

BRUNSWICK COUNTY HEALTH DEPARTMENT

DATE REC.: 7-2-99

P.I.N.:

TYPE: ILC
FILE NO.: 99 / 53057

BY: JIMMY W

REC. FROM: RE 00 23210013

TAX PARCEL: 99 025755

13569 HWY 902 SEAR CREEK NC 27207 (919) 837-592
ADDRESS CITY ST ZIP PHONE

KIDD JIMMY W ET ALICIA / SEA AIRE EST / 15 / 0 / 1
CURRENT PROPERTY OWNER SUBDIVISION LOT BLK SEC

PROPERTY LOCATED: TOWN/CITY/AREA: SUPPLY DIRECTIONS TO PROPERTY: 2799 SEA AIRE DR SW
100 TO SEASIDE RD & SEA AIRE DR

AUTHORIZATION FOR WASTEWATER CONSTRUCTION PERMIT

PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OR THE INTENDED USE CHANGE.

NEW 1 REVISION _____ REPAIR _____ RELOCATION _____

NOTE: All the conditions specified on the IMPROVEMENT PERMIT must be met.

Design Flow: 360 gpd. Septic tank size: 900 gal.

No. Bedrooms 1 No. occupants/employees 6 Max. Trench/Bed Bottom Depth: 15 inches

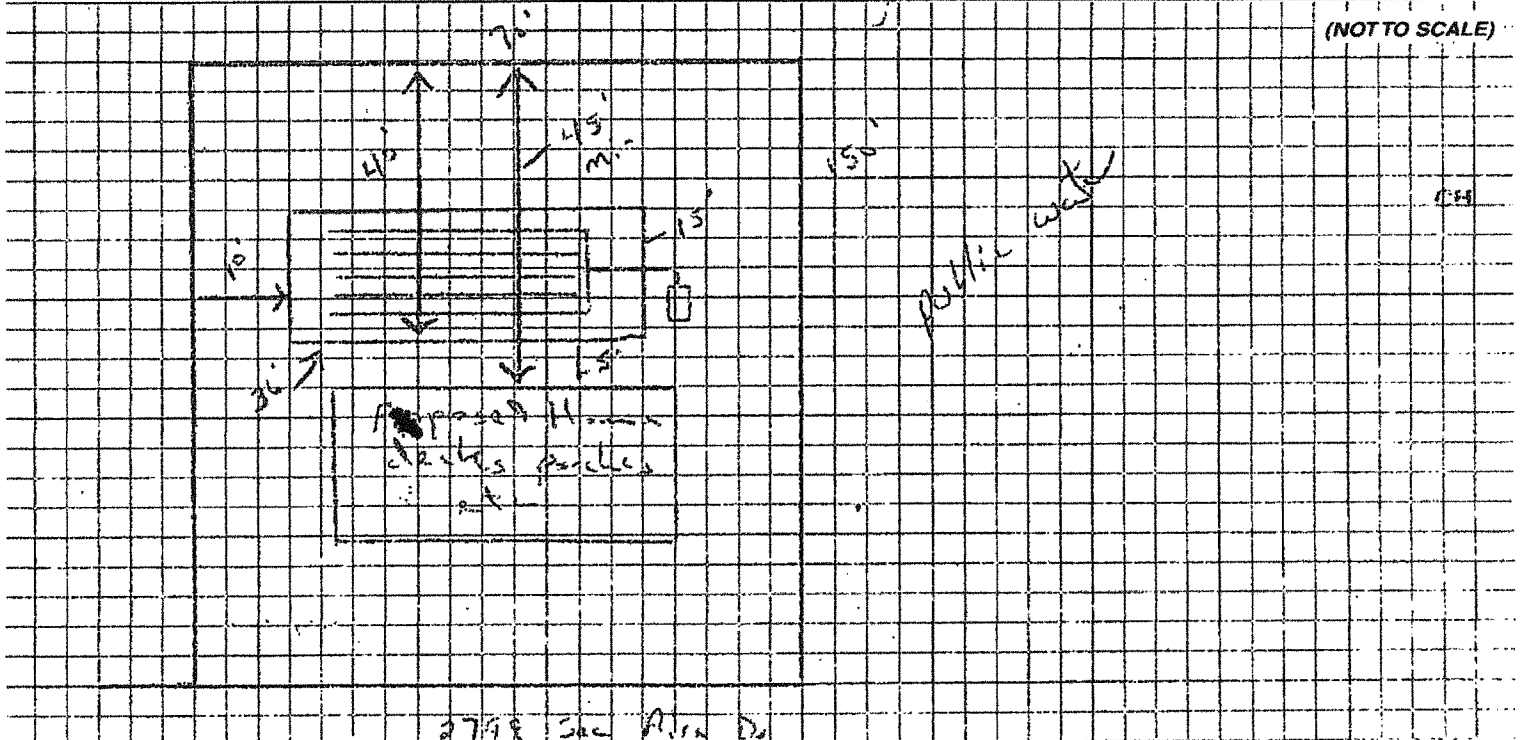
No. Lines: 150 Length each: 26' Bed dimensions: 15 x 26

