4760264008

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 Daryl Brawley DATE 12/2/87 PERMIT NO. _____

PHONE: Business _____ Home 528-6236

LOCATION 115 N TR Shinnville Rd. (#2383) TL Weathers Creek (2379) ~1.2 miles on R. Beyond Church S. R. No. _____

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

House ( ) Mobile Home (✓) Business ( ) Other Repair addition

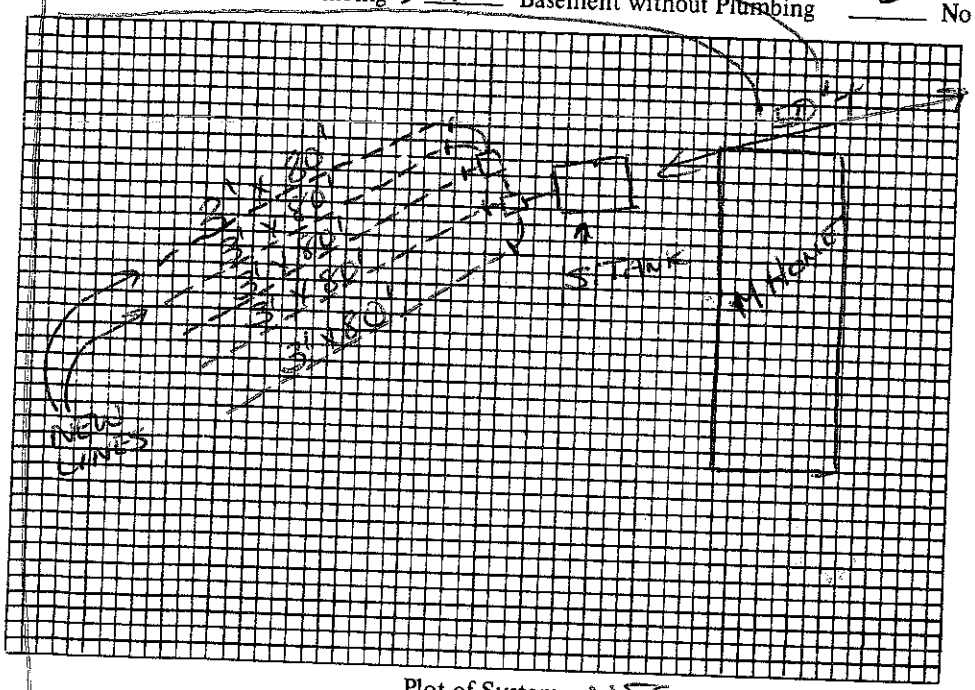
No. Bedrooms 4 No. Bathrooms 2

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

Character & Porosity of Soil Clayey
Percolation Rate ~.4 gpd/ft²
Topography 2-4%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area _____

_____ Basement with Plumbing DRIVE Basement without Plumbing _____ No Basement ✓



Plot of System NTS

Well

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 5
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by W. Orbison

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

Signed: _____

IMPROVEMENTS PERMIT BY Andre C. Pierce

COMMENTS: This system is now sized and approved for a 4 Bedroom structure. System functioning properly at this time.

CERTIFICATE OF COMPLETION BY Andre C. Pierce DATE 12/2/87

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 DARYL BRAWLEY DATE 11/25/87 PERMIT NO. _____

PHONE: Business _____ Home 528-6236

LOCATION 115 N TR Shinnville (# 2383) TL Heather's Creek (2379) ~ 1.2 miles on R. Beyond S. R. No. _____

SUBDIVISION NAME Wesley's Chapel Church LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other Repair addition

Adding new Mobile Home

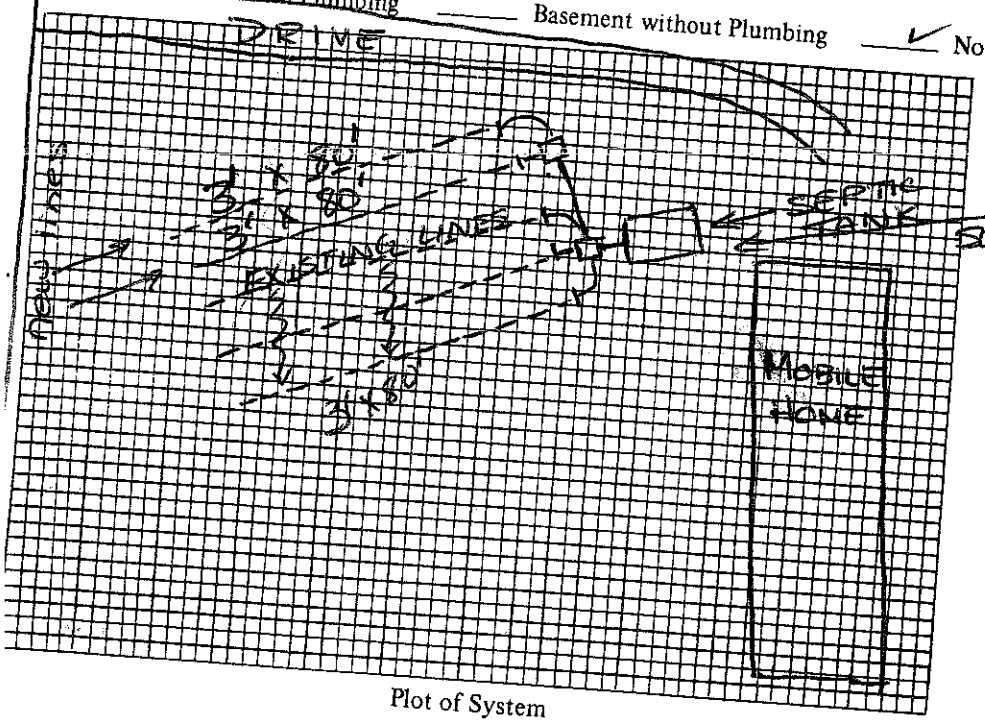
No. Bedrooms 4 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate N. 4 gpd/ft²
Auto. Wash. Machine	Yes (✓)	No ( )	Topography 2 - 4%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table 4'+

Lot Area ~6 ACRES

Rock or other impervious formations none observed

_____ 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 ( )

Public ( )

Installed by _____

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

Signed: Martha Brawley

* information from completion permit of [redacted] 7-6-84 FRED CLEMMER

MPROVEMENTS PERMIT BY Andrew C. Pierce

OMMENTS: Add 2 new 80' lines - to get system up to standard for a 4 bedroom home. Use existing distribution box to distribute effluent to lines if possible.

ERTIFICATE OF COMPLETION BY _____

ISTING SYSTEM CHECKED BY: _____ DATE _____

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

mit 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