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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 E R Davis DATE 5/4/88 PERMIT NO. _____

PHONE: Business _____ Home 664-1099

LOCATION 150 W. TR Perth Rd. TL Stumpy Creek TL Collingswood Pass Folkstone On R. (4th drive) S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 69 SECTION OR BLOCK NO. 14

House ( ) Mobile Home (X) Business ( ) Other Repair (info. fm 8-12-77)

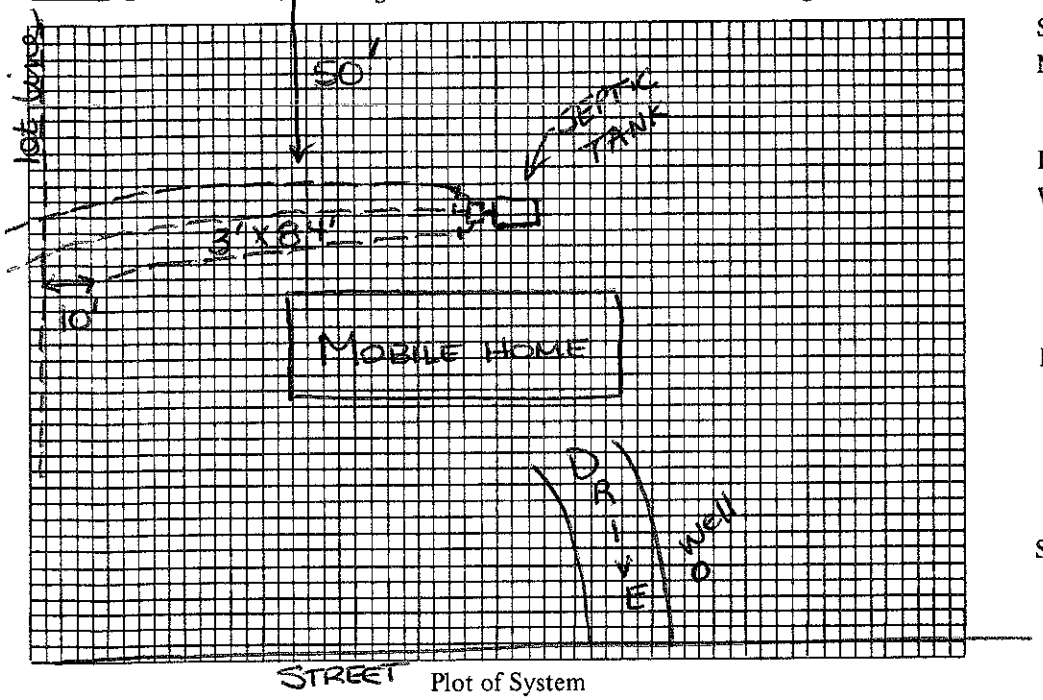
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil clay
Percolation Rate .4 add/ft²
Topography 6%
Depth to Water Table 6'+ to lake level
Rock or other impervious formations none

Lot Area .72 lake

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank existing Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 252 Linear Ft. ACP 84
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 Andrew C. Price

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew C. Price DATE 5/4/88

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

8704

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 E. R. Davis, Jr. DATE 4/22/88 PERMIT NO. _____

PHONE: Business _____ Home 664-1091 wk 664-1091

LOCATION 150 W. TR Perth Rd. TL Stumpy Creek TL Collingswood Pass Folkstone On R (4th drive) S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 69 SECTION OR BLOCK NO. 14

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

info from 8-12-77

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 ( )	

Character & Porosity of Soil existing / clay loam

Percolation Rate Aggd/ft² 690

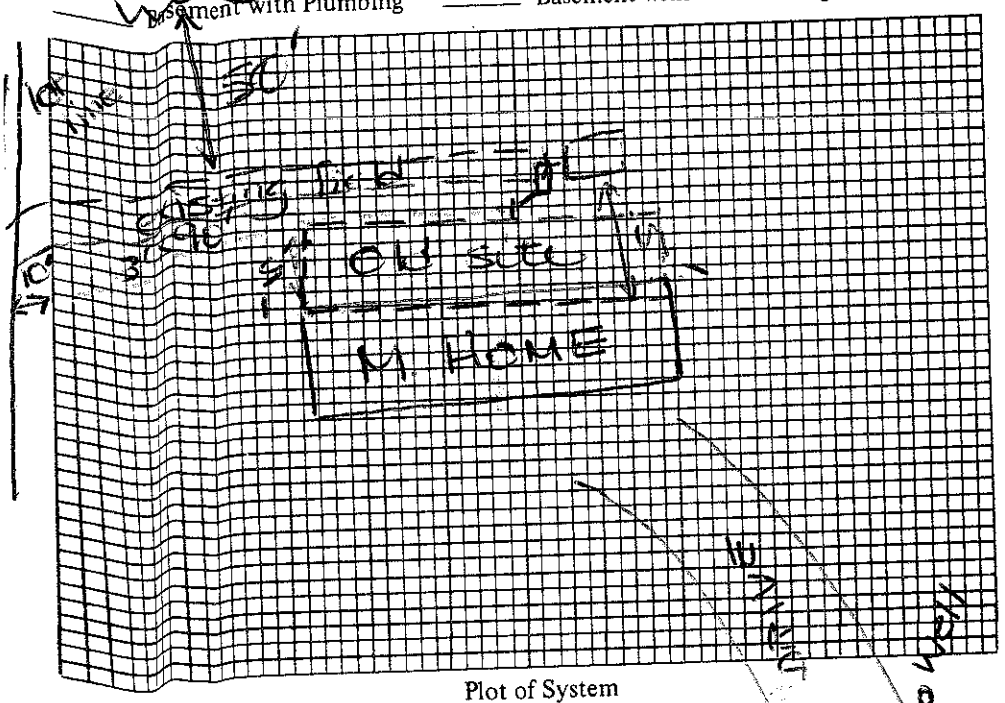
Topography 6'+ to lakelevel

Depth to Water Table none

Rock or other impervious formations _____

Lot Area .72 ACRE Rake

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank existing Gals.

Nitrification Field:

No. of Lines 1

Sq. Ft. 270 Linear Ft. 90

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: X Donnie Davis

IMPROVEMENTS PERMIT BY Andrew C. Price STREET

COMMENTS: Set distribution box and run new line shallow and on contour. Add NEW LINE ON STREET SIDE OF OLD SYSTEM

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