→ 3:00

11306

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 Ben R. Harris DATE April 2, 1990 PERMIT NO. 2C-2-A-24

PHONE: Business _____ Home _____

LOCATION Yacht Cove Lane

S. R. No. _____

SUBDIVISION NAME Yacht Cove LOT NO. 24 SECTION OR BLOCK NO. _____

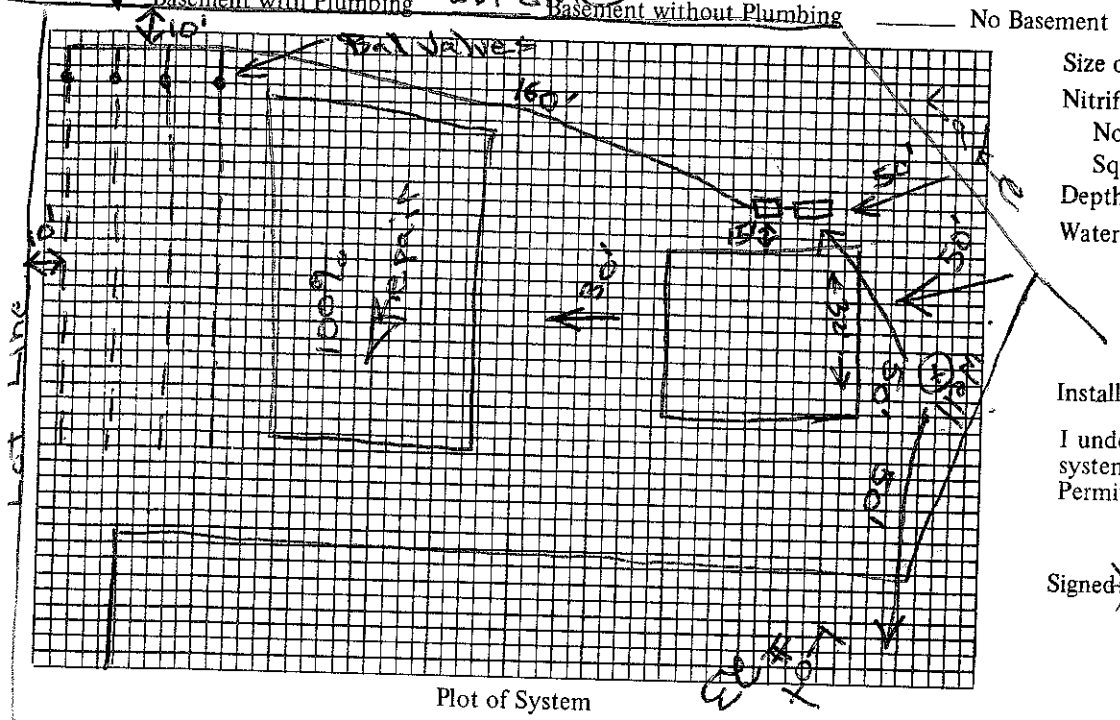
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	~.4 gpd/ft²
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	1-5%
Site ~~Suitable~~ PS	Yes ( )	No ( )	Depth to Water Table	+ 3'
			Rock or other impervious formations	none obs

Lot Area 20,000

Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4@75'
Sq. Ft. 900' Linear Ft. 300'
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed Bob C Bogue

IMPROVEMENTS PERMIT BY Sam Ingram EHS

COMMENTS: 25 gpm 20' TDH 5/32" Hole Every 5' Ball valves 160' Schedule 40 2" Supply Line

CERTIFICATE OF COMPLETION BY _____ DATE _____

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