09151

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: JOSEPH GURRI DATE: 3-14-89 PERMIT NO. 9D.

PHONE: Business _____ Home _____

LOCATION: Hwy 21 N. past Bethany X Rds - T.R. on Miracle Town Rd. - 8 mi. on L - big house back left rd. S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes (X) No ( )

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area Acreage

Character & Porosity of Soil Loam Suitable

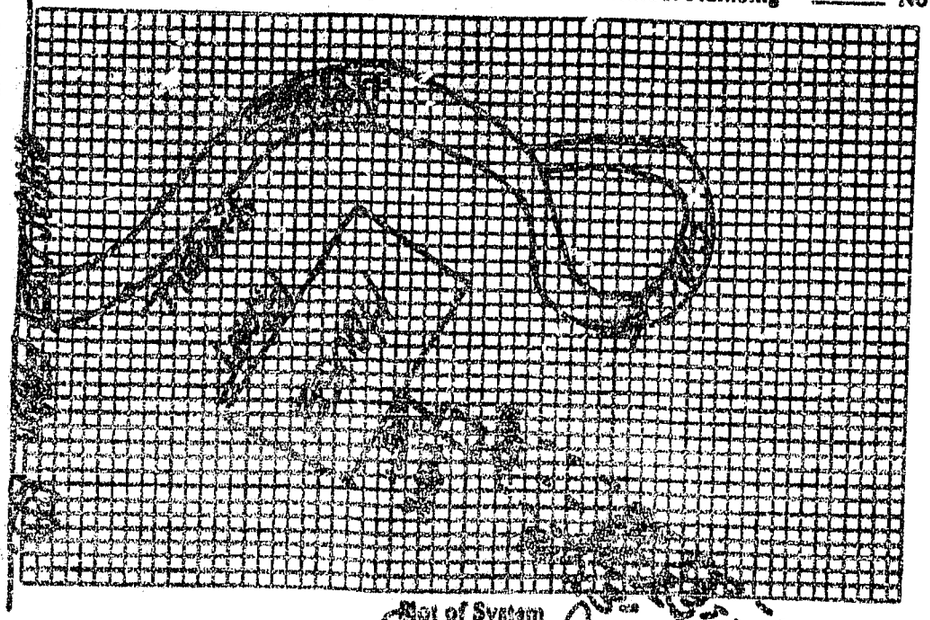
Percolation Rate Good

Topography Level

Depth to Water Table 10'

Rock or other impervious formations None observed

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Lineal Ft. 240
Depth of Stone in Lines 12

Water Supply: Individual (X)
Public ( )

Installed by Jerry Pope

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

Signed: _____

Plot of System

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Liner) sewage pump install after basement plumbing.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 3-15-89

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