PIN: 4665791223

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 Joseph C. Curtis DATE 11/17/87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Coodle Creek Rd. TR Kistler Rd ~ 1 mi. on Right b/f lumber yard (on left) S. R. No. _____

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

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

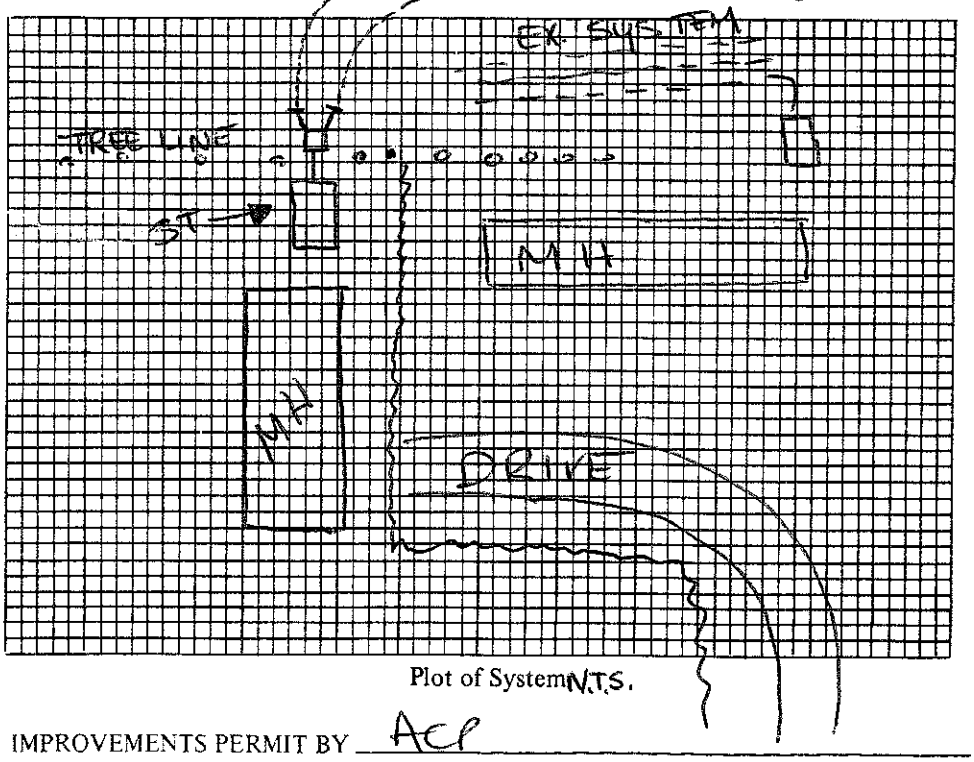
No. Bedrooms 2 No. Bathrooms 1

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

Character & Porosity of Soil Clayey
Percolation Rate ~.4 gpd/ft2
Topography 6-10%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 8.75 ACRES

_____ Basement with Plumbing 3' x 100' 1' x 100' Basement without Plumbing _____ No Basement



Plot of System N.T.S.

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by F.J. ERVIN

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Audie C. Queen DATE 11/17/87

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

1593

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 Joseph C. Curtis DATE 11/6/87 PERMIT NO. _____

PHONE: Business _____ Home 663-4811

LOCATION Coodle Creek Rd. TR Kistler Rd ~ 1 mile on (R.) Before LUMBER YARD (ON LEFT.) S. R. No. _____

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

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

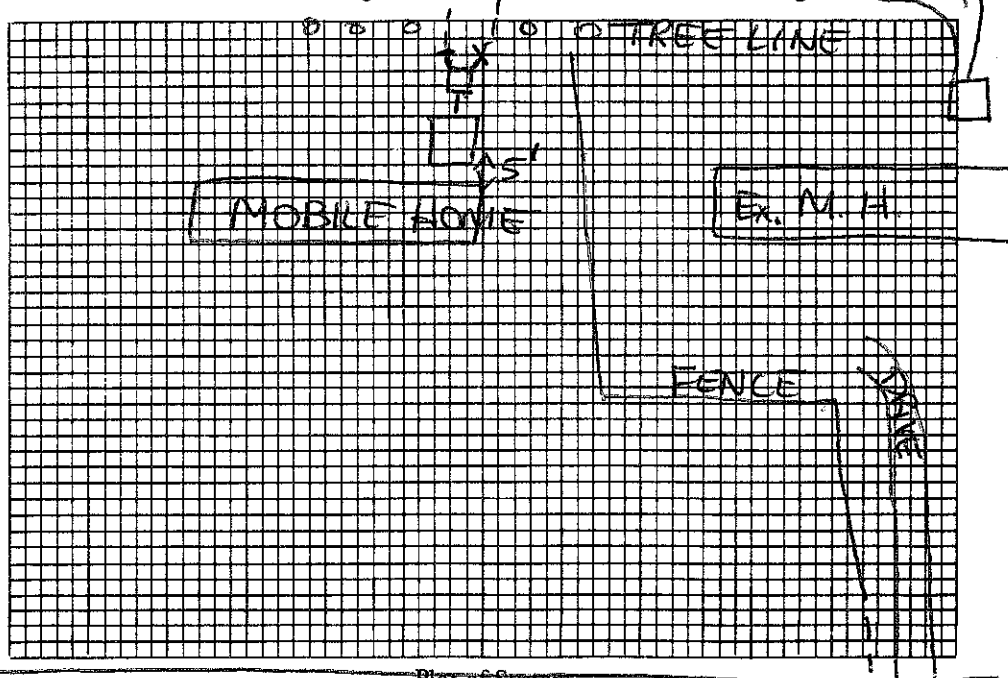
No. Bedrooms 2 No. Bathrooms 1

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

Character & Porosity of Soil Clayey
Percolation Rate ~.4 gpd/ft²
~~Topography~~ 6-10%
~~Depth to Water Table~~ 4'+
Rock or other impervious formations none observed

Lot Area 8.75 ACRES

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed: Judy Curtis

IMPROVEMENTS PERMIT BY Andrew C Pierce

COMMENTS: Set tank 5' off home. Run lines on contour. SHOOT CONTOUR LINES b/f digging. Lines should be 30" deep.

— 11/16 — TANK NOT PASSED FORM TURNED

CERTIFICATE OF COMPLETION BY WRONG! BAFFLE WALL DATE _____

EXISTING SYSTEM CHECKED BY: OUT OF PLACE 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