02153

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 Nathan White DATE 1/24/85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I40 W, Lf on Sharon School, 1/2 Mile on Lf, 1st Lot on Lf in Development

SUBDIVISION NAME Sharon Ridge LOT NO. 1 SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area Lack

Character & Porosity of Soil Fair Suitable

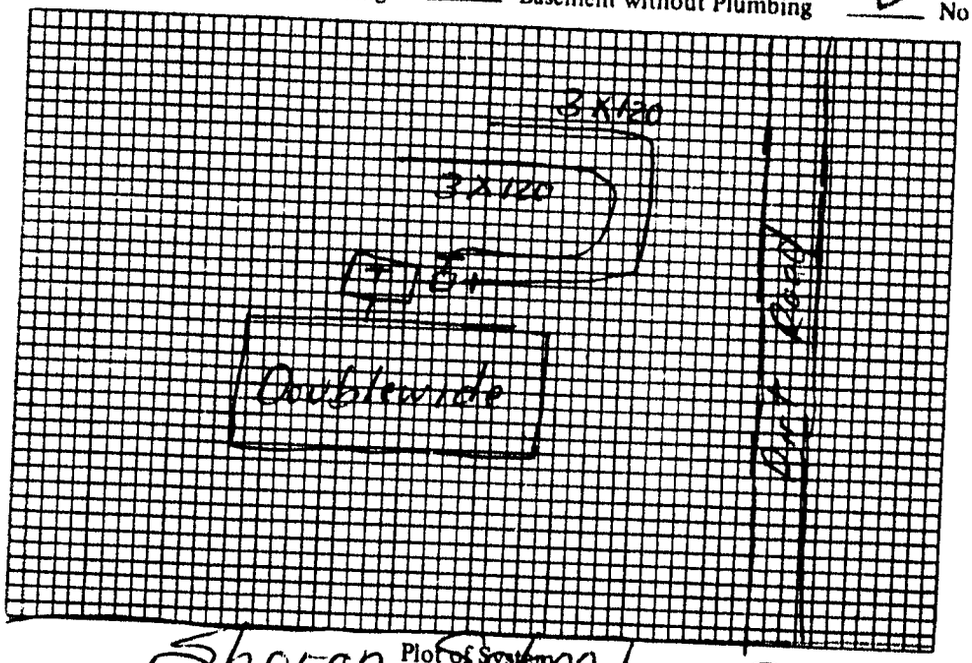
Percolation Rate .5 gal /ft²/day

Topography 2-6%

Depth to Water Table 10' +

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 2

Sq. Ft. 220 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Sammy Reavis

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

Signed: _____

Sharon School

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Tank, Lines, D Box Checked by CS 1/24/85
No Seal Rope in tank at time of 1st Inspection.
Tank Sealed, System OK 1/25/85

CERTIFICATE OF COMPLETION BY _____ DATE 1/25/85

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