12124.

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 KELLINGER DATE 11-6-90 PERMIT NO 8P-A-54

PHONE: Business _____ Home _____

LOCATION Turn L. off 901 south of Troutman 1.2 mi. to L. on driveway across from Sharon Rogers house - white house back in field. 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 ( )

Lot Area 83 acres.

Character & Porosity of Soil Poor Suitable.

Percolation Rate 3-8 Min/Inch

Topography Sloping

Depth to Water Table 10'+

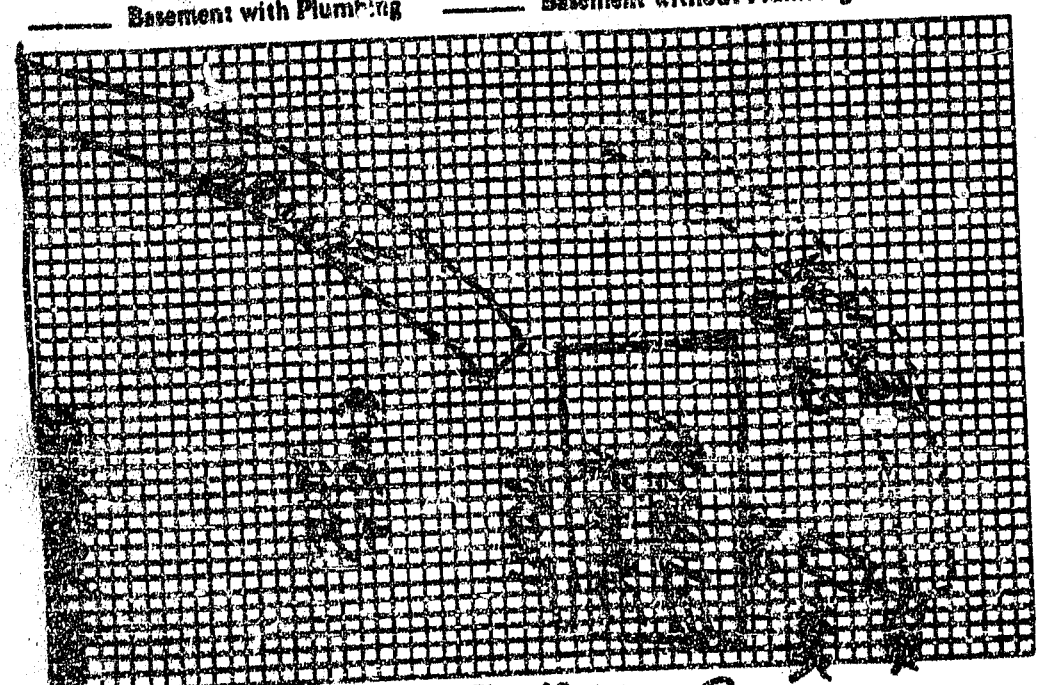
Rock or other impervious formations Not observed.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 120 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )



Installed by Claffin Farms

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 11-6-90.

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