IREDELL COUNTY HEALTH DEPARTMENT 4678701564

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

OWNER OR CONTRACTOR Donald Brown DATE 7-16-85 PERMIT NO. 316

PHONE: Business _____ Home _____

LOCATION 150 W TL Dirt Road (About ¼ mile before ROWAN Line Mooresville Country Estates 2nd Lot on R S. R. No. _____

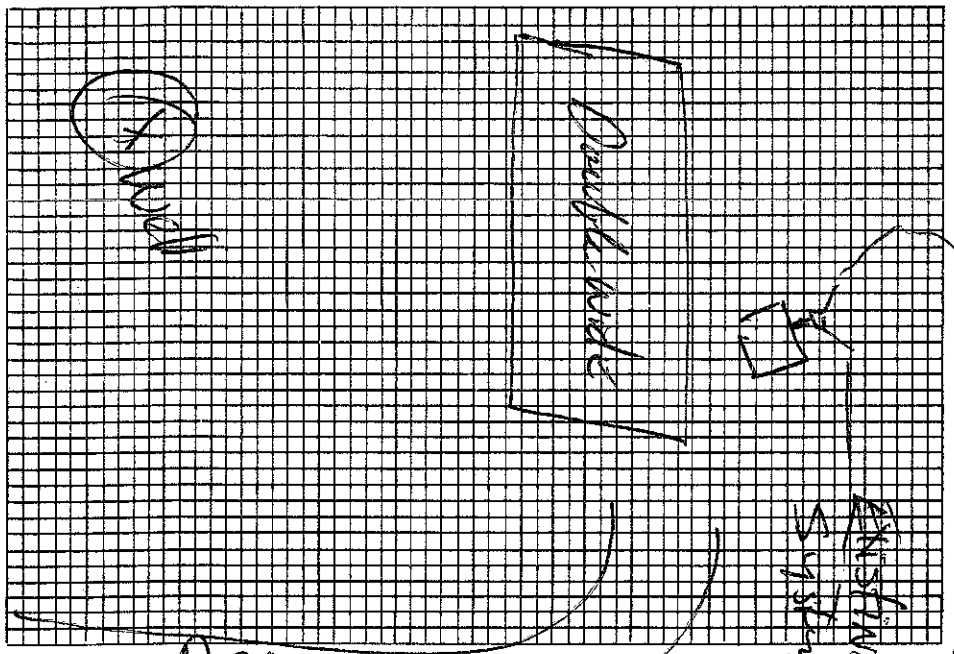
SUBDIVISION NAME ~~Foreman~~ Estates LOT NO. 12 SECTION OR BLOCK NO. _____

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 Acreage

Character & Porosity of Soil Clay
Percolation Rate 0.5 gal/ft/day
Topography 2-4%
Depth to Water Table _____
Rock or other impervious formations NONE obs.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank EXISTING Gals.
Nitrification Field:
No. of Lines EXISTING
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
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 Fred Clemmer

COMMENTS: Existing System working ok At date of inspection

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 7-16-85

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

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

OWNER OR CONTRACTOR Don Brown DATE 4-22-83 PERMIT NO. 104

PHONE: Business _____ Home _____

LOCATION 150E to Rowan County Line TL dirt street 2nd Lot ONR S. R. No. _____

SUBDIVISION NAME Powers Estates LOT NO. 12 SECTION OR BLOCK NO. 3

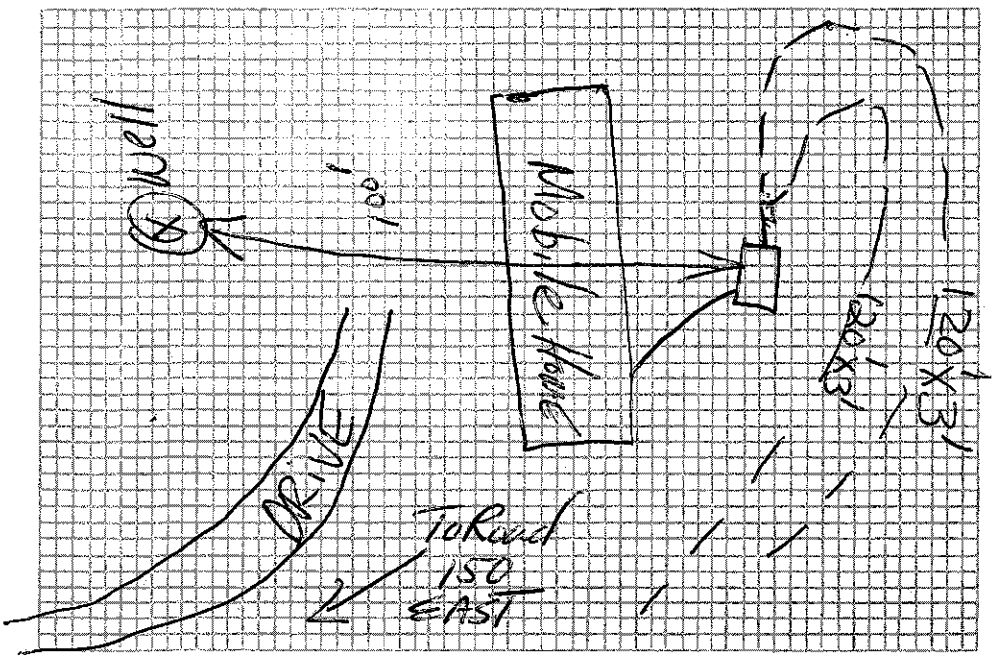
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

