4760 97 9966

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 Jerry R Overcash DATE 4/26/88 PERMIT NO.

PHONE: Business Home 663-3761

LOCATION 21-115N TR Shinnville Pass Store / Creek
~2mi on left past Store. S. R. No.

SUBDIVISION NAME Jerry Overcash Prop. LOT NO. 1 SECTION OR BLOCK NO.

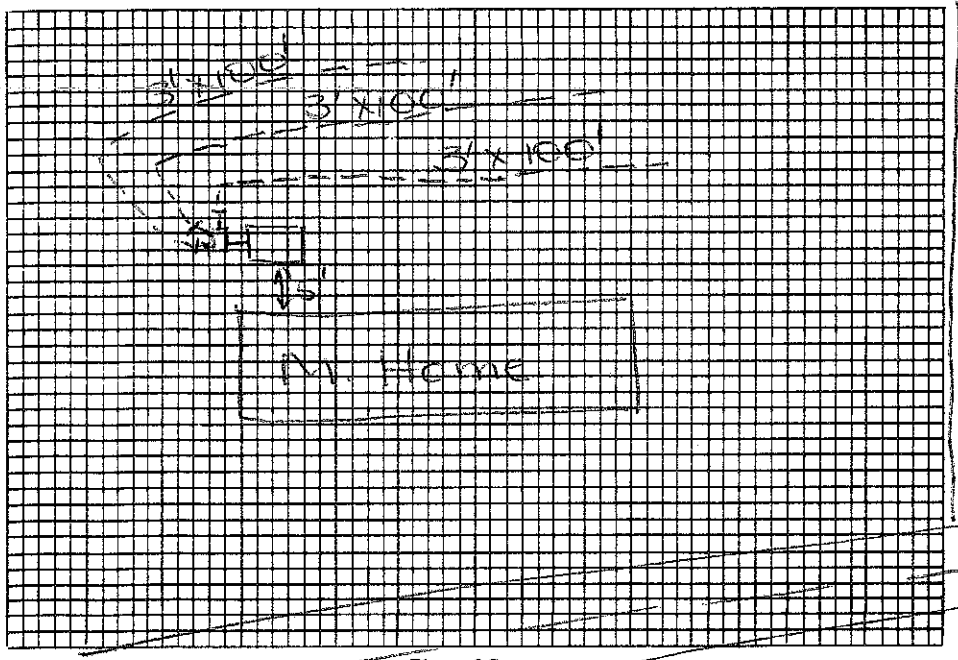
House ( ) Mobile Home (X) Business ( ) Other

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	~4
Auto. Wash. Machine	Yes (X)	No ( )	Topography	4%
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4'+
			Rock or other impervious formations	none

Lot Area 24493

___ Basement with Plumbing ___ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines

Water Supply: Individual (X) on
Public ( ) another lot. ~400'

Installed by Cedarwood Septic Sys.

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

Signed:

IMPROVEMENTS PERMIT BY ACP

COMMENTS:

CERTIFICATE OF COMPLETION BY Charles C. Price DATE 4/26/88

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

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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 Jerry R. Overcash DATE 3/14/88 PERMIT NO. _____

PHONE: Business _____ Home 663-3761

LOCATION 21-115 N TR Shinnville Rd. Pass Store X Creek (~ 2mi past STORE) S. R. No. _____

SUBDIVISION NAME Jerry Overcash property LOT NO. 1 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable (P.S) Yes ( ) No ( )

Lot Area 24,493

Character & Porosity of Soil clayey (shallow)

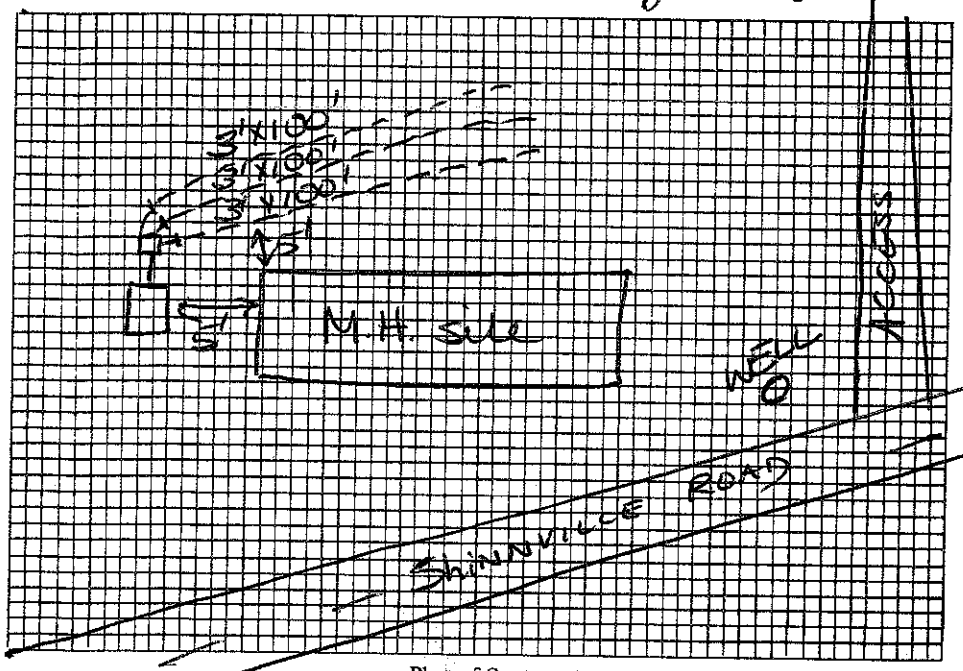
Percolation Rate ~4 gpd/ft²

Topography 290 - 490

Depth to Water Table 4'+

Rock or other impervious formations none observed.

~~Basement with Plumbing~~ Drainageway ~~Basement without Plumbing~~ No Basement



Plot of System NOT TO SCALE.

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

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: Jerry Overcash

IMPROVEMENTS PERMIT BY Andrew C. Pierce

COMMENTS: Set tank 5' off home. Run lines shallow and on contour.

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