4658962680

13997

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Samuel P Nantz DATE 2/5/92 PERMIT NO. IM-A-186

PHONE: Business _____ Home 932-0980

LOCATION ~3 mile on Shinnville Rd. (R) on gravel to end of road on (R)

SUBDIVISION NAME N/A S.R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

House ☐ Mobile Home ☑ Business ☐ Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 20,000 FT²

Soil Characteristics P - SaC + TRANS

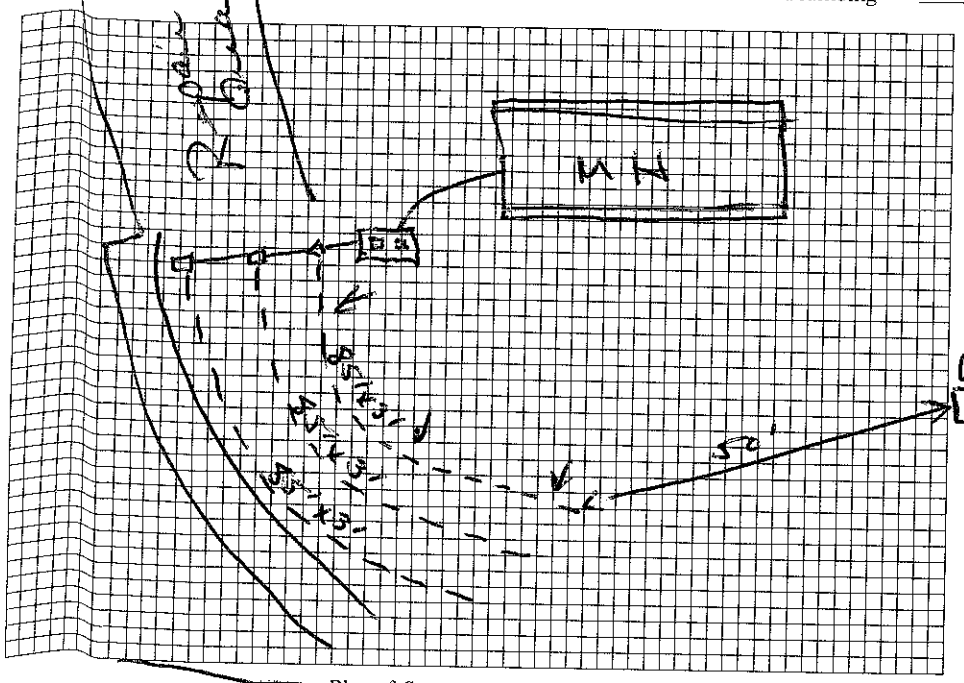
Application Rate .3

Topography 2-4%

Depth to Water Table >48"

Rock or other impervious formations SAPROLITE AT 36"

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement _____ Crawl Space



Plot of System (Not to Scale)

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3 @ 85' x 3'

Sq. Ft. 800 Linear Ft. 255

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐

Well

Installed by Sam Nantz

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY ~~Wesley Sparks~~ DOH

COMMENTS _____

CERTIFICATE OF COMPLETION BY Wesley Sparks R.S. DATE 2/5/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

13997

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Samuel P. Nantz DATE 1/30/92 PERMIT NO. IM-A-186

PHONE: Business _____ Home 932-0980

LOCATION 3 mile on Shinnville Rd. (FR) on gravel to end of road

S.R. No. _____

SUBDIVISION NAME N/A LOT NO. _____ SECTION OR BLOCK NO. _____

House ☐ Mobile Home ☑ Business ☐ Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 20,600 FT²

Soil Characteristics P - 3 & C

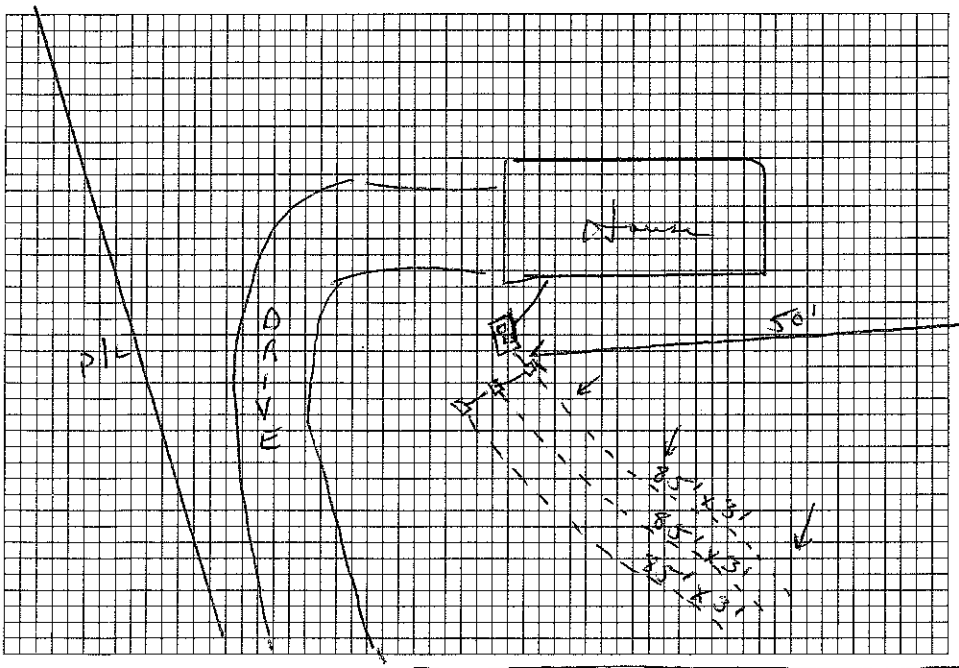
Application Rate .3

Topography 2-4%

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Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3 @ 85' x 3'

Sq. Ft. 800 Linear Ft. 255

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐

Installed by _____

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

Signed: Sam P. Nantz

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY Wesley Sparks R.S.

COMMENTS Maximum trench depth of 24". Trenches on slope contour in direction shown.

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