4679528926

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 Debra Hager DATE 8-6-84 PERMIT NO. 254

PHONE: Business _____ Home _____

LOCATION 801 North TR 2401 ¼ mile on Left 1500 FT off road S. R. No. _____

SUBDIVISION NAME Bill Edmunston prop LOT NO. _____ SECTION OR BLOCK NO. _____

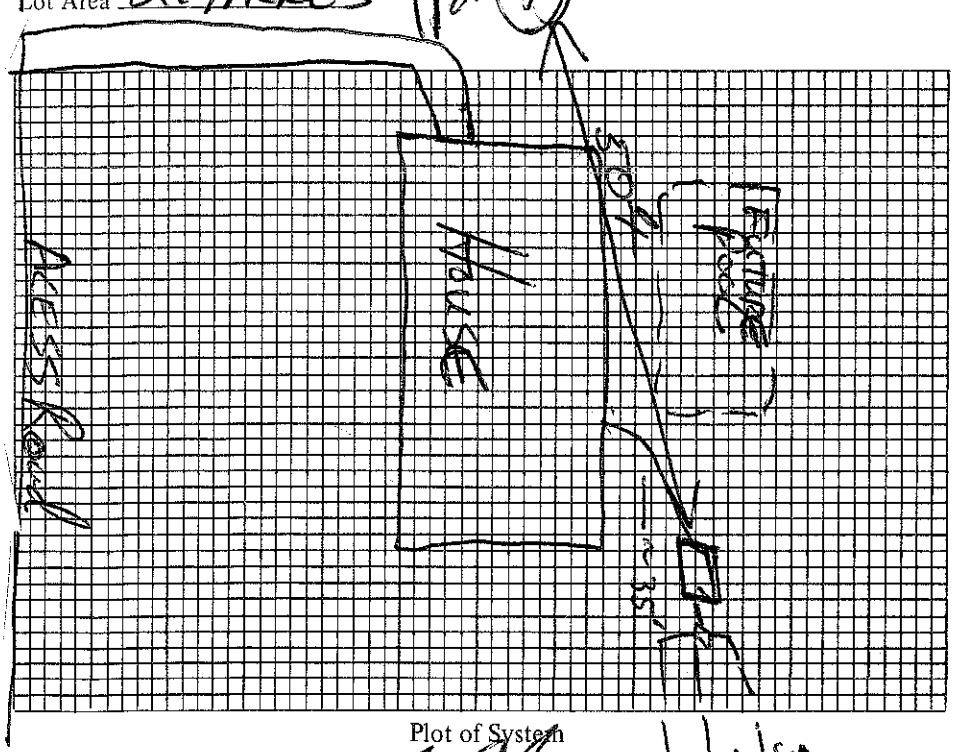
House (X) Mobile Home ( ) Business ( ) Other _____

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 2.7 ACRES

Character & Porosity of Soil Clay loam
Percolation Rate 0.5 GAL/FT²/DAY
Topography 6-10%
Depth to Water Table 4'
Rock or other impervious formations None obs.



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by Larry Boone

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

Signed: _____

IMPROVEMENTS PERMIT BY J. Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 8-6-8

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

10:00

4C Lot A Lot 40

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 Debra ~~[illegible]~~ Hager DATE 6-1-83 PERMIT NO. 136

PHONE: Business ______ Home ______

LOCATION 801 N TR 2401 (Sloop Road) 1/4 mile on left 1500 ft off Road S. R. No. ______

SUBDIVISION NAME William Edminston Property LOT NO. ______ SECTION OR BLOCK NO. ______

House (X) Mobile Home ( ) 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 2.7 ACRES