| | | | | |
|---|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No (X) | Character & Porosity of Soil | Clay loam |
| Auto. Dishwasher | Yes (X) | No ( ) | Percolation Rate | 0.6 gal/ft²/day |
| Auto. Wash. Machine | Yes (X) | No ( ) | Topography | 2-6% |
| Site Suitable | Yes (X) | No ( ) | Depth to Water Table | 4-4 |
| | | | Rock or other impervious formations | None observed |

Lot Area 5.5 Acres

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement




Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by J. R. Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 4-22-83

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

9.00

# 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 Don Brown DATE 5-19-80 PERMIT NO. 149

PHONE: Business _____ Home _____

LOCATION 150 East almost to Rowan Line TL dirt street lot ON R 2nd lot from 150 East S. R. No. _____

SUBDIVISION NAME Powers Estates LOT NO. 12 SECTION OR BLOCK NO. 3

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 | ( ) | |

Character & Porosity of Soil Clay loam

Percolation Rate 80 mpi

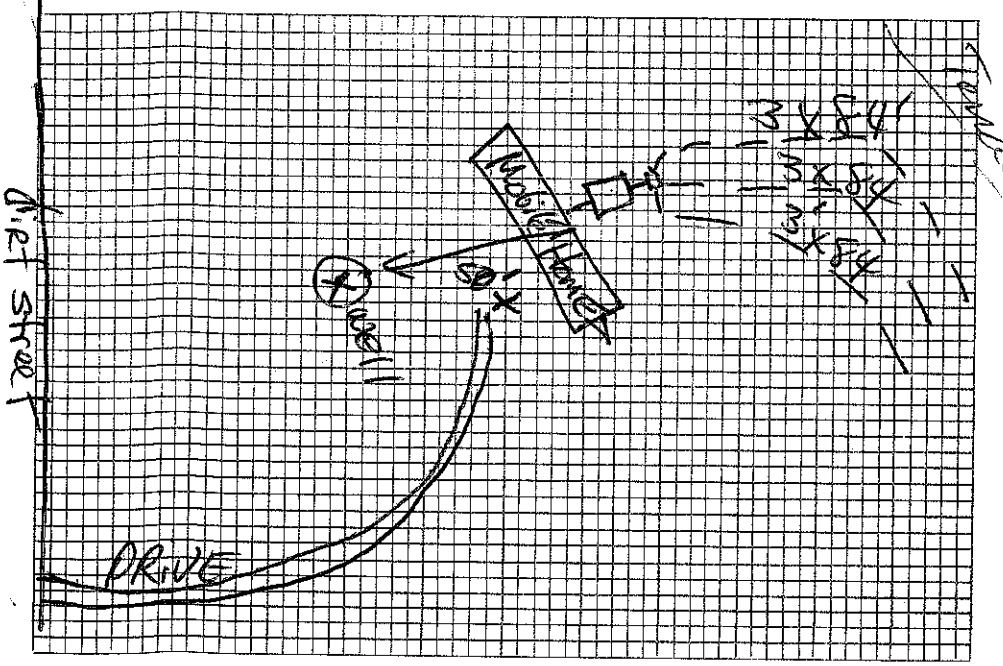
Topography 2-6%

Depth to Water Table Unknown

Rock or other impervious formations None observed

Lot Area 5.5 Acres

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement




Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 250 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (X)

Public ( )

Installed by _____

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

Signed: Donald W Brown

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: _____

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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