12229.

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 PHARES CAUDLE DATE 12-6-90 PERMIT NO. 91-B-63

PHONE: Business _____ Home _____

LOCATION Hwy 90 W-T on Jackey Lynn Rd (2nd entrance) - go approx one mile on left at sharp curve 3rd house. S. R. No. _____

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

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

No. Bedrooms 2 No. Bathrooms 1

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

Character & Porosity of Soil Loam Suitable.
Percolation Rate Fast
Topography Level
Depth to Water Table 10'
Rock or other impervious formations None Observed.

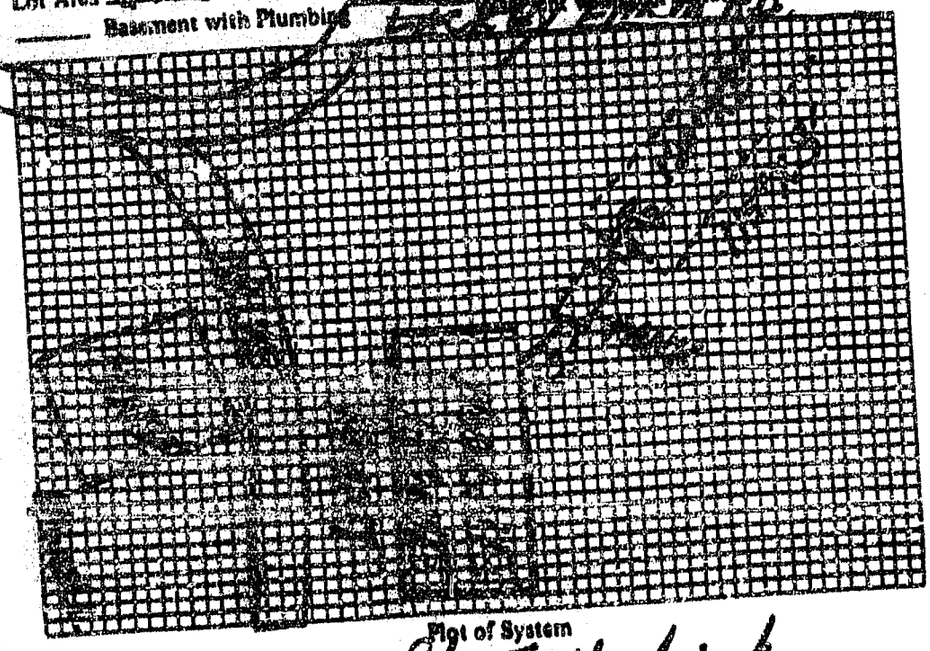
Lot Area 1.62 acres. ___ No Basement

___ Basement with Plumbing

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 ft Linear Ft. 200 ft
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )



Plot of System

Installed by Wes Sutton

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Hedrick

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Hedrick DATE 12-6-90

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