4645-28-3783

12191

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 Bob McLemore Homes DATE 7/16/91 PERMIT NO. 26-21-A-15

PHONE: Business _____ Home _____

LOCATION 215 XI 77 TL 1206 (ALCOVE) TR 1108 Templeton RT fork, TR to Morgan Landing on (R) just before cul de sac S. R. No. _____

SUBDIVISION NAME Morgan Landing LOT NO. 15 SECTION OR BLOCK NO. _____

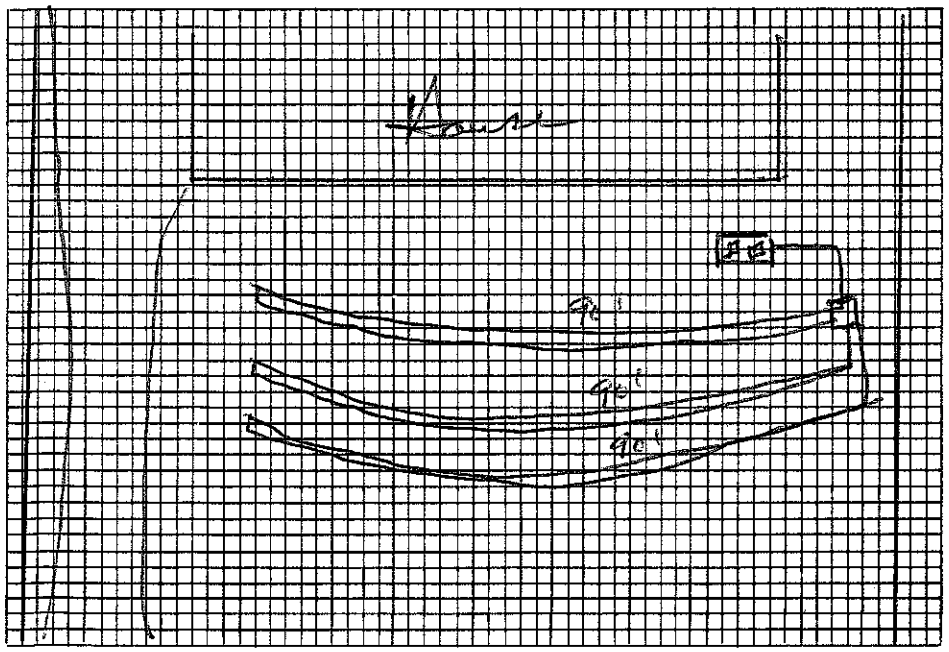
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 3½

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	P - clay (sd.)
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	13
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	20%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	>48"
			Rock or other impervious formations	No

Lot Area 119' x 215'

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3@90'
Sq. Ft. _____ Linear Ft. 270
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )
16" T+T Panel System

Installed by Bob-Mayfield

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 7/16/91

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

2280

IREDELL COUNTY HEALTH DEPARTMENT

12191

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

OWNER OR CONTRACTOR Bob McLemore Homes DATE Nov. 16, '90 PERMIT NO. 26-21-A-15

PHONE: Business _____ Home _____

LOCATION 21 S. X I77 TL 1206 (Alcove) TR 1108 (Templeton) Bear Rt at Oak Tree Trail to Morgan Landing on Right S. R. No. _____

SUBDIVISION NAME Morgan Landing LOT NO. 15 SECTION OR BLOCK NO. _____

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

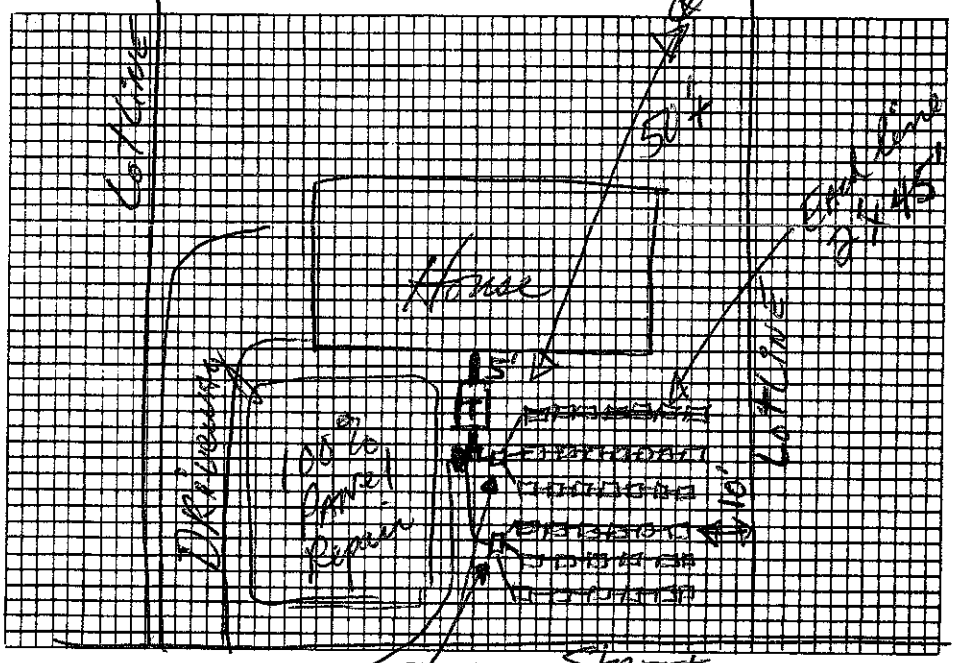
No. Bedrooms 4 No. Bathrooms 3½

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

Lot Area 119'x 215'

Character & Porosity of Soil MS clay
Percolation Rate 4:3
Topography ~2% 4 ft
Depth to Water Table _____
Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.
Nitrification Field: Flow Divider / 2 D-Boxes
No. of Lines 3+3
Sq. Ft. _____ Linear Ft. 270' ea
Depth of Stone in Lines 16" ±
Water Supply: Individual (✓) panels
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY Jack R. Hinson, EHS

COMMENTS: Flow Divider D-boxes w/ spreader Revelers
Full plumbing out at ground level. Keep tank shallow. Use minimum fall to flow divider & D boxes in order to keep end of drainfield lines from having more than ~12"-18" cover.

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