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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 Allison Hagar DATE 4/17/91 PERMIT NO. 16-A-105

PHONE: Business _____ Home 663-0638

LOCATION Faith Rd. S. R. No. _____

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

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

No. Bedrooms 2 No. Bathrooms 1.5

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

Character & Porosity of Soil clay - sbk

Percolation Rate .4

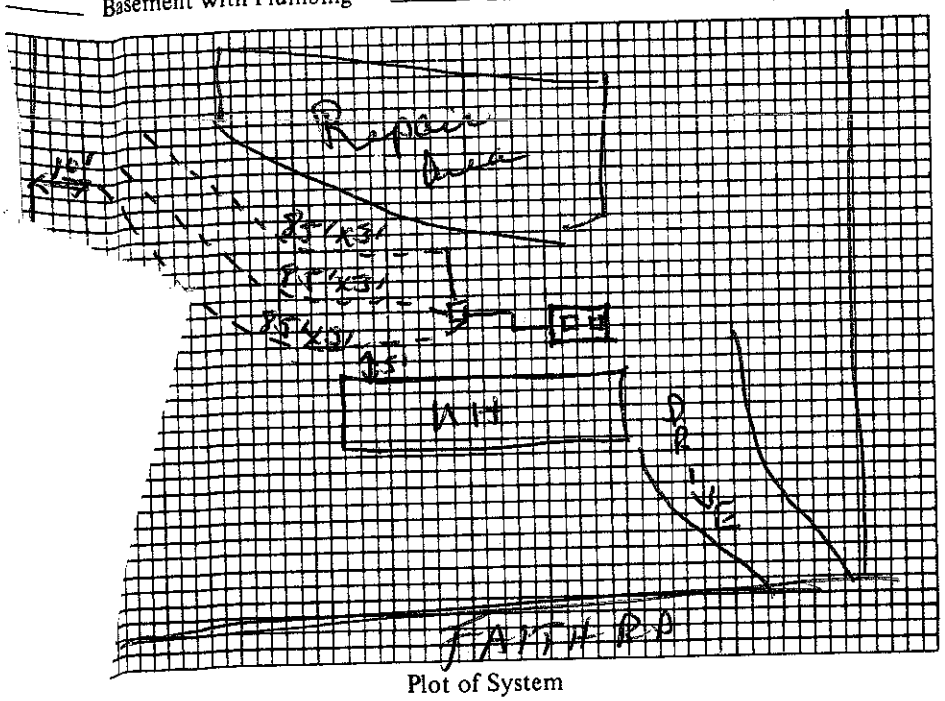
Topography 2-4%

Depth to Water Table >48"

Rock or other impervious formations No

Lot Area 20,000 SQFT

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3@95'

Sq. Ft. 765 Linear Ft. 255

Depth of Stone in Lines 12-16"

Water Supply: Individual (✓) NONE AT THIS TIME

Public ( )

Installed by F & F Backhoe

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

Signed: _____

ROVEMENTS PERMIT BY _____

MMENTS: _____

RTIFICATE OF COMPLETION BY Wesley Sparks DATE 7/12/91

STING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

mits VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Provements Permit.

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 Allison Hager DATE 4/10/91 PERMIT NO. 10-A-105

PHONE: Business _____ Home 663-0638

LOCATION Faith Rd, on ① after X creek beside old farm house

S. R. No. 1136

SUBDIVISION NAME N/A LOT NO. N/A SECTION OR BLOCK NO. N/A

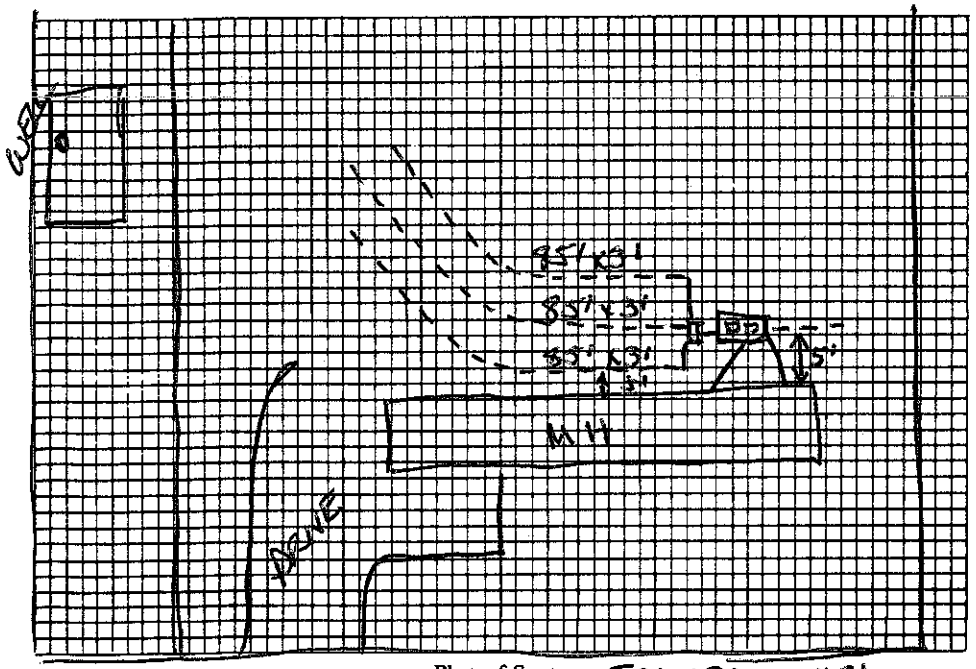
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1.5

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay - SbR
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	.41
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-4%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	>48"
			Rock or other impervious formations	None found

Lot Area 20,000 FT²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System FAITH RD SR 1136

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3 @ 85'

Sq. Ft. 765 Linear Ft. 255'

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: _____

IMPROVEMENTS PERMIT BY Wesley Sparks R.S.

COMMENTS: Trenches no deeper than 36" to trench bottom. Lines need no more than 1/4" fall per 10' length of drainline.

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