Fill Check: 1-29-01 Approved: Clay Haldeman
Date Authorized Agent

NOTES:
1. Septic Tank shall have an approved effluent filter and access devices as applicable.
2. All components of the septic systems shall be located 100 feet if possible but not less than 50 feet to all existing and future wells on this parcel and adjacent parcels.

PERMIT ISSUE DATE: 7-26-99 (Expires 60 Months from date of issue.)

PERMIT NOT VALID UNLESS SIGNED BY AUTHORIZED AGENT: Clay Haldeman



Wastewater System Installer: John Lewis Date: _____

Comments: (tank info/barrier approved) 12-11-00 9st 900 STA 28

OPERATION PERMIT: Clay Haldeman Date: 2-5-01
Authorized Agent Signature

Actions of local health department representatives or the State engaged in the evaluation and determination of measures required to effect compliance with the applicable laws and rules shall in no way be taken as a warranty that sewage treatment and disposal systems approved and permitted will function in a satisfactory manner for any given period of time. The issuance of this permit does not preclude the Permittee from complying with any and all statutes, rules, regulations, or ordinances which may be imposed by other government agencies (local, state, and federal) which have jurisdiction.

BRUNSWICK COUNTY HEALTH DEPARTMENT

TYPE: IIc
FILE NO: 99 / 53057

DATE REC: 7-2-99

P.I.N.:

KIDD JIMMY W

85 00 232JD013

TAX PARCEL 99 025755

REC FROM

13569 HWY 902

BEAR CREEK

NC

27207

919837-59

ADDRESS

CITY

ST

ZIP

PHONE

KIDD JIMMY W ET ALICIA

SEA AIRE EST

15

C / 1

CURRENT PROPERTY OWNER

SUBDIVISION

LOT

BLK

SEC

SUPPLY

2799 SEA AIRE DR SW

PROPERTY LOCATED TOWN/CITY/AREA

DIRECTIONS TO PROPERTY

139 TO SEASHORE RD TO SEA AIRE DR

AUTHORIZATION FOR WASTEWATER CONSTRUCTION PERMIT

PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OR THE INTENDED USE CHANGE.

NEW REVISION REPAIR RELOCATION

NOTE: All the conditions specified on the IMPROVEMENT PERMIT must be met.

Design Flow: 360 gpd. Septic tank size: 500 gal.

