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 David Parker DATE 12-21-84 PERMIT NO. 456

PHONE: Business _____ Home _____

LOCATION 150 W TL 1109 on left ~1 mile below Williamson Methodist Chruch TL paved drive on left on TL S. R. No. _____

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

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

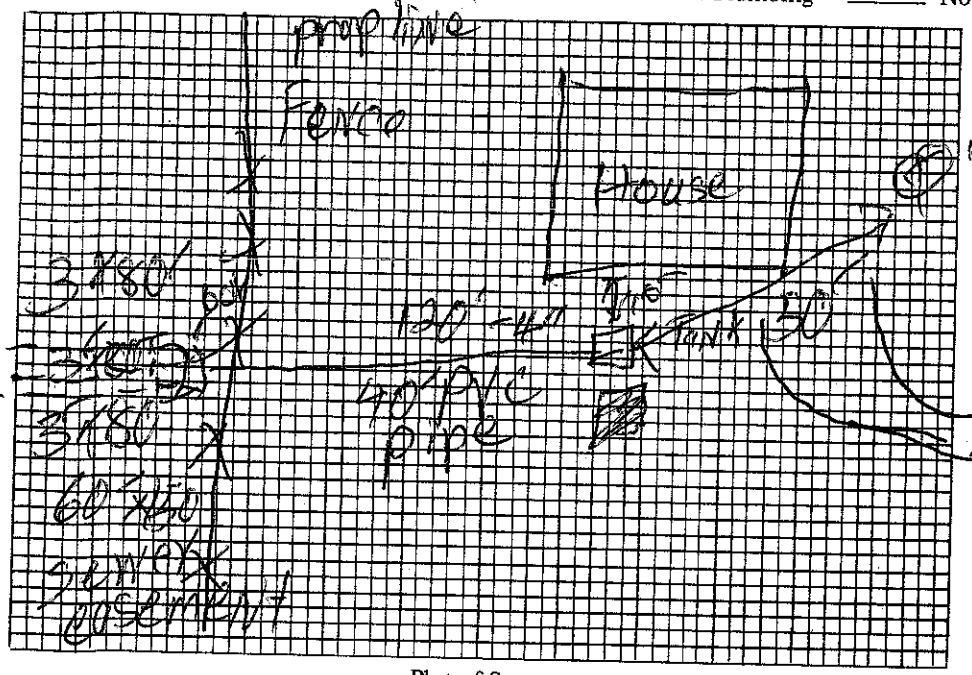
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam	
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	1 5 gal/ft 24hrs	
Auto. Wash. Machine	Yes (X)	No ( )	Topography	2-4%	
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4'+	
			Rock or other impervious formations	NONE observed	

Nitrification lines on sewer easement

Lot Area 1.246 acres

_____ Basement with Plumbing _X_ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines _____

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 Fred Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Charles K. Bennett DATE 12-21-84

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

2:30

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 David Parker DATE 11-4-83 PERMIT NO. 223

PHONE: Business _____ Home _____

LOCATION 150 W TL 1109 on left ~ 1 mile below Williamson Methodist Church TL paved drive on left on H20 S. R. No. _____

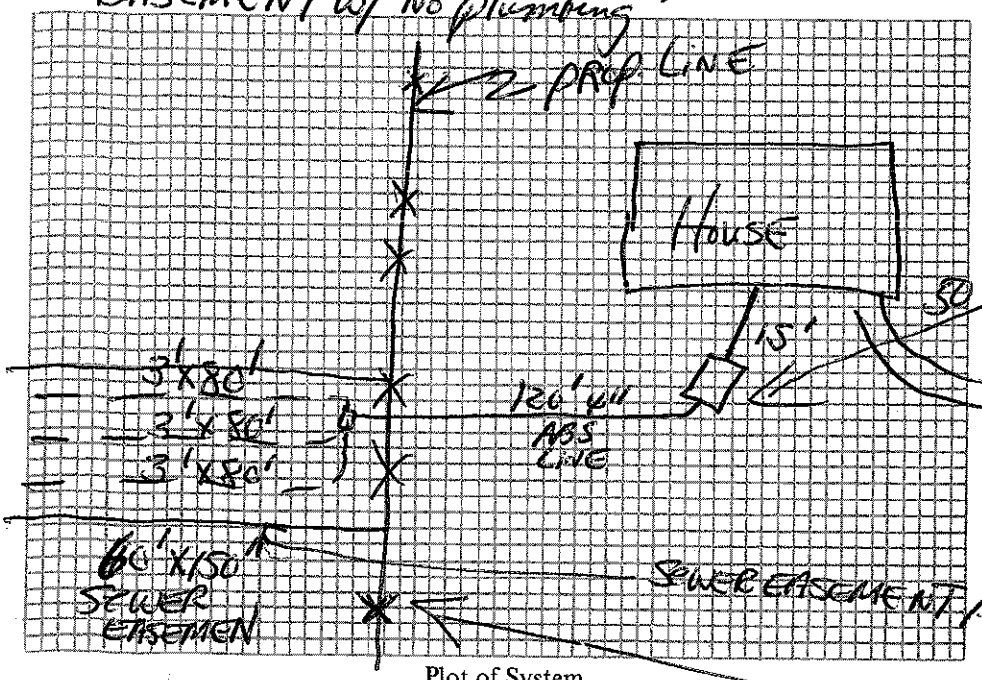
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam	(AREA of Nitrification field & Sewer Easement)
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	.5 gal/sq ft/day	
Auto. Wash. Machine	Yes (X)	No ( )	Topography	2-4%	
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4'+	
			Rock or other impervious formations	NONE observed	

Lot Area 1.246 ACRE (SEWER EASEMENT (150'x60') BASEMENT w/ No plumbing



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 340
Depth of Stone in Lines 15"

Water Supply: Individual (X) Public ( )
(X) Over Location

Installed by DRIVE

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

Signed: X David R Parker

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep System Shallow - no more than 1.5 cover over Nitrification field, backfill around septic tank; Stub plumbing out above foundation level

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