IREDELL COUNTY HEALTH DEPARTMENT 4056011019

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

OWNER OR CONTRACTOR Willie L. Houston DATE 4-1-85 PERMIT NO. 115

PHONE: Business _____ Home _____

LOCATION 1155 TR Leslie Loop (1189) TR Cross Rail Road (1179) on left XRR Tracks 5th house S. R. No. _____

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

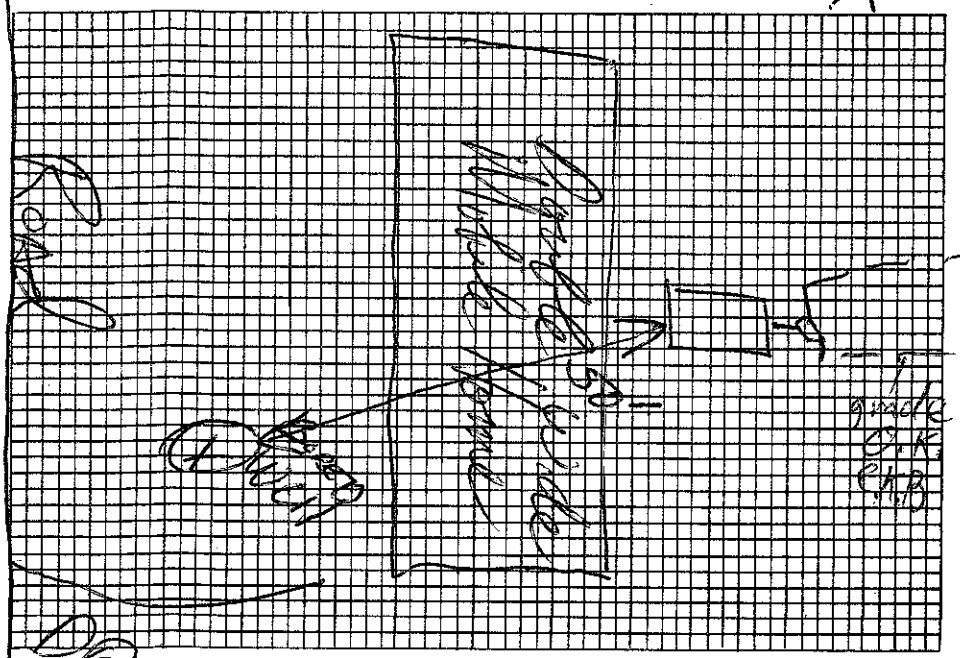
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
~~Lot Area 20,000 Sq Ft~~

Character & Porosity of Soil Clay
Percolation Rate 0.5 gal/ft²/day
Topography Slight
Depth to Water Table _____
Rock or other impervious formations None obs.

_____ Basement with Plumbing _____ Basement without Plumbing X ~~No Basement~~



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by Sigmon Septic

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

Signed: _____

IMPROVEMENTS PERMIT BY F. A. Clemmer & Charles K. Bennett

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer & Charles K. Bennett DATE 4-2-85

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

50

1:30

9:30

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 Willie L. Houston DATE 3-27-85 PERMIT NO. 53

PHONE: Business _____ Home _____

LOCATION 115 S. TR Leslie Loop (1189) TR Cross Rail Road (1170) X RR Tracks Diff beside 5th house on left

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

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Units: Yes ( ) No (X)

Auto. Dishwasher: Yes ( ) No ( )

Auto. Wash. Machine: Yes (X) No ( )

Site Suitable: Yes (X) No ( )

Lot Area 20,000 Ft2

Character & Porosity of Soil Clay

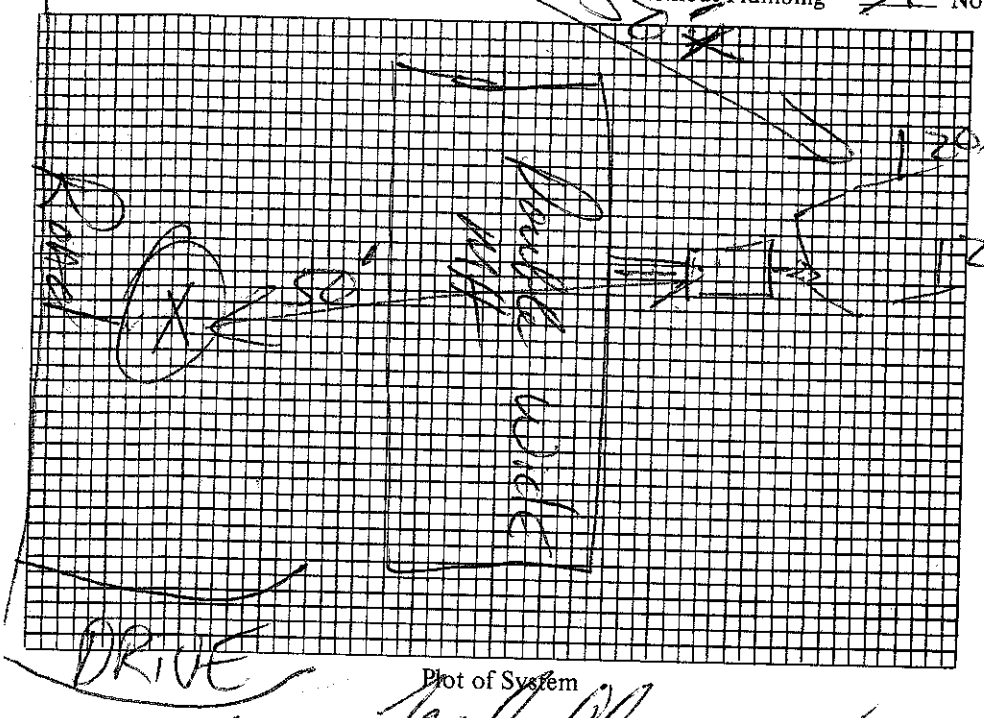
Percolation Rate 0.5 gal/Sq Ft/Day

Topography 2-5%

Depth to Water Table _____

Rock or other impervious formations None Obs.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual X

Public ( )

Installed by _____

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

Signed: X Schonberg Houston

IMPROVEMENTS PERMIT BY Paul Clemmer

COMMENTS: Keep system shallow, About 1.5 Cover

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