IREDELL COUNTY HEALTH DEPARTMENT 4646113120

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

OWNER OR CONTRACTOR Bill Rader DATE 6-29-83 PERMIT NO. 212

PHONE: Business _____ Home _____

LOCATION 1206 TR 1110 Bear Rt. on Rainbow Lane at end

S. R. No. _____

SUBDIVISION NAME Catalina Cove LOT NO. 4 SECTION OR BLOCK NO. B

House (✓) Mobile Home ( ) Business ( ) Other + Bathhouse
to #1

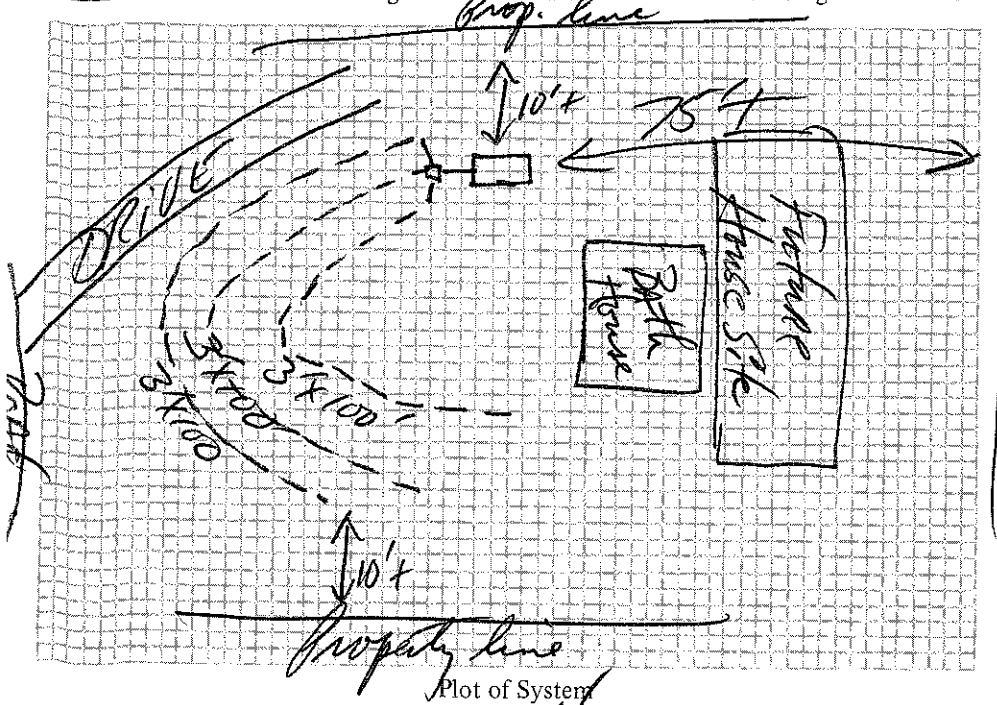
No. Bedrooms 3 No. Bathrooms 3

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

Character & Porosity of Soil Clay loam
Percolation Rate .5-.6 Approx
Topography 2-4%
Depth to Water Table 4'+
Rock or other impervious formations none obs.

Lot Area ~ 3/4 Ac.

___ Basement with Plumbing ___ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
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 _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 6-29-83

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

4600

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 Bill Raden DATE 6-17-83 PERMIT NO. 155

PHONE: Business _____ Home _____

LOCATION 1206 TR 1110 Bear Rt on Rainbow Lane

_____ S. R. No. _____

SUBDIVISION NAME Catalina Cove LOT NO. 4 SECTION OR BLOCK NO. B

House (✓) Mobile Home ( ) Business ( ) Other + Bathhouse (1 bedroom, kitchen, bath) total

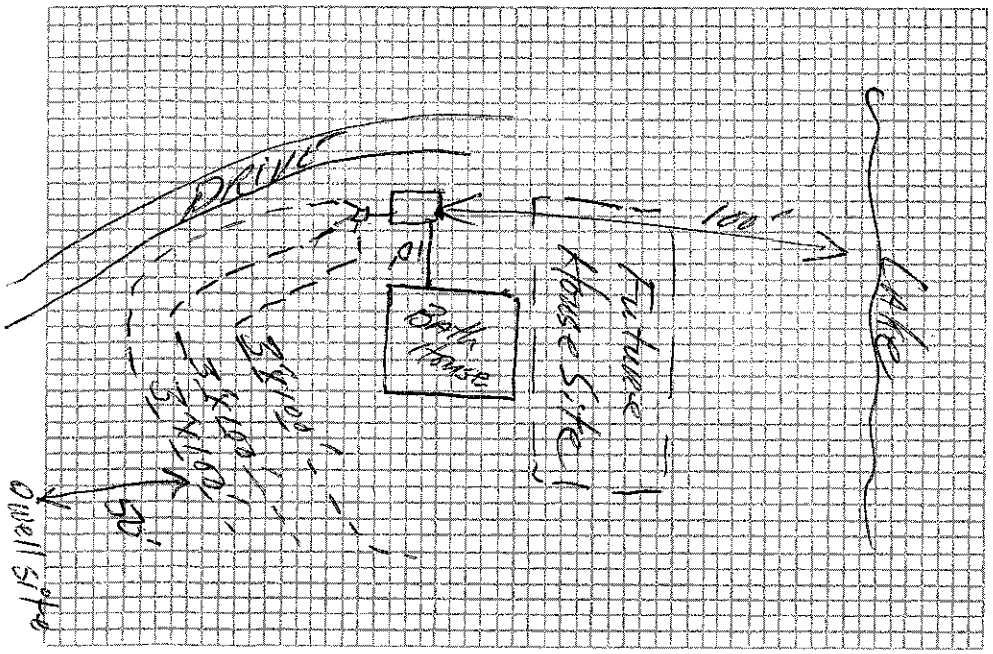
No. Bedrooms 3 No. Bathrooms 2-3

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

Character & Porosity of Soil clay loam
Percolation Rate .6 approx
Topography 4-6%
Depth to Water Table 4ft
Rock or other impervious formations NONE OBS.

Lot Area ~2/3 AC.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
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: W. W. Rader

IMPROVEMENTS PERMIT BY David R. Hinson, R.S.

COMMENTS: Keep system shallow

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.
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Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold