09081

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 CAROL B. SETZER DATE 6-16-89 PERMIT NO. B 13.

PHONE: Business _____ Home _____

LOCATION Take I-40 to exit no. 91 - go north on Hwy 115 approx. two miles to D.E. Dept. - Lt. and go approx. 1/2 mile to Lakeland Heights entrance. S. R. No. _____

SUBDIVISION NAME LAKELAND HEIGHTS LOT NO. 9 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2 Character & Porosity of Soil Sandy Loam.

Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate 1" in 10 min.

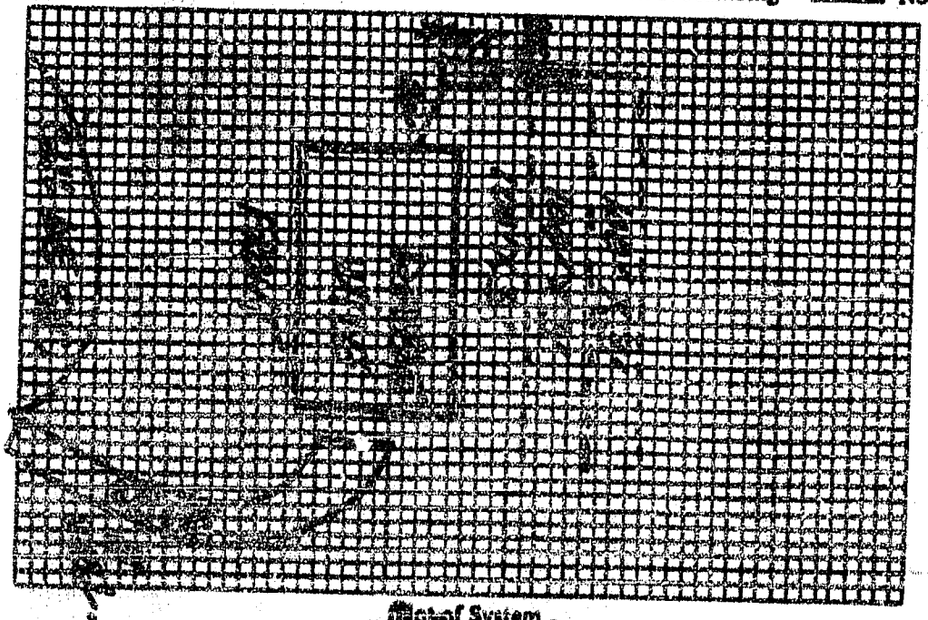
Auto. Dishwasher Yes ( ) No (✓) Topography Level

Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 15+

Site Suitable Yes (✓) No ( ) Rock or other impervious formations None encountered.

Lot Area 150' x 150'

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 300 Linear Ft. 300
Depth of Stone in Lines 24"

Water Supply: Individual (✓)
Public ( )

Plot of System

IMPROVEMENTS PERMIT BY Steve Bowman

Installed by Chet Hilliard

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

Signed: _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Bowman DATE 6-16-89

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