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 Robert Elliott DATE 6-12-80 PERMIT NO. 165

PHONE: Business _____ Home _____

LOCATION 2/N TR 2389 11th house on Rt

_____ S. R. No. _____

SUBDIVISION NAME Shepherd Valley LOT NO. 7 SECTION OR BLOCK NO. _____

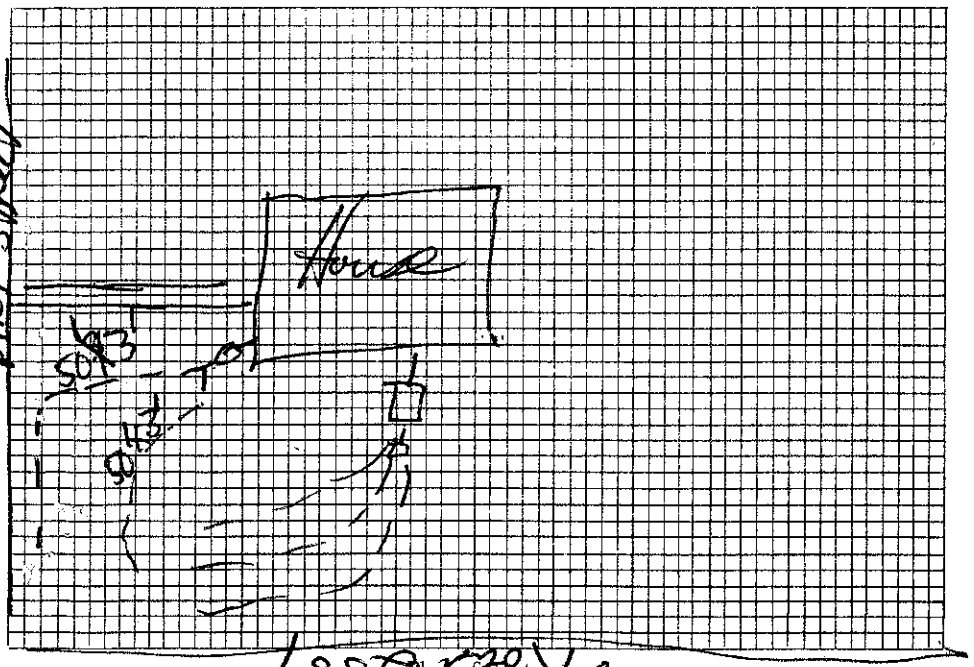
House ( ) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes ( ) No (X)
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area ~3/4 Acre

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

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 50 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 10"
Water Supply: Individual (X)
Public ( )

Installed by J. 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 Fred Clemmer DATE 6-12-80

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

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

OWNER OR CONTRACTOR Smith Builders Inc DATE 6-10-94 PERMIT NO. 154

PHONE: Business 704-4644 Home _____

LOCATION US 21 N TR on 3359 1/2 mi on right

S. R. No. _____

SUBDIVISION NAME Shepherd Valley LOT NO. 2 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 1.04 ± 15

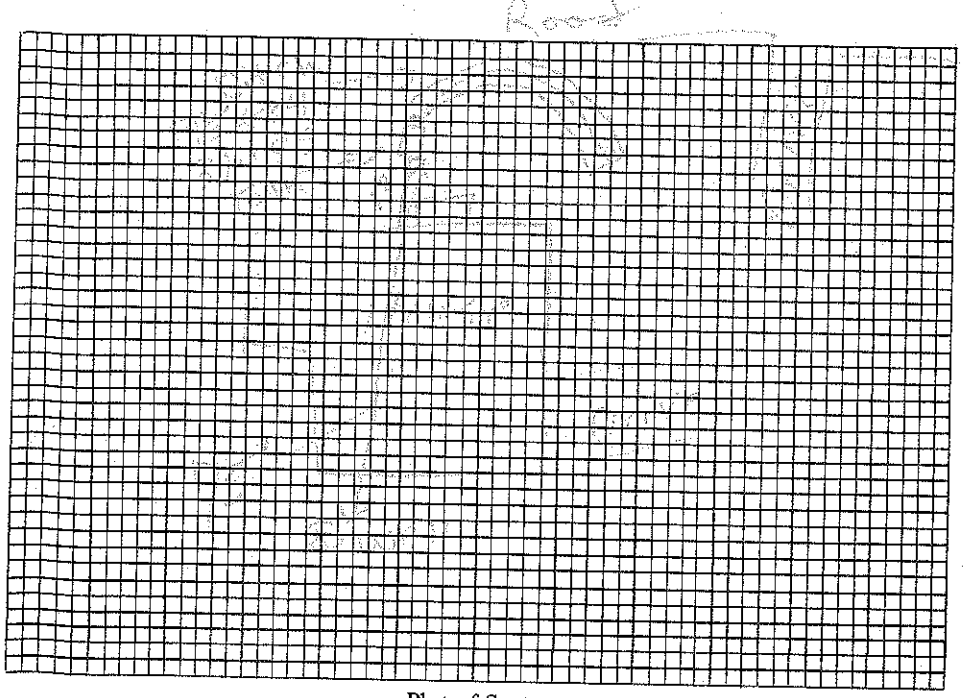
Character & Porosity of Soil Cecil Sandy loam

Percolation Rate Not tested

Topography Gently sloping

Depth to Water Table Not encountered

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 225 Linear Ft. 250

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by J R Rawls

IMPROVEMENTS PERMIT BY David Gabriel

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 6-10-94

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

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