

PENDER COUNTY HEALTH DEPARTMENT
P.O. Box 1209, Burgaw, NC 28425
Telephone 919/259-1233

SEPTIC TANK IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
Article 11 N.C. General Statutes Chapter 130A
and
Pender County Rules and Regulations

Owner/Agent ROBERT JOHN WISZALEK JR. Date 11/30/93 Permit # 502346
Address 2645 SCOTTS HILL LOOP RD., WILMINGTON NC. 28405
Location of Site NORTHERN END OF SCOTTS HILL LOOP RD., LOT ON RIGHT AT END OF RD. X FROM MARINA
Subdivision CROWLEY Lot # 7 Section/Block _____
House [] Mobile Home [] (#Bedrm) 3 Business [] (#Employees/Members/Seats) _____
SEPTIC TANK SIZE 900 EXISTING Gal. NITRIFICATION FIELD ADD 120 Sq. Ft.
NUMBER OF LINES 1 LENGTH 40 Ft. DEPTH _____ In. BED SYSTEM SIZE _____

LOCATION OF SYSTEM: See layout sketch or attached plot plan. **NO CHANGE IN SEPTIC TANK SYSTEM OR ITS LOCATION WITHOUT PRIOR APPROVAL FROM PENDER COUNTY HEALTH DEPT.**

THIS PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OF INTENDED USE CHANGES. G.S. 130A-335(f)

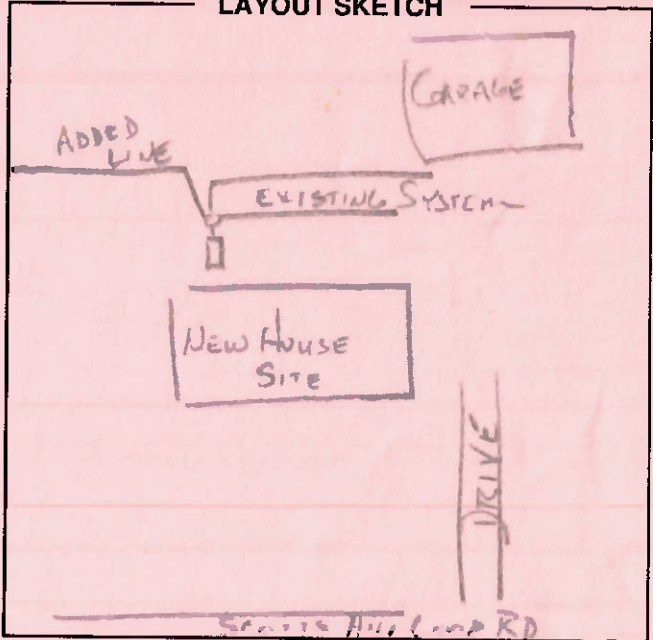
NOTE

MINIMUM HORIZONTAL SEPARATION OF SEPTIC SYSTEM TO NEAREST:
Well: 100 ft., Property Line: 10 ft., Foundation: 5 ft., Ditch or
Subsurface Tile: 25 ft. (10 ft if upslope).

SPECIAL INSTRUCTIONS OR REQUIREMENTS:

ADD 1 (40') LINE TO BE COMPATIBLE WITH EXISTING SYSTEM
ORIGINAL PERMIT # 087923 FOR 2 BDRM HOME
EXISTING TANK = 900 GAL

LAYOUT SKETCH



This permit does not constitute a warranty or guarantee and satisfactory performance is not assured by the Pender County Health Department.

IMPROVEMENTS PERMIT BY: Sanja D. Purington R.S.
CERTIFICATE OF COMPLETION BY: James C. Overstreet
Installed by: R. Swigg

PERMIT VALID 5 YEARS
DATE 12-02-93

PENDER COUNTY HEALTH DEPARTMENT
P. O. BOX 1209, BURGAW, N. C. 28425
(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System - G.S. Chapter 130 - Article 13C)

OWNER OR CONTRACTOR Robert & Lorie Wenzelak DATE 1-17-86 PERMIT NO. 487923
 LOCATION Scotts Hill Lane Road, across from Scotts Hill Marina

SUBDIVISION NAME Crowley LOT NO. 7 SECTION OR BLOCK NO. _____
 S. R. NO. _____



HOUSE <input type="checkbox"/>	MOBILE HOME <input checked="" type="checkbox"/>	BUSINESS <input type="checkbox"/>	LOT AREA <u>100' X 200'</u>
NUMBER OF BEDROOMS <u>2</u>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	REMARKS: <u>Back for old tank</u> <u>213' from front of property</u> <u>153' from road</u>
GARBAGE DISPOSAL UNIT	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
AUTO. DISHWASHER	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
AUTO. WASH. MACHINE	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
SITE SUITABLE	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
SIZE OF TANK <u>750</u>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
NITRIFICATION FIELD <u>240</u>	SQ. FT.		
NUMBER OF LINES <u>2 (40')</u>			
IMPROVEMENTS PERMIT BY <u>[Signature]</u>			
CERTIFICATE OF COMPLETION BY <u>[Signature]</u>			
Construction must comply with all other applicable State and local regulations.			
This permit does not constitute a warranty or guarantee and is void after <u>36 months</u> .			
INSTALLED BY <u>[Signature]</u>		DATE <u>3-13-80</u>	

Signature of Applicant [Signature] Date 1-17-86

