4649-86-3408

10024

# 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 George Whitlock DATE 8/11/89 PERMIT NO. 4E3-A-11

PHONE: Business _____ Home 782-3682

LOCATION 21 N. TL Flowerhouse Loop TL Rankin Hill TL Palomino Park On R ~½ mi. S. R. No. _____

SUBDIVISION NAME Palomino Park LOT NO. 11 SECTION OR BLOCK NO. _____

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

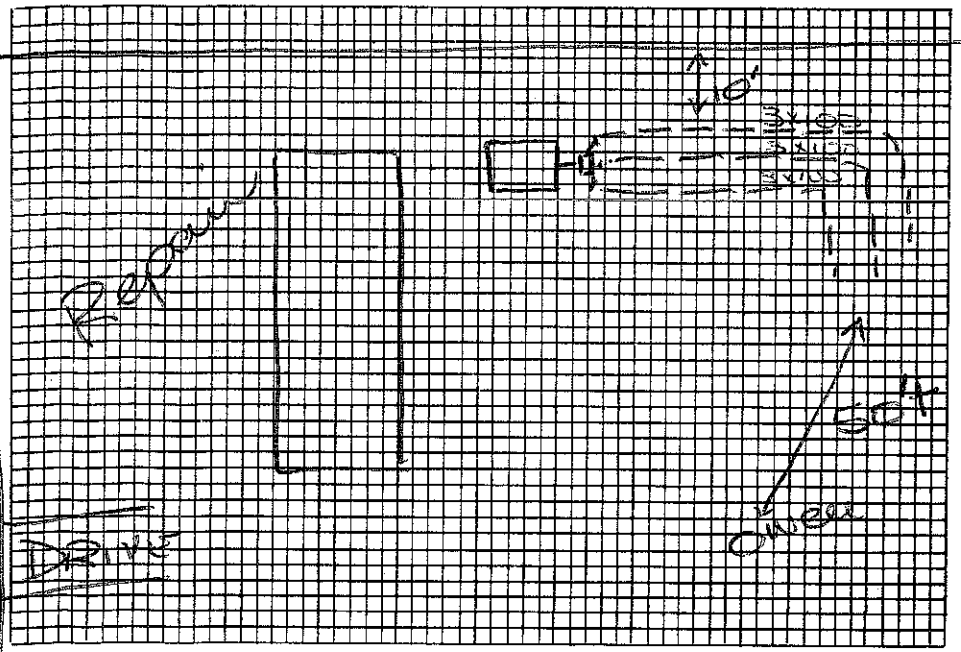
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1 ACRE

Character & Porosity of Soil clayey
Percolation Rate .35 gpd/ft²
Topography 10% rise +
Depth to Water Table 4'+
Rock or other impervious formations none observed soil is 4'+ deep.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement




Plot of System NOT TO SCALE

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. ~~200~~ Linear Ft. 300 ACB
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Wayne Eller

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

Signed: _____

IMPROVEMENTS PERMIT BY ACB

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew C. Jones, R.S. DATE 8/11/89

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

4649-86-3408

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# 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 Gary Lomax DATE 9/17/90 PERMIT NO. 4E-3-A-11

PHONE: Business _____ Home _____

LOCATION 21N TL Flowerhouse TL Rankin Hill TL into Palomino Park

SUBDIVISION NAME Palomino Park LOT NO. 11 SECTION OR BLOCK NO. _____ S. R. No. _____

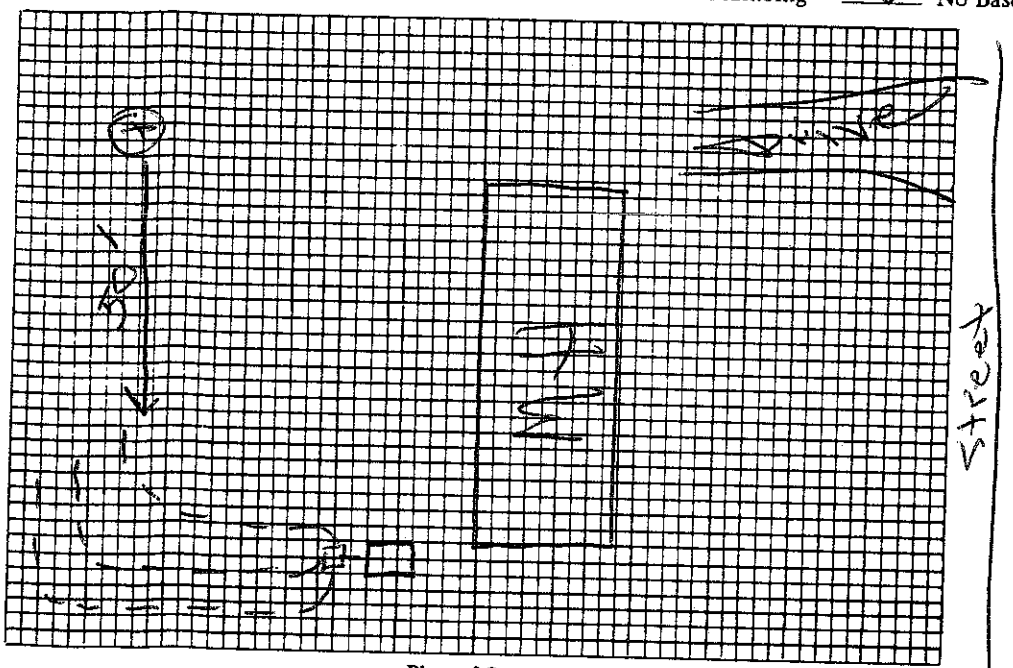
House ( ) Mobile Home (✓) Business ( ) Other _____ See permit George Whitlock 8/11/89

No. Bedrooms 2 No. Bathrooms 2

| | | | |
|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No (✓) | Character & Porosity of Soil Existing |
| Auto. Dishwasher | Yes ( ) | No (✓) | Percolation Rate |
| Auto. Wash. Machine | Yes (✓) | No ( ) | Topography |
| Site Suitable | Yes ( ) | No ( ) | Depth to Water Table |
| | | | Rock or other impervious formations |

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement




Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 300
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: _____

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Sam Ingram E'gt S DATE 9/17/90

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