4664185303

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 Sam A. Beam, Inc DATE 2-14-86 PERMIT NO. 66

PHONE: Business _____ Home _____

LOCATION 1155 TL 1138 (Presbyterian Road) 1½ mile on R

S. R. No. _____

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

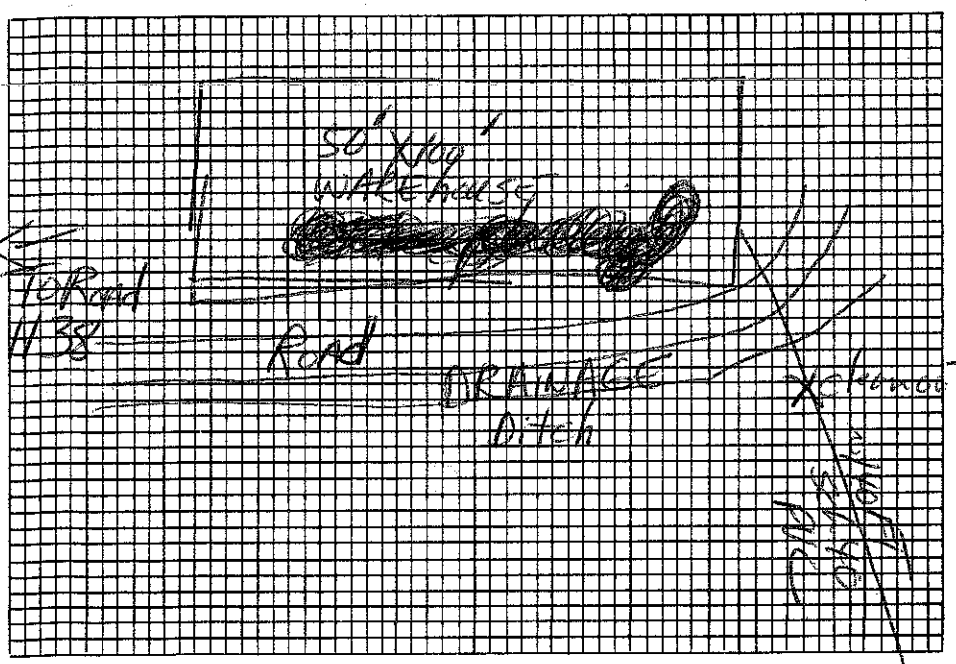
House ( ) Mobile Home ( ) Business (X) Other 50'X100' WAREHOUSE

No. Bedrooms _____ No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes ( ) No (X)
Auto. Wash. Machine Yes ( ) No (X)
Site Suitable Yes (X) No ( )
Lot Area 2+ ACRE

Character & Porosity of Soil Silty clay - p.m
Percolation Rate 0.3 gal/ft²/day
Topography 2 to 4%
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 3
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by LARRY Beam

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

Signed: _____

3'X67'
3'X67'
3'X67'

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: hit old fill material

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 2-14-86

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

2.00

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 Sam A. Beam DATE 7-1-85 PERMIT NO. 757

PHONE: Business _____ Home _____

LOCATION 1155 TL 1138 1/2 mile on R

S. R. No. _____

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

House ( ) Mobile Home ( ) Business (X) Other 50'x100' Warehouse

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

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

Site Suitable Yes (X) No ( )