No. Bedrooms 2 No. occupants/employees 6 Max. Trench/Bed Bottom Depth: 18 inches

No. Lines: 1 Length each: 36 Bed dimensions: 15 x 36

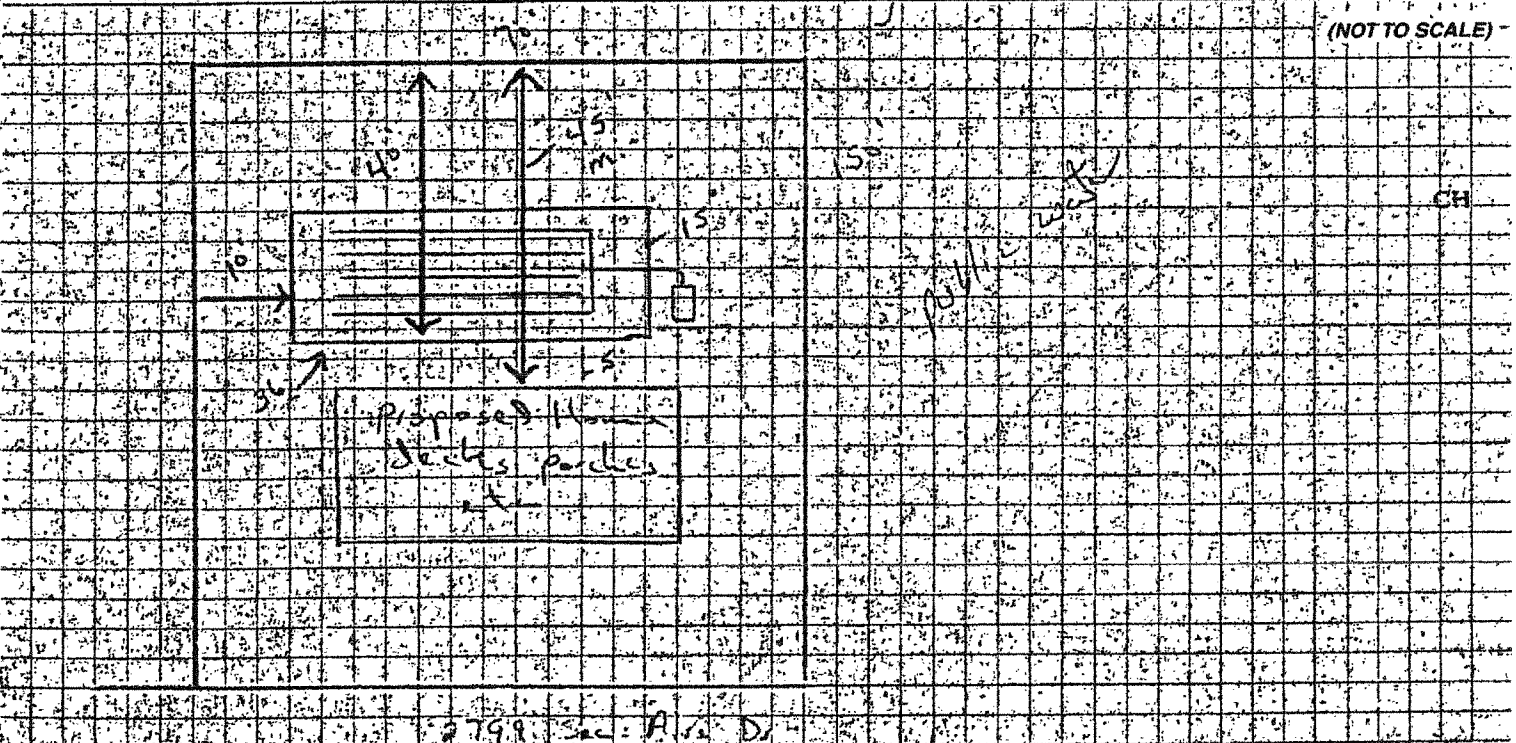
Fill Check: 7-29-99
Date

Approved: Clay Childers
Authorized Agent

PERMIT ISSUE DATE: 7-26-99 (Expires 60 Months from date of issue.)

PERMIT NOT VALID UNLESS SIGNED BY AUTHORIZED AGENT: Clay Childers

- NOTES:
1. Septic Tank shall have an approved effluent filter and access devices as applicable.
 2. All components of the septic systems shall be located 100 feet if possible but not less than 50 feet to all existing and future wells on this parcel and adjacent parcels.



Wastewater System Installer: John Lewis Date:

Comments: (tank info/barrier approved) 12-11-00 0st 900 STA 28

OPERATION PERMIT: Clay Childers Date: 2-5-01

Authorized Agent Signature
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