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IREDELL COUNTY HEALTH DEPARTMENT 4676-36-0782

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

OWNER OR CONTRACTOR James Williams Jr. DATE June 17, 88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1150 (Lynwood Rd.) TR 1153 (Brumley) TR 1st entrance into Quail Hill 2nd lot on left

SUBDIVISION NAME Quail Hill LOT NO. 37 SECTION OR BLOCK NO. _____ S. R. No. _____

DW.

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

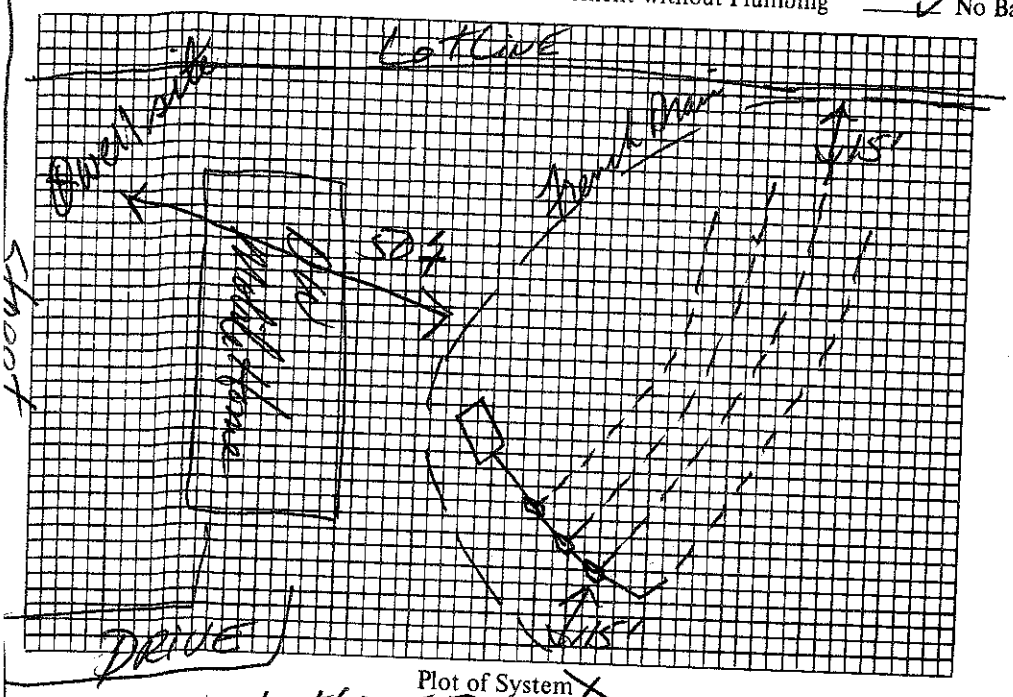
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 3/4 ac

Character & Porosity of Soil clay
Percolation Rate 2.3
Topography 2-6%
Depth to Water Table 3'+ w/ French Drain
Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

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 Charles Griffin Cabarrus Co.

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE June 17, 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

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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 James Williams Jr DATE MAR 14 '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1150 (Fernwood Rd) TR 1153 (Brumley) TR 1st entrance into Quail Hill 2nd lot on left S. R. No. _____

SUBDIVISION NAME Quail Hill LOT NO. 37 SECTION OR BLOCK NO. _____

DW

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Lot Area ~ 3/4 AC

Character & Porosity of Soil Clay

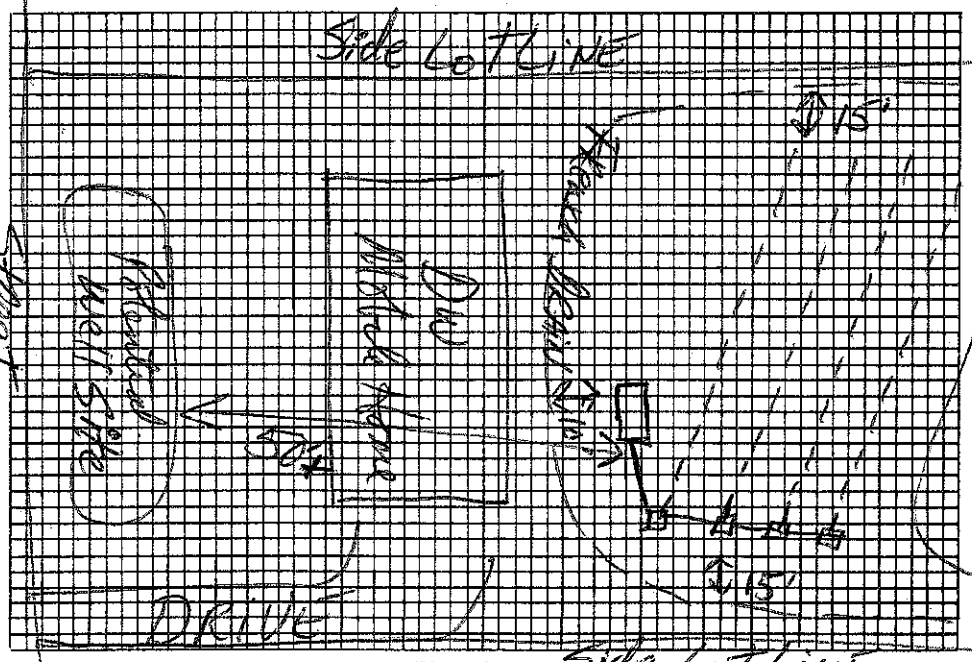
Percolation Rate ~1.3

Topography 2-4%

Depth to Water Table 3' + w/ French Drain

Rock or other impervious formations none obs

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: ~~453-4~~ 400'

No. of Lines ~~453-4~~ 400'

~~800~~ Sq. Ft. ~~1200~~ Linear Ft. ~~400~~ 267

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 James Williams Jr

IMPROVEMENTS PERMIT BY DR Henson, RS

COMMENTS: Drainfield must be installed shallow (24" MAX to bottom of ditch) and on contour. Keep "French Drain" close to property line. Maintain 15' side separation between drainfield and "French" Drain. Use drop boxes to distribute effluent.

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

~~Mobile home size reduced to 2 bedrooms~~