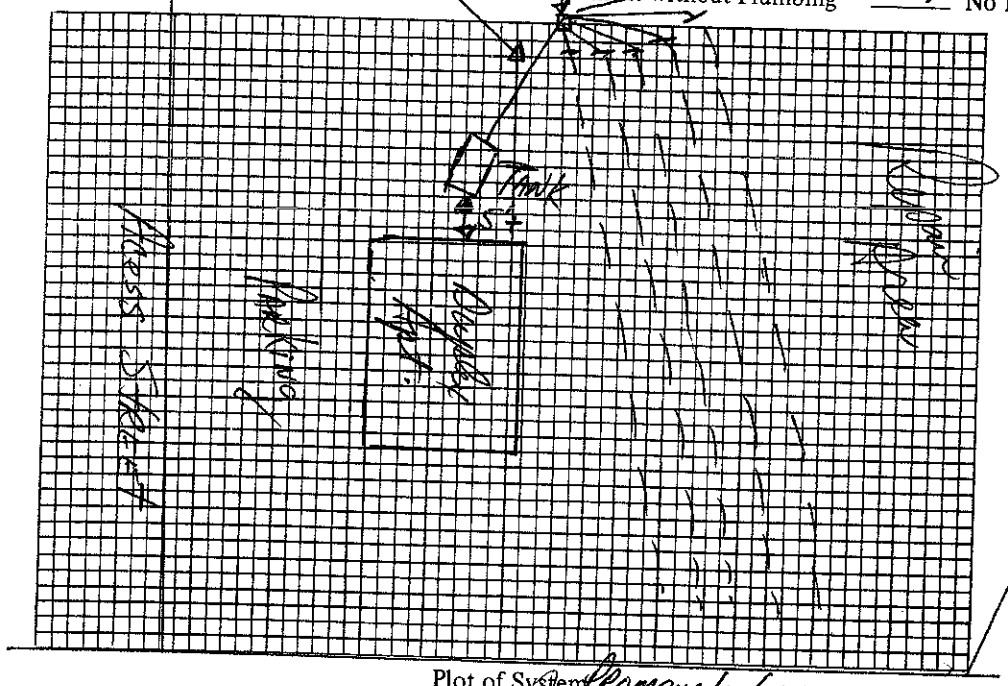
No. Bedrooms 4 total No. Bathrooms 4

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

Lot Area 30,000 ft²+

Character & Porosity of Soil ps clay
Percolation Rate n.3
Topography ~4%
Depth to Water Table 41
Rock or other impervious formations NONE obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System Promenade LANE

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 4-5
Sq. Ft. 1602 Linear Ft. 534
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: H. C. Needham

IMPROVEMENTS PERMIT BY Jack Jefferson R.S.

COMMENTS: follow contour. 36" maximum trench bottom depth.

10/15/92 TANK OK, Drainfield OK | line from tanks to D-box & D-box to be checked

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