Lot Area .021+ ACRE

Character & Porosity of Soil Silty Clay - Firm

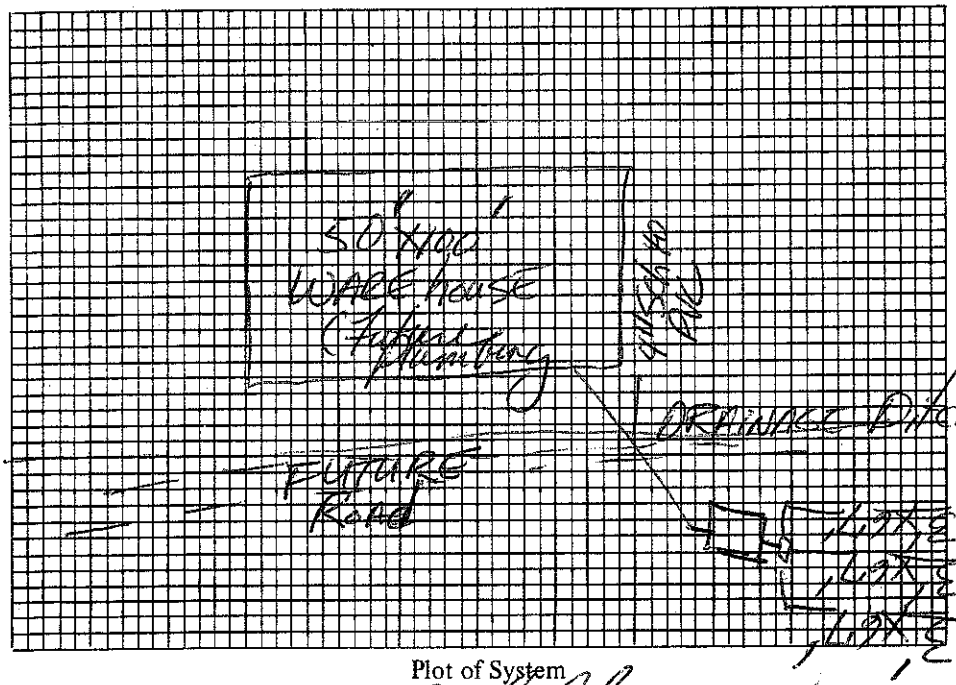
Percolation Rate 0.5 gal/ft²/day

Topography 2-4% Slope

Depth to Water Table _____

Rock or other impervious formations NONE OBS.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 600 Linear Ft. 200
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 Alex Beam

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep System Shallow, follow contours

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

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 Gene BRANSON DATE 2-14-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1102 X I-77, R dirt Road beside BRANSON Field
R dirt street AT White FARM House S. R. No. _____

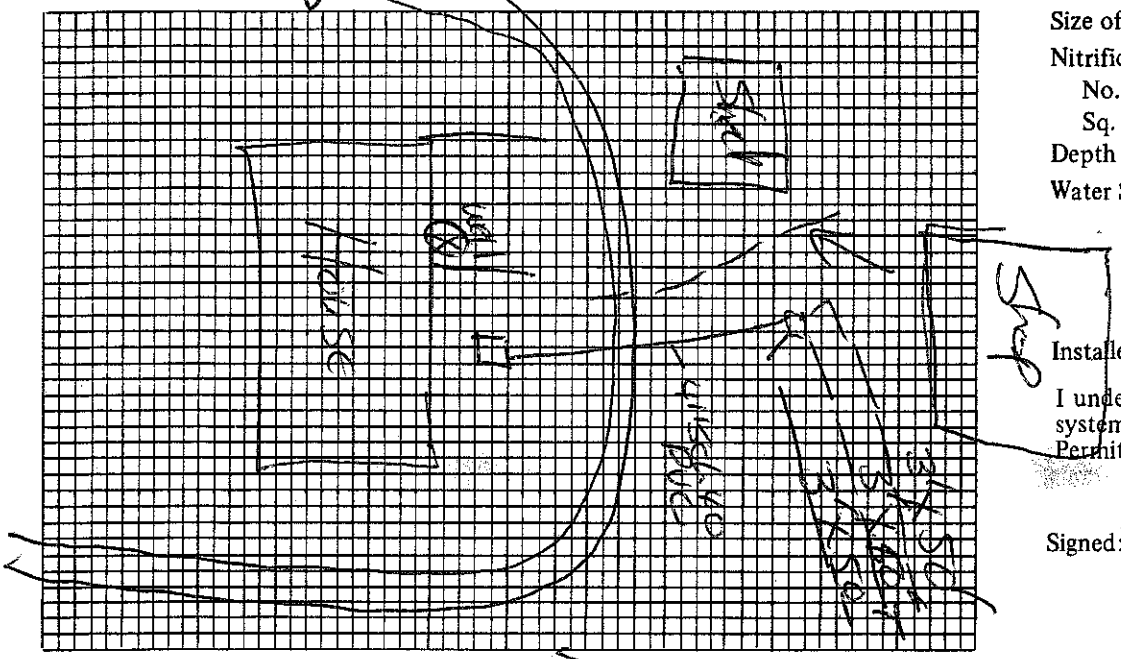
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 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		
Lot Area EXISTING			Rock or other impervious formations	System	

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank EXISTING Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 450 Linear Ft. 150
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 Gene Branson

IMPROVEMENTS PERMIT BY FAC FCKB DIRT Road

COMMENTS: Check tank for 4"

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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