IREDELL COUNTY HEALTH DEPARTMENT 4676-47-1363

13616

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

OWNER OR CONTRACTOR Jeff Cockman DATE Oct. 24 91 PERMIT NO. 1-H-11

PHONE: Business _____ Home _____

LOCATION 150 Quail Hill TR 1153 (Brumley) 5th M.H. on left TR 2nd entrance into

SUBDIVISION NAME Quail Hill LOT NO. 12 SECTION OR BLOCK NO. 2 S. R. No. _____

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

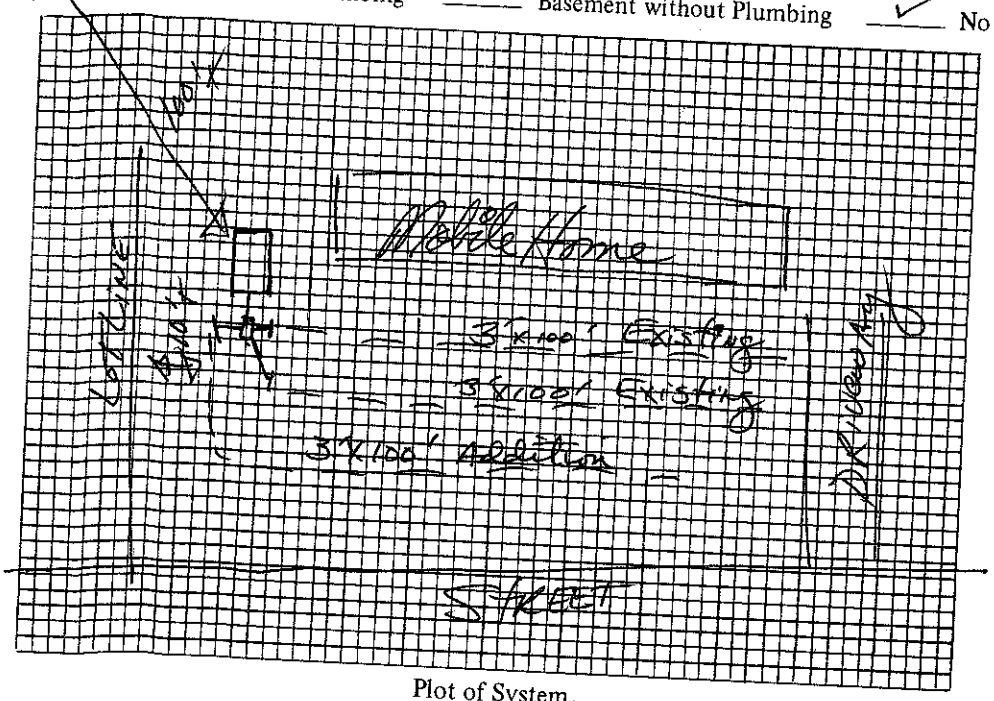
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil PS clay
Percolation Rate 2.41
Topography 2-6%
Depth to Water Table 44
Rock or other impervious formations none obs.

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement




Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 12"
Water Supply: Individual (✓) on Adjacent Lot
Public ( )

Installed by D. Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D R Hinson, RS

EXISTING SYSTEM CHECKED BY: _____ DATE 10-24-91

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

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

13616

# 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 Jeff Cockman

PHONE: Business _____ Home _____ DATE Oct. 23, '91 PERMIT NO. 1-H-11

LOCATION 1150 TL 1153 (Brumley) TR 2nd entrance into Quail Hill 5th M.F. on left.

SUBDIVISION NAME Quail Hill LOT NO. 12 S. R. No. _____ SECTION OR BLOCK NO. _____

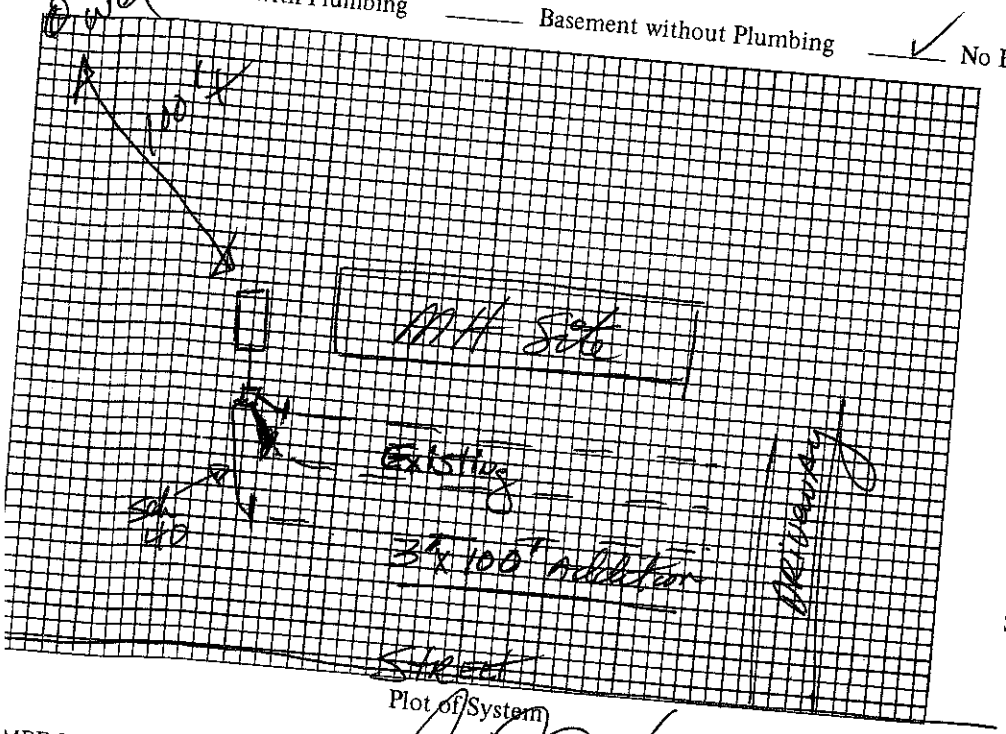
House ( ) Mobile Home (✓) Business ( ) Other Upgrading septic system from 2 bedroom to 3 bedroom

No. Bedrooms 3 No. Bathrooms 2

| | | | |
|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No (✓) | Character & Porosity of Soil |
| Auto. Dishwasher | Yes (✓) | No ( ) | Percolation Rate |
| Auto. Wash. Machine | Yes (✓) | No ( ) | Topography |
| Site Suitable | Yes (✓) | No ( ) | Depth to Water Table |
| | | | Rock or other impervious formations |

Lot Area Existing

Basement with Plumbing ____ Basement without Plumbing ____ ✓ No Basement




Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 1
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 12"

Water Supply: Individual (✓) on adjacent lot.
Public ( )

Installed by _____

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

Signed: Jeff Cockman

MPROVEMENTS PERMIT BY David R. Hinson, R.S.

OMMENTS: Follow contour w/ new line.

RTIFICATE OF COMPLETION BY _____ DATE _____

ISTING SYSTEM CHECKED BY: _____ DATE _____

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

nit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making rovements Permit.

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