10867.

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C) 8N

OWNER OR CONTRACTOR ROBERT CANNISTRA DATE 1-16-90 PERMIT NO. 8N-A-49

PHONE: Business _____ Home _____

LOCATION Lyndhurst Farm Rd. off Old Mt. Rd - go appx. ½ mi. Ft. Lincoln dev. - 2nd left on ct.

S. R. No. _____

SUBDIVISION NAME WEST IREDELL ACRES LOT NO. 21 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 ( )

Lot Area 125' x 200'

Character & Porosity of Soil Prev. Suitable.

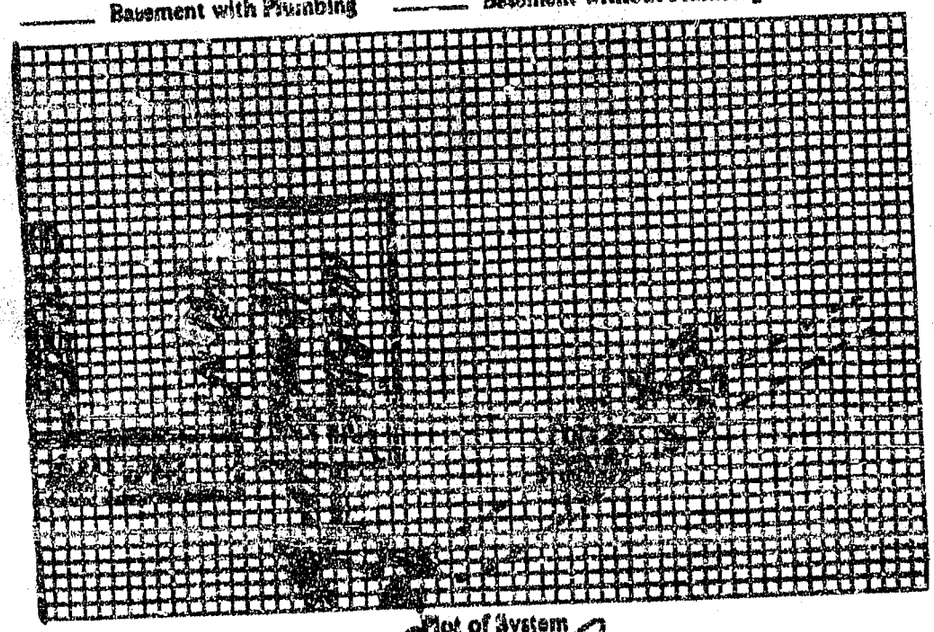
Percolation Rate Sat. 1 gal.

Topography Gently

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 Lineal Ft. 240

Sq. Ft. 720

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Cliffin Farmer

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 DATE 1-16-90

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