4648028542

Type II

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 T. Guy Barker DATE 2-1-83 PERMIT NO. 32

PHONE: Business _____ Home _____

LOCATION 150W TR 1367 BL 1474 TL 1395 TR 1442 Skeleton left Lake Norman

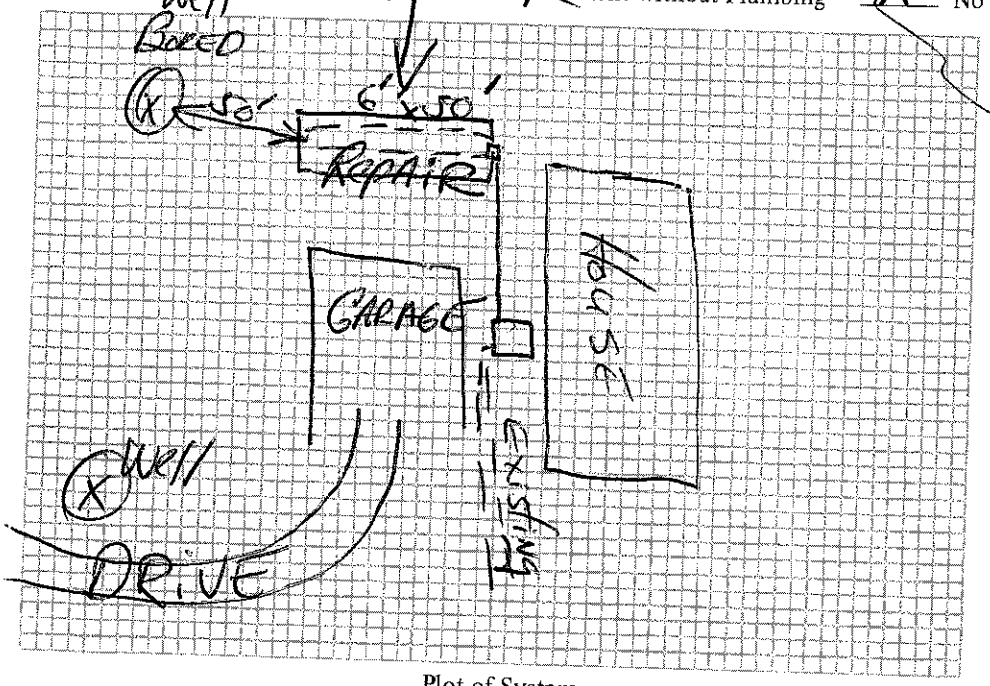
SUBDIVISION NAME _____ LOT NO. 31 S. R. No. _____ SECTION OR BLOCK NO. 12

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil		
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate		
Auto. Wash. Machine	Yes (X)	No ( )	Topography	Existing	
Site Suitable	Yes (X)	No ( )	Depth to Water Table	System	
Lot Area ≈ 1.3 Acre			Rock or other impervious formations		

_____ Basement with Plumbing 50' Basement without Plumbing X No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 300 Linear Ft. 100'
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by Eddie Yountz

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 Fred Clemmer DATE 2-1-83

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

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 To Craig Barker DATE 11-2-82 PERMIT NO. 351

