4744141005

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 Barbara Hartness DATE Feb 26, 87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115-21 N pass Ken Branch Gro. TR before get w/ I 77 at Mt Carmel X Branch Go Straight pass Old TR at end S.R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

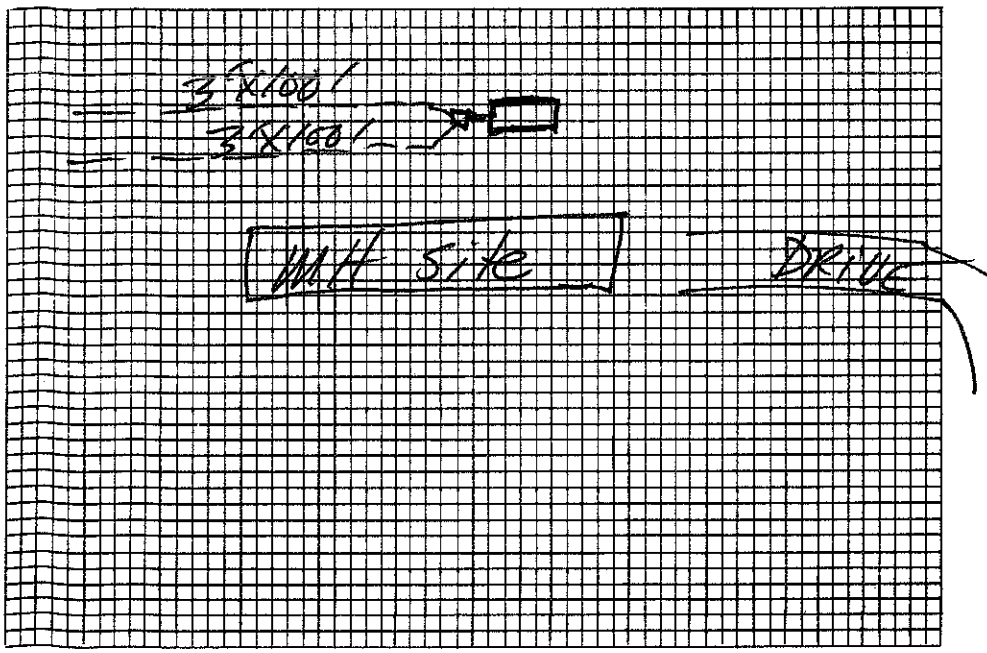
No. Bedrooms 2 No. Bathrooms 2

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

Character & Porosity of Soil Clay
Percolation Rate ~4
Topography 10-15%
Depth to Water Table 44
Rock or other impervious formations none obs.

Lot Area 20000 sq ft

_____ Basement with Plumbing _____ Basement without Plumbing ____✓__ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )
well at neighbor's home

Installed by Wayne Potts

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D K Hunsucker, R.S. DATE Feb 26, 87

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

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 Barbara Hartness DATE 5-2-85 PERMIT NO. 168

PHONE: Business _____ Home _____

LOCATION 115-2 North pass Bear Branch Grocery TR Mt. Carmel Church X Branch Go 5 ft. Apart. 600 ft pass Double wide TL dirt street at end in woods S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

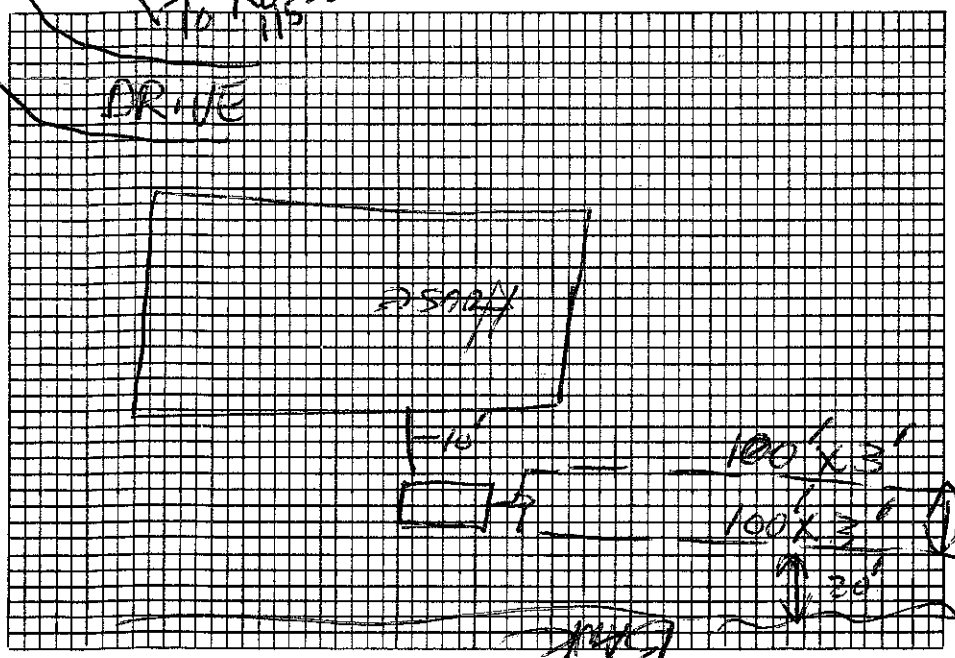
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 2 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 20,000 Ft ±

Character & Porosity of Soil Clay
Percolation Rate 2-15, 6
Topography Gently Rolling
Depth to Water Table 4' +
Rock or other impervious formations None Obs.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plan of System

Size of Tank 1000 Gals.
Nitrification Field: 2
No. of Lines _____
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )
Well At Edgar Hobbs House

Installed by _____

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

Signed Edgar Hobbs

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep lines shallow, About 1.5' cover; Stay At least 20' from where tank drops off

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

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