08560

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 ERIC PHILLIPS DATE 9-20-88 PERMIT NO. 138

PHONE: Business _____ Home _____

LOCATION I-40 west - T.L. on Sharon School Rd. - go approx. ½ mi. - T.L. into dev. - 3rd lot on left. S. R. No. _____

SUBDIVISION NAME SHARON RIDGE DEV. LOT NO. 3 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1-2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Sandy Loam Suitable.

Percolation Rate 5 min/in. ft.

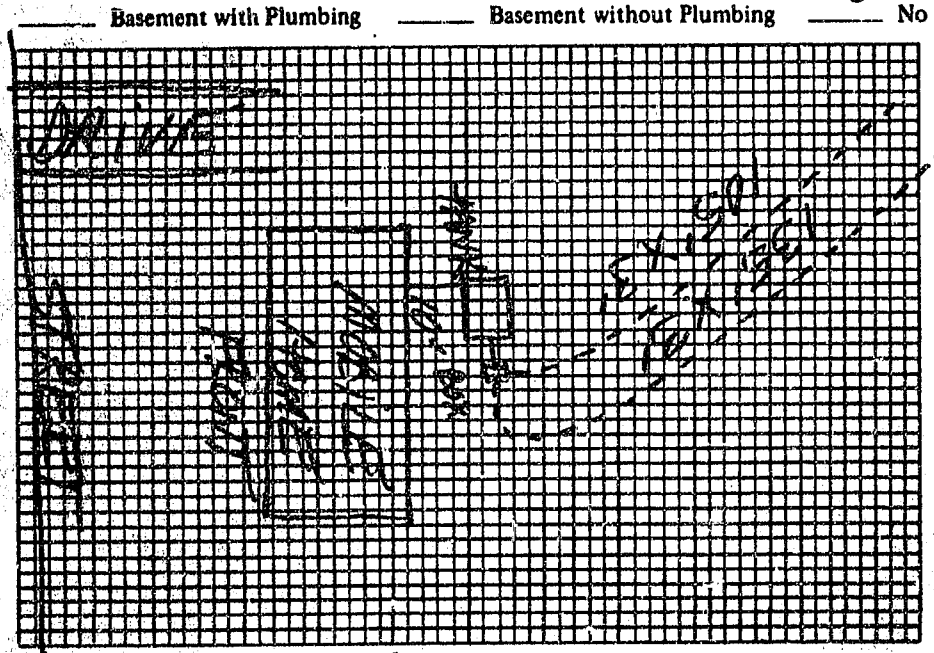
Topography Level to Rolling

Depth to Water Table 10 ft +

Rock or other impervious formations none observed.

Lot Area One acre.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 2

No. of Lines _____

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by Dennis Hallifax

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

EXISTING SYSTEM CHECKED BY: _____

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 provided on Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Contractor's Copy: Pink