4676-26-9862

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 Bernice Miller DATE 7-31-86 PERMIT NO. 433

PHONE: Business ____ Home ____

LOCATION 1150 TL Brumley Rd on Rt lot on corner

____ S. R. No. ____

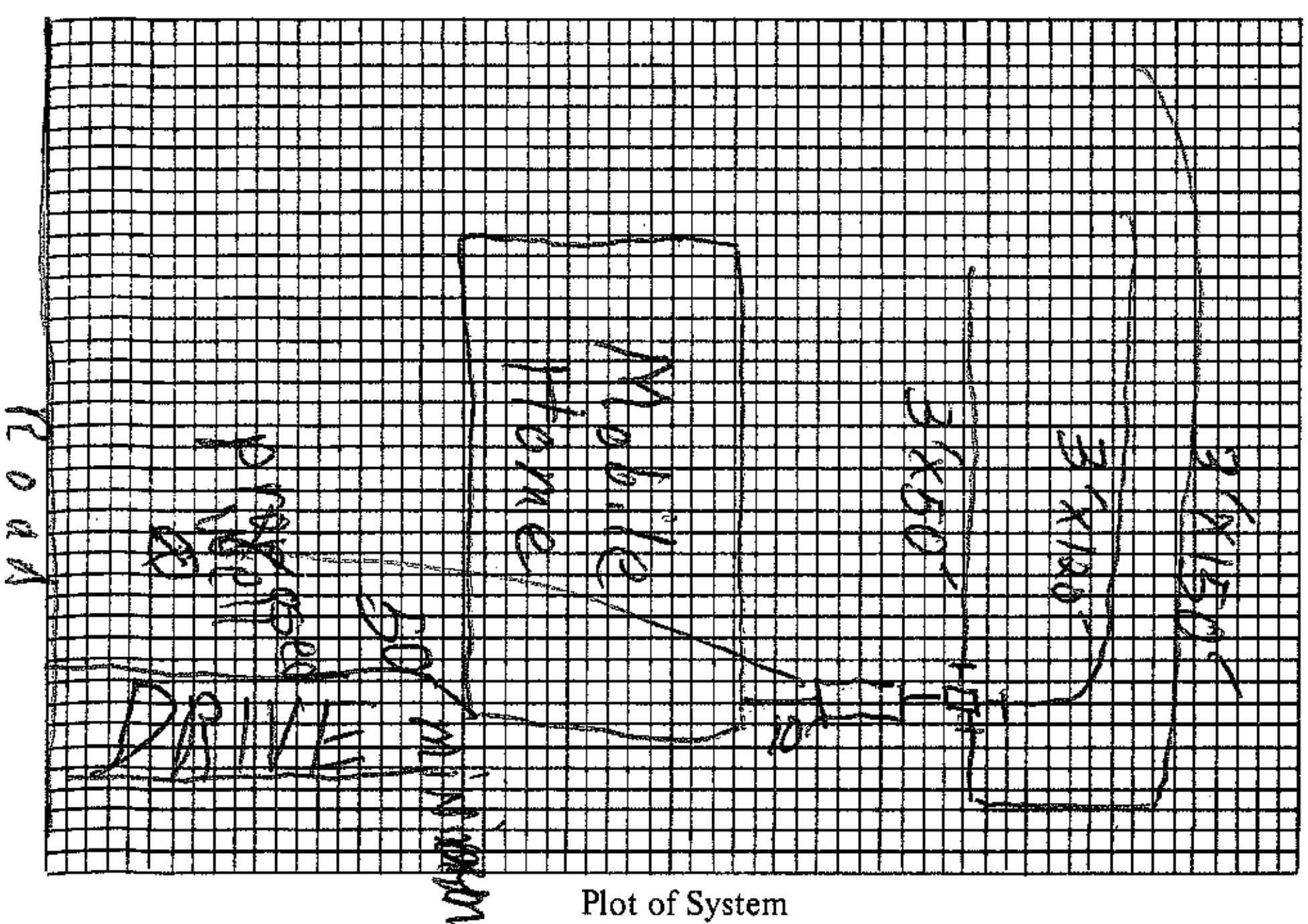
SUBDIVISION NAME Quail Hill LOT NO. 36 SECTION OR BLOCK NO. ____

