4667628449

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 Billy Keith Luffman DATE 10/8/87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Pine Street TR Cook St. TL Central Avenue

_____ S. R. No. _____

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

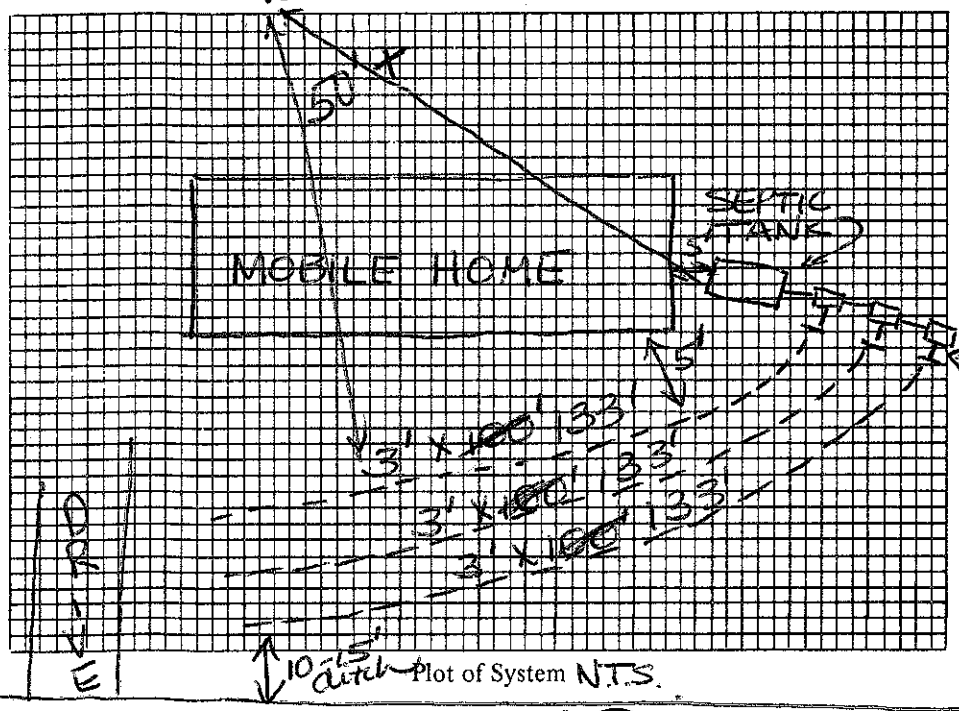
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms _____
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 .3 gpd/ft²
Topography 4-8%
Depth to Water Table 4' +
Rock or other impervious formations none observed

Lot Area 20,000 ft²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System N.T.S.

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1200 Linear Ft. ~~400~~ 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by ROWAN SEPTIC TANK

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

Signed: _____

IMPROVEMENTS PERMIT BY Audrey C. Preas CENTRAL AVENUE

COMMENTS: A.C.P — 133' lines → 10/19/87 made mistake on drawing

CERTIFICATE OF COMPLETION BY Audrey C. Preas DATE 10/8/87

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

MOORESVILLE
0692

2:30

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 Billy Keith Luffman DATE Aug 13, 1987 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 100 Pine St. TR Cook St. TL. Central Avenue.

_____ S. R. No. _____

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

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

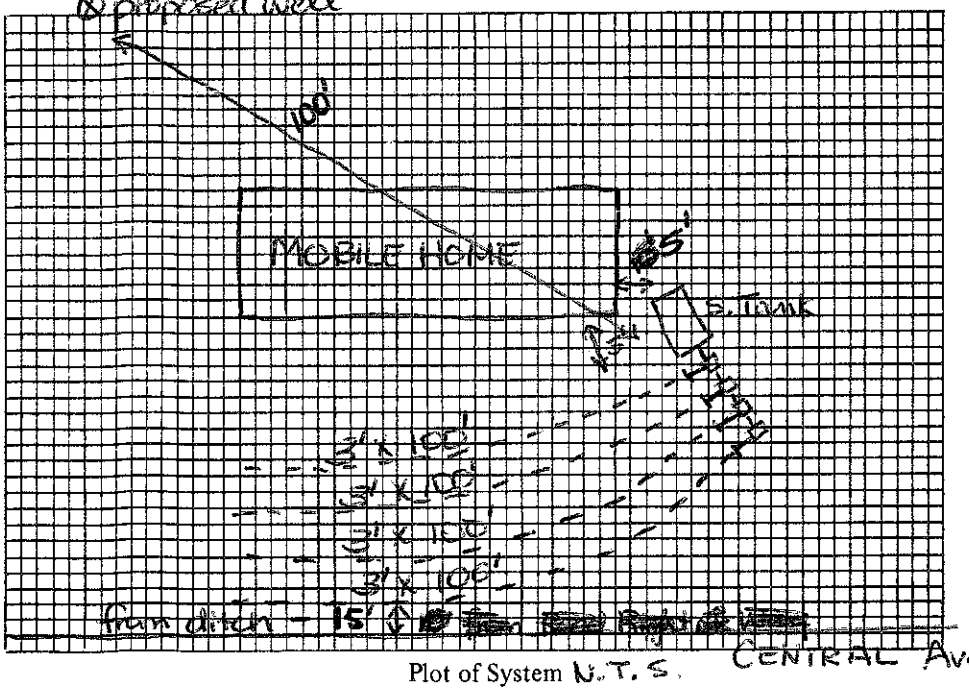
No. Bedrooms 3 No. Bathrooms _____

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 ~3 gpd/ft²
Topography 4-8%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 20,000 ft²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System N.T.S.

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
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: Billy Keith Luffman

IMPROVEMENTS PERMIT BY Andrew C. Price

COMMENTS: Install in a series of drop boxes. Keep system shallow (24"-36") with nitrification lines along contour. DO NOT grade lot other than slight modifications. Stay 15' from road cut.

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