IREDELL COUNTY HEALTH DEPARTMENT 4668499987

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

OWNER OR CONTRACTOR William J. Reese DATE 1-22-85 PERMIT NO. 15

PHONE: Business _____ Home _____

LOCATION 115 N TR Mazeppa Rd go 1 3/4 mile TL on Woodridge go to end of road TRST house on L S. R. No. _____

SUBDIVISION NAME Woodridge LOT NO. 10 SECTION OR BLOCK NO. _____

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

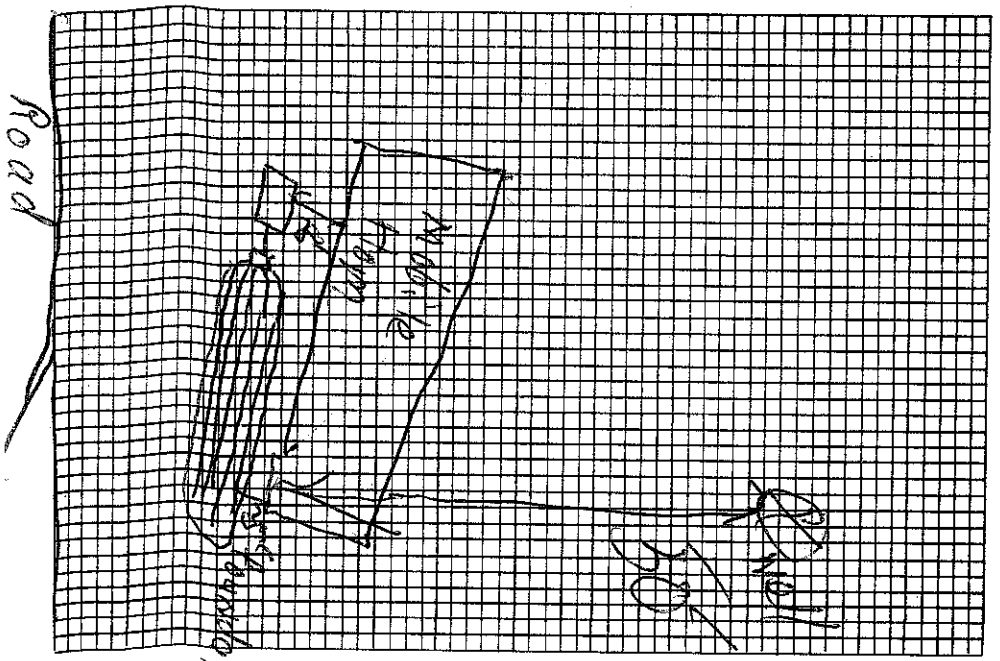
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 20,000

Character & Porosity of Soil clay loam
Percolation Rate .4 gal/ft²/day
Topography 10% - 5%
Depth to Water Table 4'
Rock or other impervious formations None observed

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement




Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 5
Sq. Ft. 1080 Linear Ft. 360
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: _____

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: Existing system working OK at date of inspection

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Charles K. Barnett + Fred Clemmer DATE 1-22-85

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** 4068499987

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

OWNER OR CONTRACTOR Helen Moore DATE 3-2-84 PERMIT NO. 41

PHONE: Business _____ Home _____

LOCATION 115 N TR 2395 (Mazeppa Rd.) 1¾ miles TL Woodridge drive at end TR Cornado on left S. R. No. _____

SUBDIVISION NAME Woodridge acres LOT NO. 10 SECTION OR BLOCK NO. _____

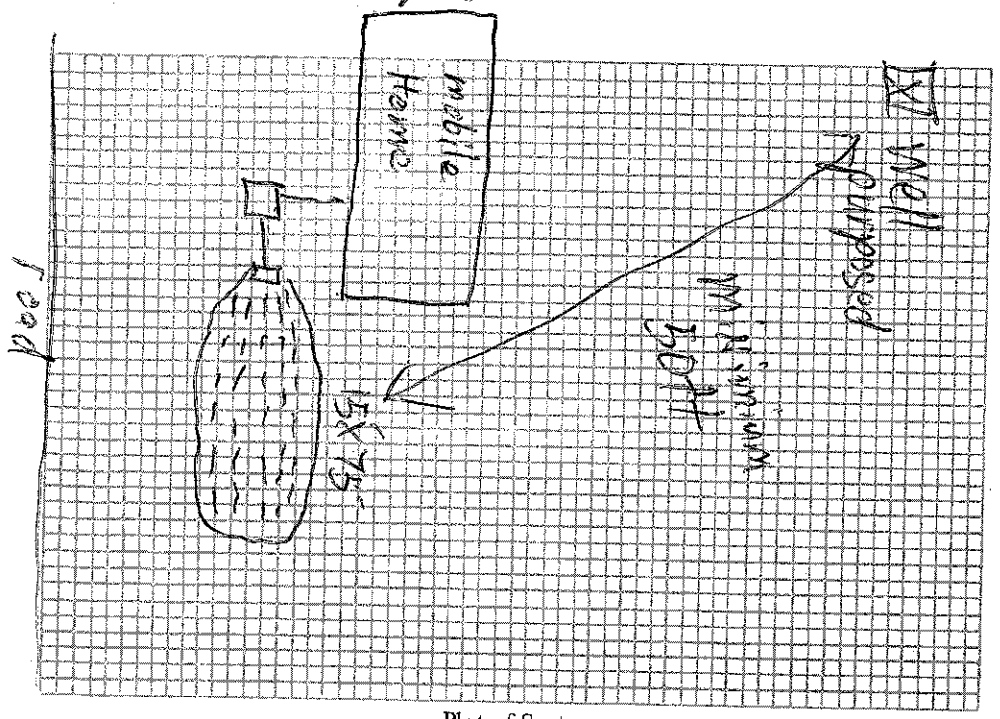
House ( ) Mobile Home (X) Business ( ) Other _____

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 ( ) |

Lot Area 20000 ft² plus

Character & Porosity of Soil clay loam silty parent material
Percolation Rate 14 gal/ft²/day
Topography 10% to 95% slope gullied (mod)
Depth to Water Table 48" to water table
Rock or other impervious formations NONE observed




Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 45
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 12"
Water Supply: Individual (X)
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 Charles K. Barnett

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Charles K. Barnett DATE 3-2-84
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