4666651 4274

1056

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 Annie Kistler Bruce DATE Dec 2, '88 PERMIT NO. 22-A

PHONE: Business _____ Home _____

LOCATION 136 S. TR 1148 (Kistler Rd.) ~½ mile on Rt.

S. R. No. _____

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

DW

House ( ) Mobile Home (✓) Business ( ) Other Adding Detached GARAGE (Repair to System)

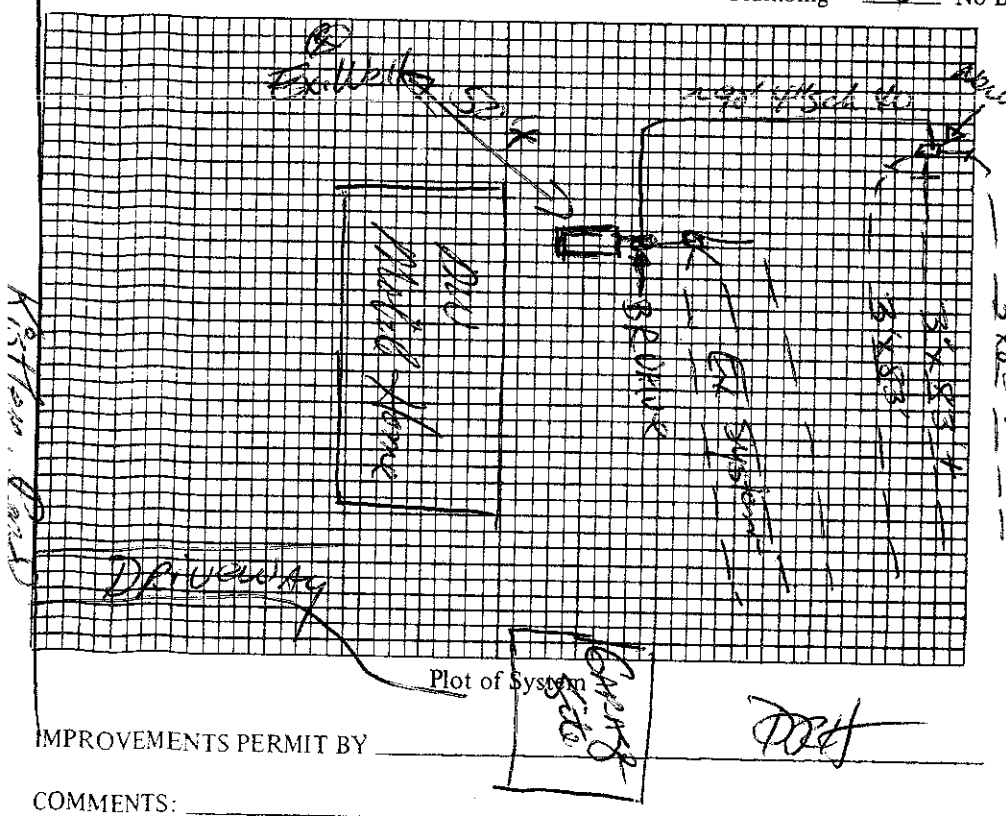
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 10 AC

Character & Porosity of Soil clay
Percolation Rate 2, 3
Topography 2-4%
Depth to Water Table 4'+
Rock or other impervious formations none Obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 150+ Linear Ft. 250+
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Jason Benton

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D. E. Hinson, RS. DATE 12-2-88

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

1056

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 Connie Kistler Bruce DATE Nov. 23, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1365 S. TR Kistler Road ~½ mile on Rt.

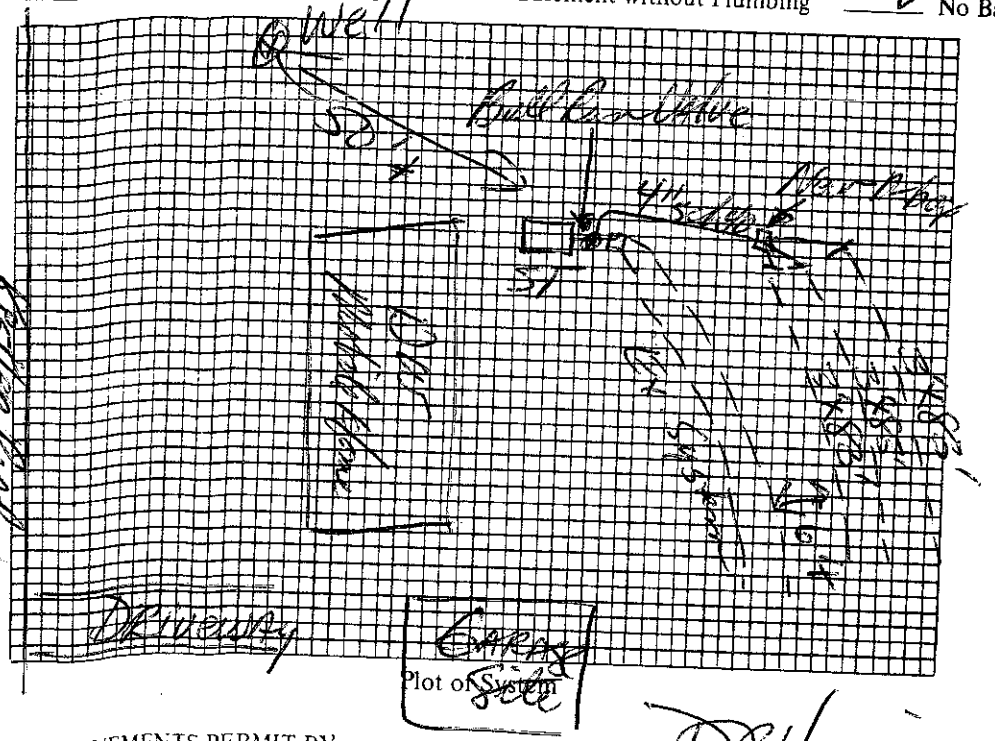
SUBDIVISION NAME _____ LOT NO. _____ S. R. No. _____

SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other Adding Detached Garage

No. Bedrooms	3	No. Bathrooms	2		
Garbage Disposal Unit	Yes ( )	No	(✓)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No	( )	Percolation Rate	2.3
Auto. Wash. Machine	Yes (✓)	No	( )	Topography	2-4%
Site Suitable PS.	Yes ( )	No	( )	Depth to Water Table	4+
Lot Area 10 Ac.				Rock or other impervious formations	none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 750 Linear Ft. 250

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: X Charles R. Bruce

IMPROVEMENTS PERMIT BY D. R. Hinson, RS

COMMENTS: System to be repaired before final inspections for garage.
Install drainfield on contour and at a depth of 30" to trench bottom.

CERTIFICATE OF COMPLETION BY _____

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