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 Franklin Skidmore DATE 9-3-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Shinnville Rd. Pass Shinnville - Shinville Store 1 1/2 miles on R. S. R. No. _____

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

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

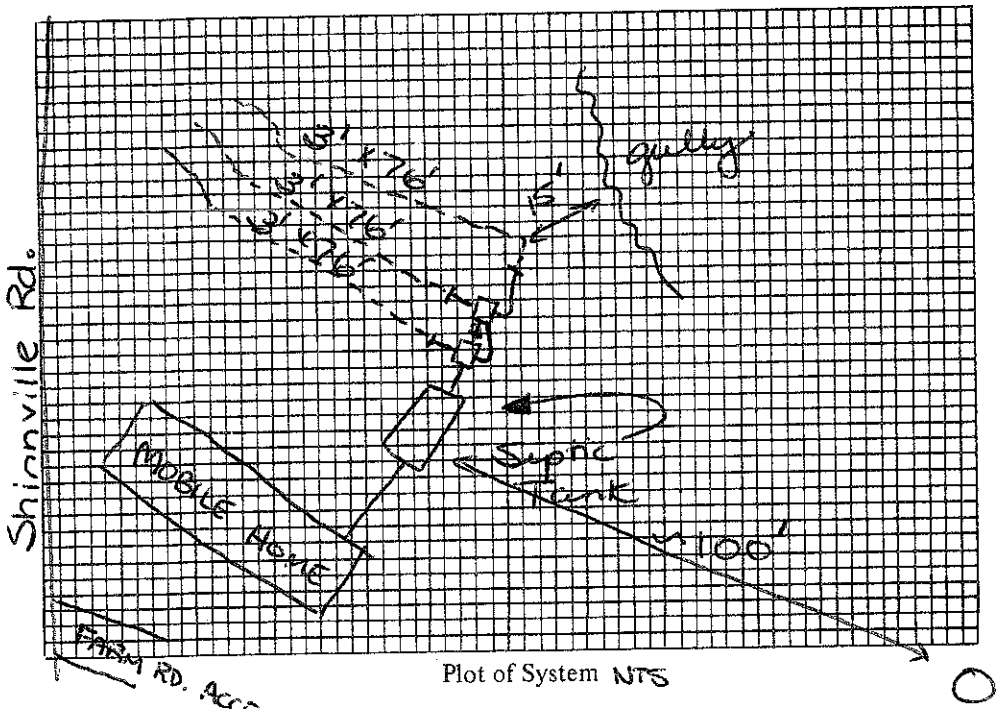
No. Bedrooms 2 No. Bathrooms 1 1/2

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 ~.35 gpd/ft²
Topography ~10%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 3 ACRE

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System NTS

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 684 Linear Ft. 228
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by DONALD LACKEY

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

Signed: _____

IMPROVEMENTS PERMIT BY Andre C. Pierce

COMMENTS: Speed levelers used to assure correct distribution.

CERTIFICATE OF COMPLETION BY Andre C. Pierce DATE 9-3-87

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

1281

203

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 Franklin Skidmore DATE 8-26-87 PERMIT NO. _____

PHONE: Business _____ Home 663-0252

LOCATION Shinnville Rd. Pass Shinnville-Shinns Store 1½ miles on Right S. R. No. _____

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

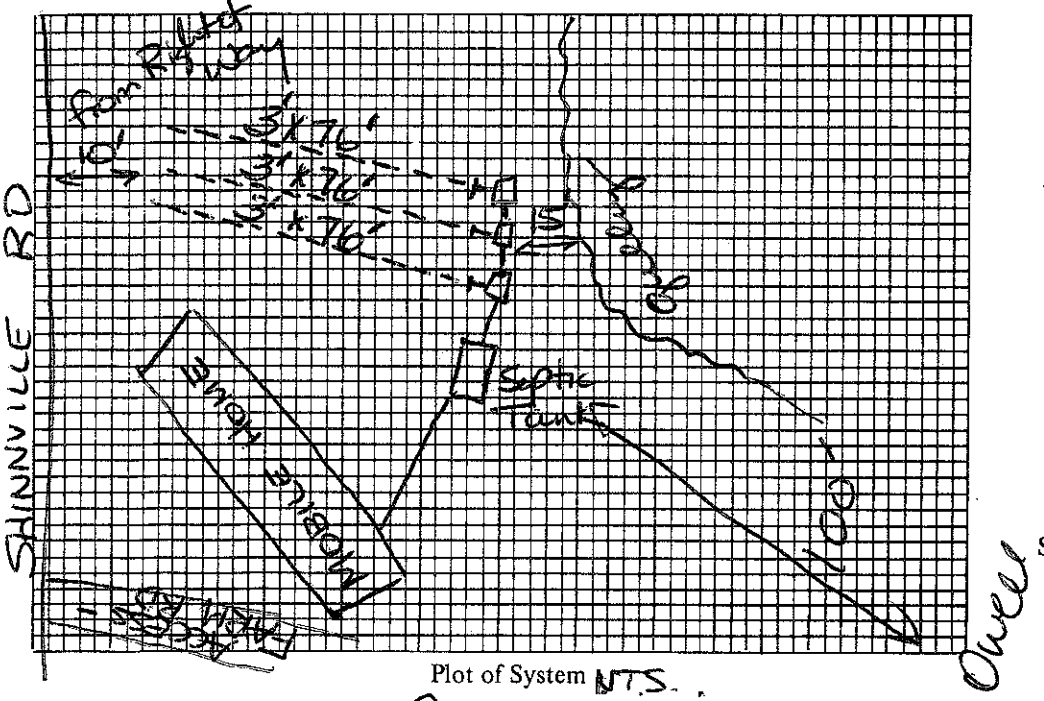
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clayey
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	~.35 gpd/ft
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	~10%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'+
			Rock or other impervious formations	none observed

Lot Area 3 ACRE

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



Plot of System NTS.

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 684 Linear Ft. 228
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 Franklin D Skidmore

IMPROVEMENTS PERMIT BY Andrew C Brown

COMMENTS: Install Drop Boxes with lines ALONG CONTOUR! Keep lines SHALLOW (24"-30" to trench bottoms) AREA May have to be modified where drainfield is to be Don't cut away too much soil

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