IREDELL COUNTY HEALTH DEPARTMENT 4Ue5892024

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

OWNER OR CONTRACTOR Jerry Curtis DATE 8-28-86 PERMIT NO. 475

PHONE: Business _____ Home _____

LOCATION 1146 TR Kistler Rd. 1-1½ miles on left ~300' off road S. R. No. _____

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

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

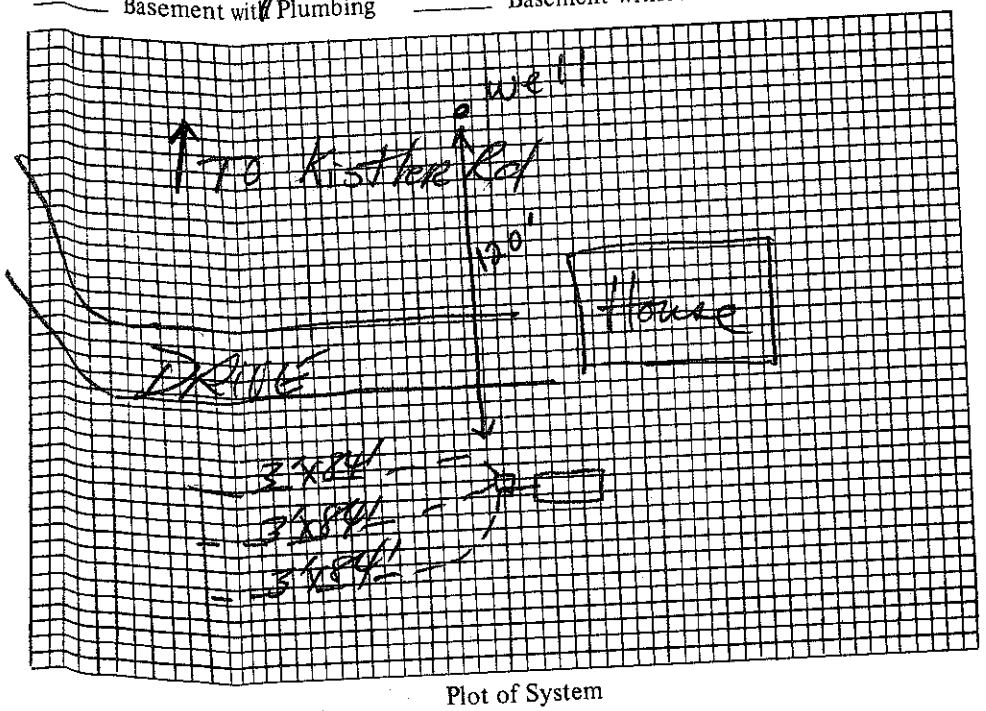
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil clay
Percolation Rate 5
Topography 6-8% slope
Depth to Water Table 4ft
Rock or other impervious formations none obs.

Lot Area acreage

___ Basement with Plumbing ___✓___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by H J Evans

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

Signed: _____

IMPROVEMENTS PERMIT BY CKB

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Jackie H Evans LSS DATE 8-28-86

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

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

DATE 6-28-85 PERMIT NO. 230

OWNER OR CONTRACTOR Jerry Curties

PHONE: Business _____ Home _____

LOCATION 136 S TR Kistler Rd go about ~1 mile TL into pasture across Curties's shop s/t rail fence 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)

Auto. Dishwasher Yes (X) No ( )

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

Site Suitable Yes (X) No ( )

Character & Porosity of Soil clay

Percolation Rate 59 all 72 P day

Topography 2 3 to 6%

Depth to Water Table 4'

Rock or other impervious formations None obs.

Lot Area acreage

_____ Basement with Plumbing X Basement without Plumbing _____ No Basement

Size of Tank 1000 Gals.

Nitrification Field:

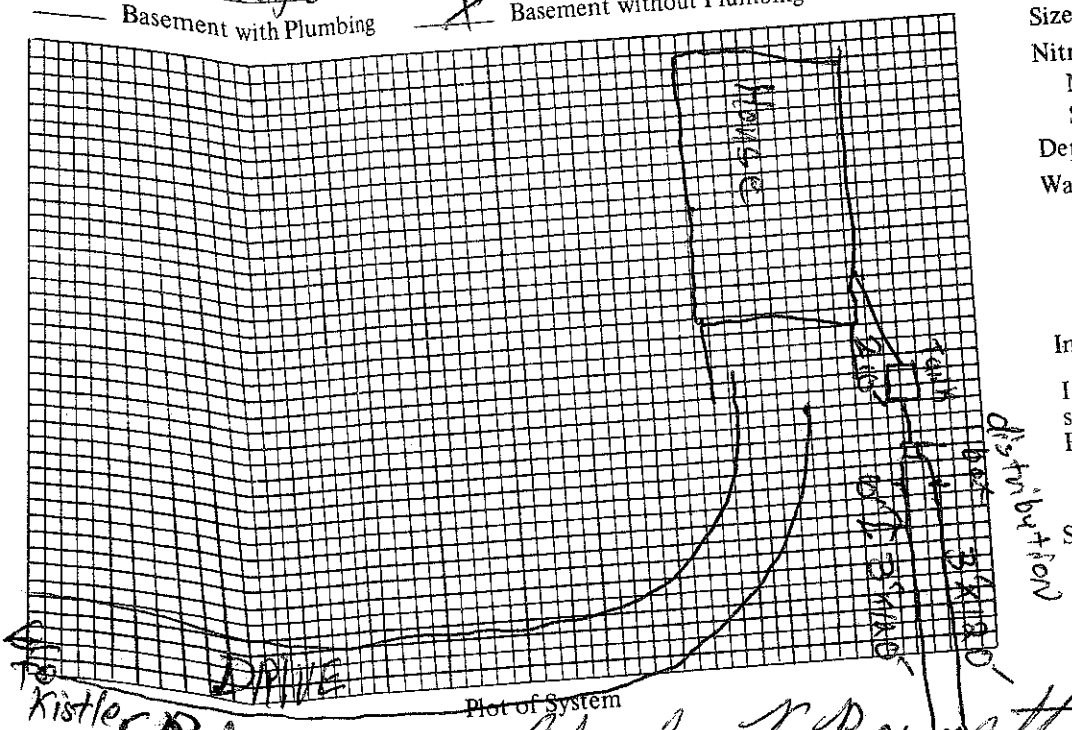
No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (X)

Public ( )



Installed by _____

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

Signed: Suzanne Hunter

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: deep system shallow no more 2.5' deep and follow contour; when well is put in keep 50' from system (tank & lines)

DATE _____

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____

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