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

No. Bedrooms 4	No. Bathrooms 2	Character & Porosity of Soil	sandy clay loam
Garbage Disposal Unit	Yes ( ) No (✓)	Percolation Rate	~.5 gal/ft²/day
Auto. Dishwasher	Yes (✓) No ( )	Topography	4-6%
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	4'+
Site Suitable	Yes (✓) No ( )	Rock or other impervious formations	None obs

Lot Area ~1 acre

____ Basement with Plumbing ____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 960 Linear Ft. 320

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Rowan Septic

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

Signed: ____

IMPROVEMENTS PERMIT BY David Hinson

COMMENTS: well not down yet

CERTIFICATE OF COMPLETION BY Charles K. Barnett DATE 7-31-86

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

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 Bernice Miller DATE 7-15-86 PERMIT NO. 315

PHONE: Business _____ Home _____

LOCATION 1150 TL Brumley Rd. on Rt lot on corner

S. R. No. _____

SUBDIVISION NAME Quail Hill LOT NO. 36 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 2

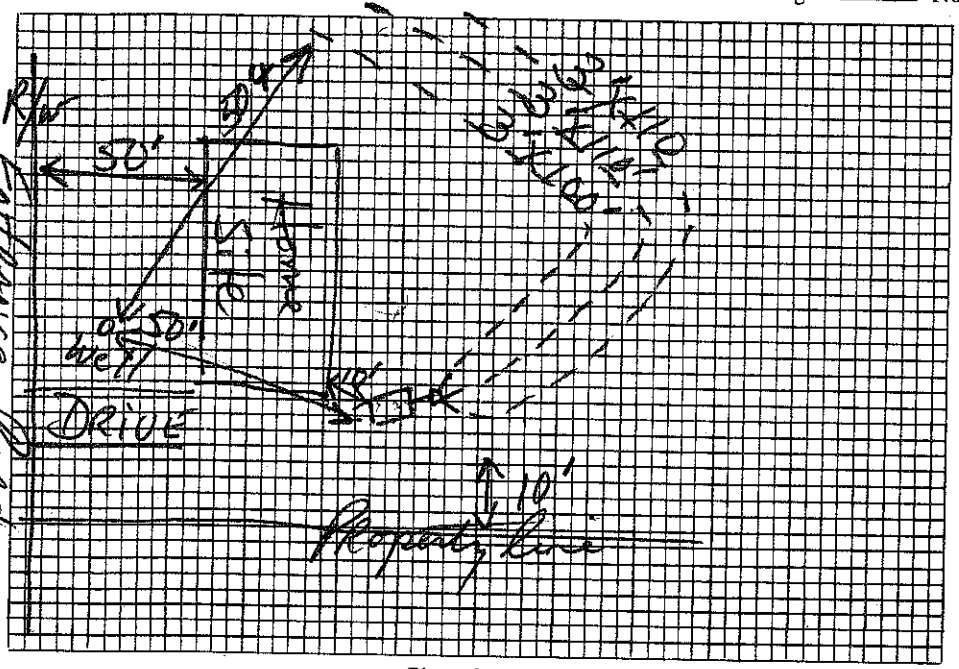
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Sandy clay loam
Percolation Rate 5 mpi/hr
Topography Rolling
Depth to Water Table 41+
Rock or other impervious formations none obs.

Lot Area ~1AC.

10'+ Road R/W

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



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 960 Linear Ft. 320
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: Geraldine Miller

IMPROVEMENTS PERMIT BY Mark A. Hinson, R.S.

COMMENTS: Keep front of house 50' from road R/W (minimum setback). X Install drainfield shallow (24") and follow contour of land. X

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

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Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold