4666129011

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 Cloffelter Builders DATE 11-21-86 PERMIT NO. 609

PHONE: Business Shearers Rd. Home

LOCATION 1125 S. Tr White Oaks Rd. 3rd lot on Rt.

S. R. No.

SUBDIVISION NAME R P Ellis property LOT NO. 18 SECTION OR BLOCK NO.

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

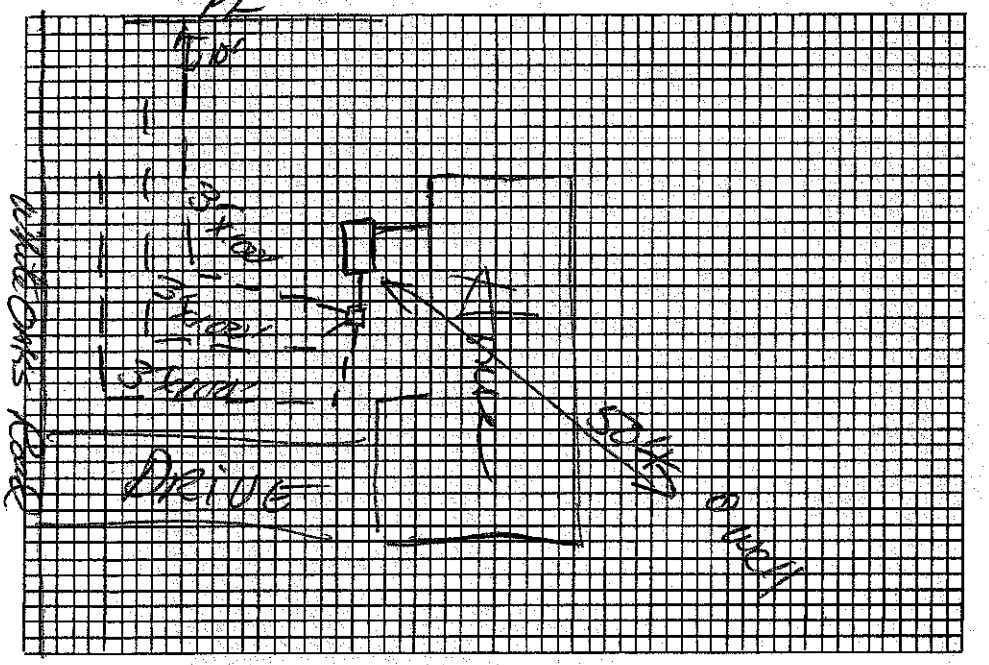
No. Bedrooms 3 No. Bathrooms 2

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 4
Topography Gently
Depth to Water Table 4'
Rock or other impervious formations none obs.

Lot Area 20000 sq ft +

_____ Basement with Plumbing ___✓___ Basement without Plumbing (PARTIAL) _____ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by J R Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY [signature]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature], R.S. DATE 11-21-86

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

~~10~~ 10-30

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 Clodfelter Builders DATE 8-20-86 PERMIT NO. 361

PHONE: Business _____ Home _____

LOCATION 1125 S. ~~N~~ White Oaks Rd. 3rd lot on Rt.

S. R. No. _____

SUBDIVISION NAME R.P. Ellis property LOT NO. ~~19~~ 18 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 4

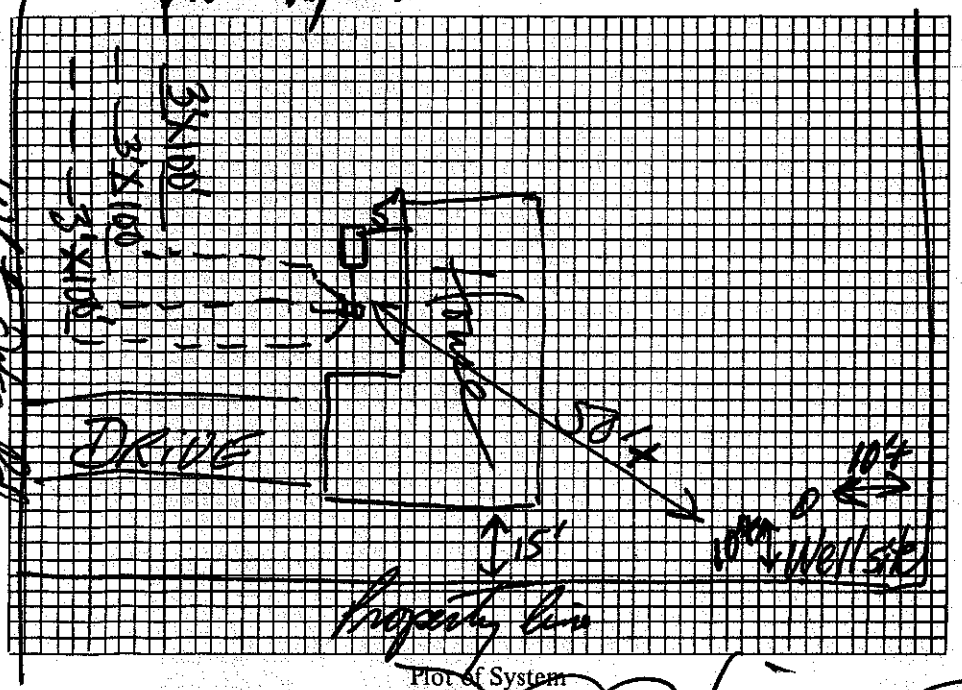
Topography 4 6 20 4

Depth to Water Table 4+

Rock or other impervious formations none obs.

Lot Area 20000ft²

_____ Basement with Plumbing ✓ (Crawl/Basement) _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

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.

X Signed: Phillip Clodfelter

IMPROVEMENTS PERMIT BY Jane R. Hamm, RS

COMMENTS: Keep septic tank shallow in order to keep liner from being too deep.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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