Character & Porosity of Soil clay loamy 2/day

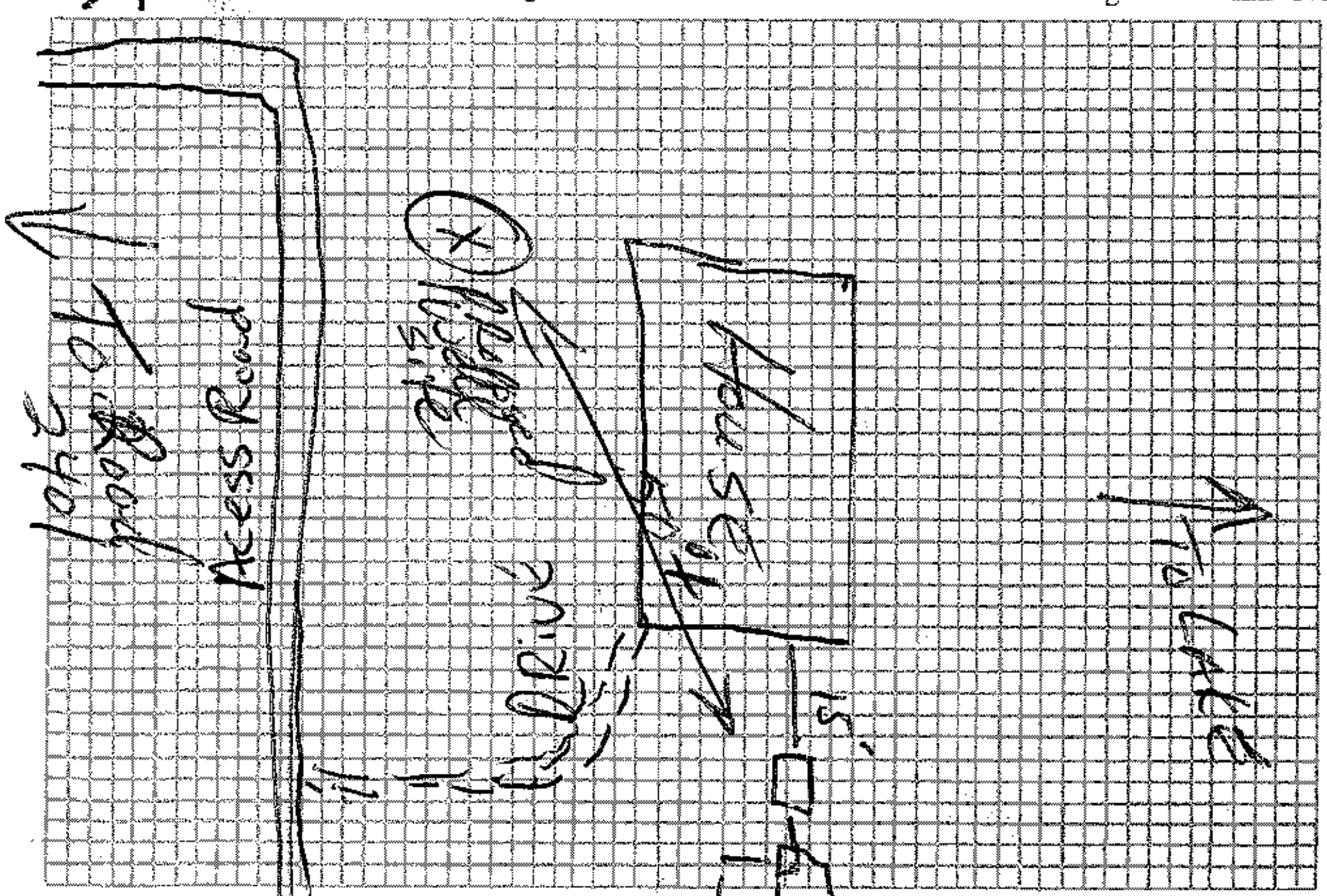
Percolation Rate [illegible]

Topography [illegible]

Depth to Water Table 4'+

Rock or other impervious formations None observed

X Basement with Plumbing ______ Basement without Plumbing ______ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (X)

Public ( )

Installed by ______

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

Signed: * Debra M. Hager

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep system as shallow as possible; don't drive [illegible] system

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