IREDELL COUNTY HEALTH DEPARTMENT

03867

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR William Lackey DATE 01-10-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40 W, TL on Sharon School Rd, go 3/4 mile development on left, mobile home on left just before creek S. R. No. _____

SUBDIVISION NAME Sharon Ridge LOT NO. 6 SECTION OR BLOCK NO. _____

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

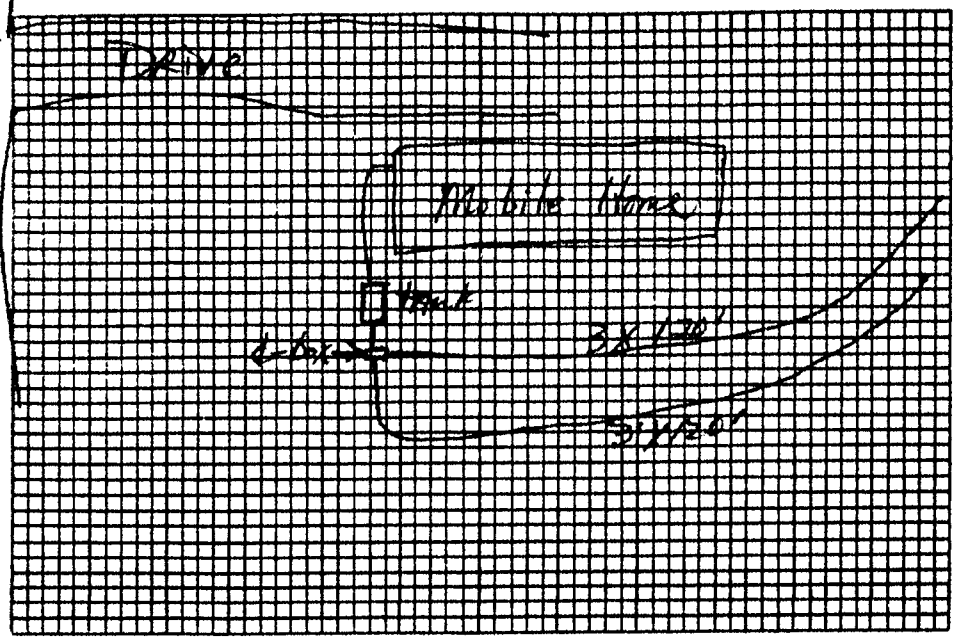
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Prov. Suitable (class IV)
Percolation Rate 0.5 gal/ft²/day
Topography 2-6% slope
Depth to Water Table 10'
Rock or other impervious formations None

Lot Area 1.08 Acres

_____ Basement with Plumbing _____ Basement without Plumbing ___✓___ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Guy Sykes

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Lines deep near tank (4ft+)

CERTIFICATE OF COMPLETION BY Jerry L Pierce DATE 01-10-86

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