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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 ARNOLD MOORE DATE 10/15/87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1303 No. TL 1300 (Fern Hill) TR Bridlewood (across from 2nd Kenway Loop Bear Rt. on Cullen on Left S. R. No. _____

SUBDIVISION NAME L.N. LOT NO. 131 SECTION OR BLOCK NO. 15

House (✓) Mobile Home ( ) Business ( ) Other REPAIR-ADDITION

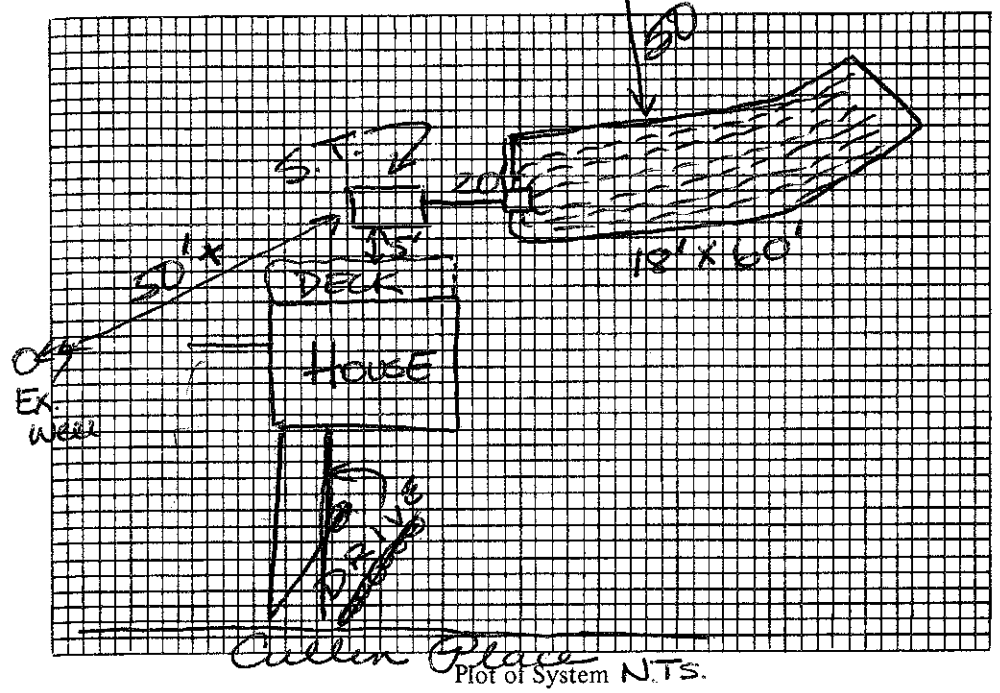
No. Bedrooms 3 No. Bathrooms 3

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

Character & Porosity of Soil Clay - SANDY SILT LOAM
Percolation Rate .5
Topography 4-6%
Depth to Water Table 4' +
Rock or other impervious formations none observed.

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System N.T.S.

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 6
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )
Existing well

Installed by J. Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew C. Pierce DATE 10/15/87

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 Arnold Moore DATE 8-20-86 PERMIT NO. 460

PHONE: Business _____ Home _____

LOCATION 1300 TR just past Peninnah onto Bridlewood Bear Rt on Cullen 2nd lot on left S. R. No. _____

SUBDIVISION NAME L.N. LOT NO. 131 SECTION OR BLOCK NO. 15

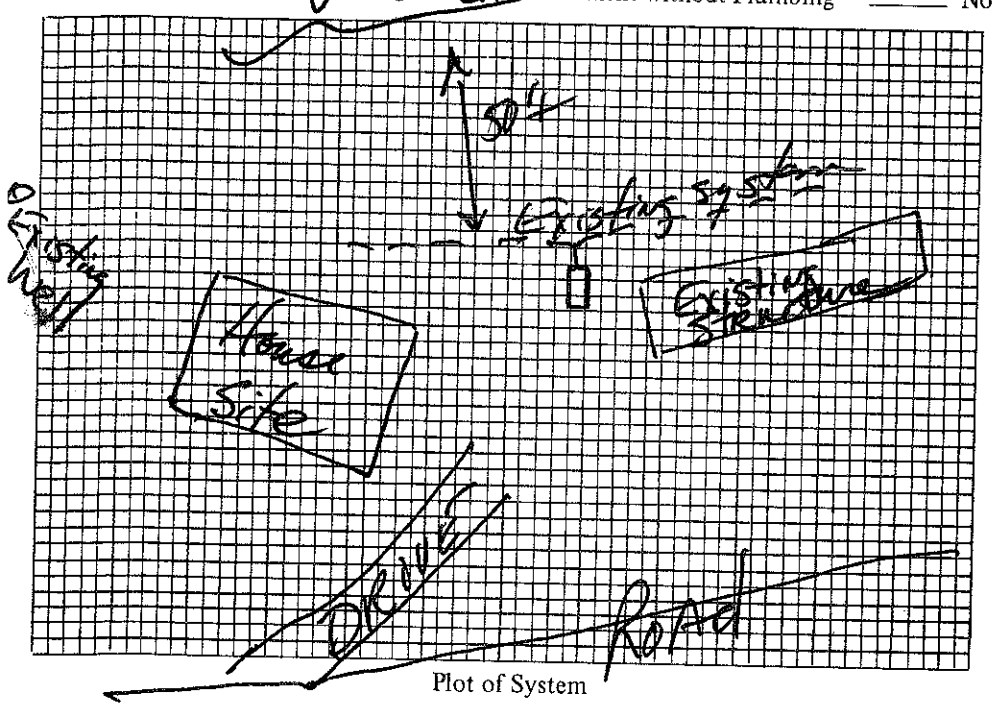
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	
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 Like _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: House must be located in order to get full on plumbing to tank. Existing system working OK at time of inspection. Existing mobile home to be moved off lot when house is completed.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____, RS DATE 8-20-86

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