PHONE: Business ______ Home ______

LOCATION 150 W. TR 1467 TR 1395 TR 1442
5th house on left

S. R. No. ______

SUBDIVISION NAME L.N. LOT NO. 31 SECTION OR BLOCK NO. 12

House (✓) Mobile Home ( ) Business ( ) Other Enlarging bedrooms, adding garage

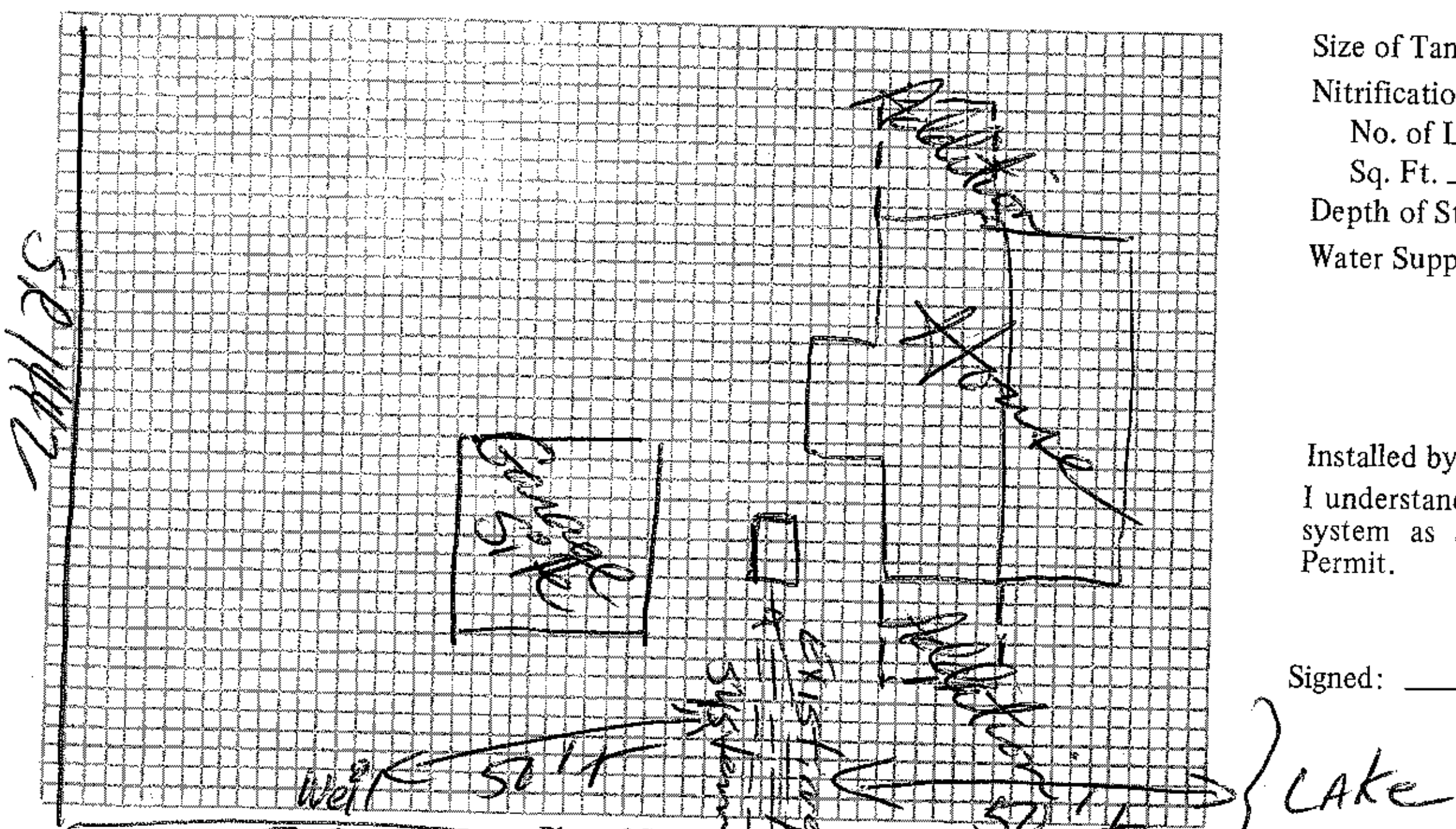
No. Bedrooms 2 No. Bathrooms 2

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

Character & Porosity of Soil ______
Percolation Rate ______
Topography ______
Depth to Water Table ______
Rock or other impervious formations ______

Lot Area Existing

____ Basement with Plumbing ____ Basement without Plumbing ✓ No Basement



DRIVE

Plot of System

Size of Tank Existing Gals.
Nitrification Field
No. of Lines Existing
Sq. Ft. ______ Linear Ft. ______
Depth of Stone in Lines ______
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: Existing system working OK at time of inspection

CERTIFICATE OF COMPLETION BY ______ DATE ______
EXISTING SYSTEM CHECKED BY: David R. Hinson DATE 11-2-82

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