4646477027

IREDELL COUNTY HEALTH DEPARTMENT

Repair

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

OWNER OR CONTRACTOR Leman Poach DATE 12/16/91 PERMIT NO. ———

PHONE: Business ——— Home 663-0873

LOCATION 1109, from 150 W, TR on gravel drive just before Diner, to first drive on (R), two story on hill S. R. No. 1109

SUBDIVISION NAME Idlewood Harbor LOT NO. 4 SECTION OR BLOCK NO. ———

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

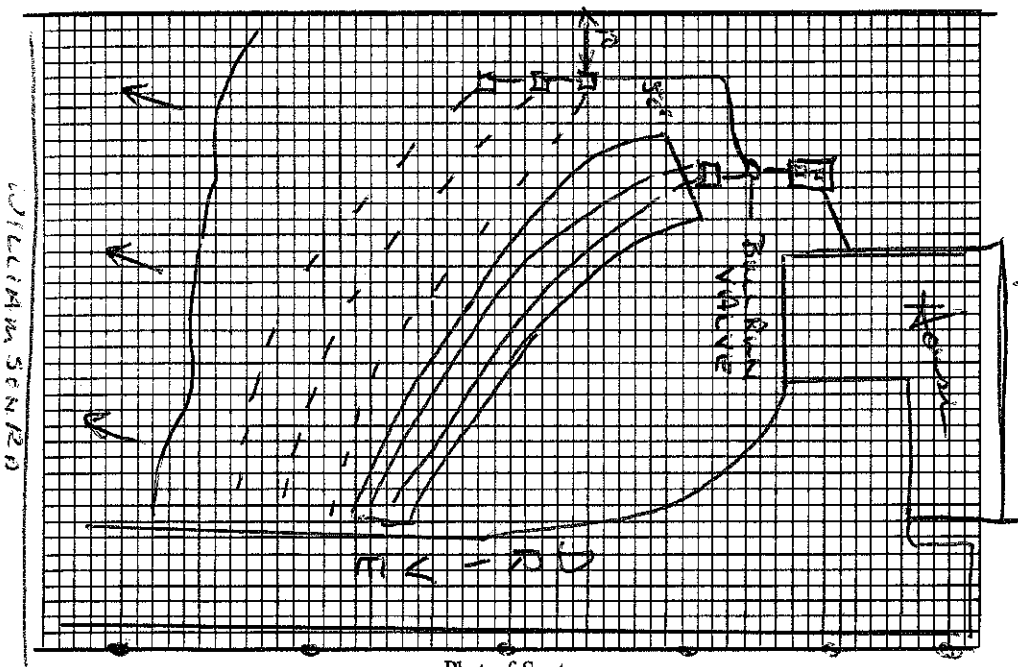
No. Bedrooms 3 No. Bathrooms 2.5

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

Character & Porosity of Soil w - (s, p) fill material
Percolation Rate ———
Topography ———
Depth to Water Table ———
Rock or other impervious formations ———

Lot Area .7ac

——— Basement with Plumbing ——— Basement without Plumbing ✓ No Basement



Existing
Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3 @ 100' ea
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: Total FT² 1800 - poor soil conditions very micaceous and silt transition material - 12 - 18" fill spread over this poor material Rotate drainfields every 4 months (3 times/year)

CERTIFICATE OF COMPLETION BY Wesley Sparks R.S. DATE 12/1

EXISTING SYSTEM CHECKED BY: ——— DATE ———

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIO

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 Lemar Lorch DATE 6-22-79 PERMIT NO. 217

PHONE: Business _____ Home _____

LOCATION 150 W Tl on 1109 on Rt. _____

_____ S. R. No. _____

SUBDIVISION NAME Idlewood Harbor LOT NO. 4 SECTION OR BLOCK NO. _____

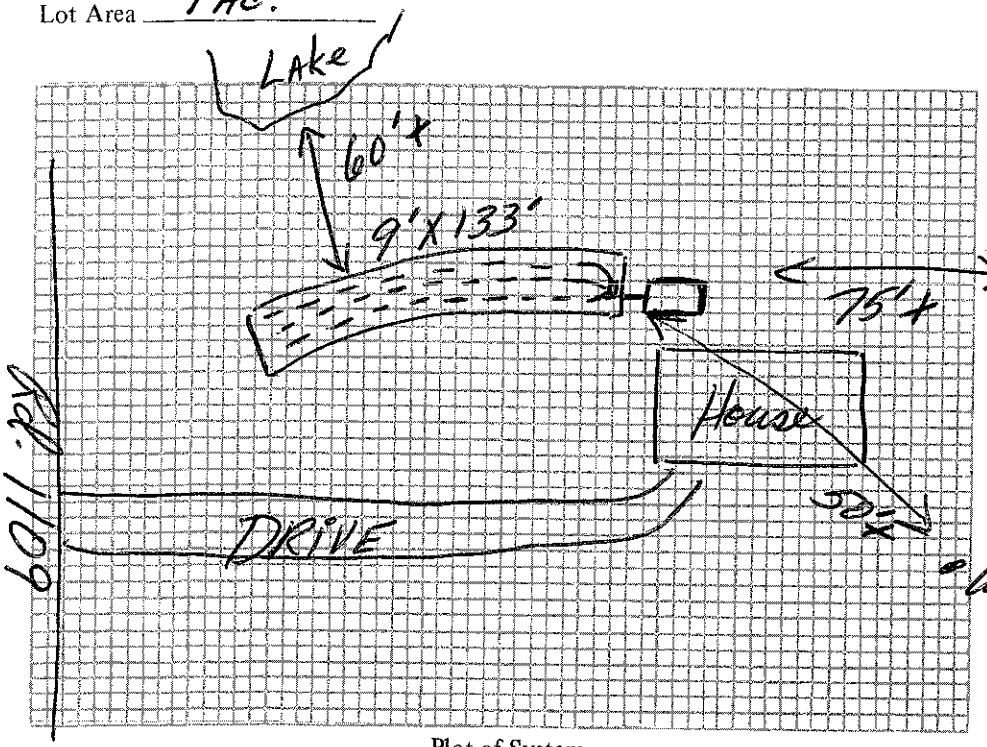
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1 AC.

Character & Porosity of Soil clay loam
Percolation Rate 120 mpi
Topography 2-5%
Depth to Water Table 8-10'
Rock or other impervious formations none obs



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 16"±
Water Supply: Individual (✓) Lake
Public ( )

Installed by Arnie Duncan for Hope Bros.

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: Layout changed due to space limitations w/ property line.

CERTIFICATE OF COMPLETION BY Marid R. Hinson DATE 6-22-79

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

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