10987

IREDELL COUNTY HEALTH DEPARTMENT

4625-90-4324

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

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

OWNER OR CONTRACTOR Concordia Const. DATE 8/8/90 PERMIT NO. ZC-2-A-20

PHONE: Business _____ Home _____

LOCATION 1100 TL 1101 (Yacht Rd) TL into Yacht Cove on left

S. R. No. _____

SUBDIVISION NAME Yacht Cove LOT NO. 20 SECTION OR BLOCK NO. _____

760 Lake

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

No. Bedrooms 4 No. Bathrooms 3

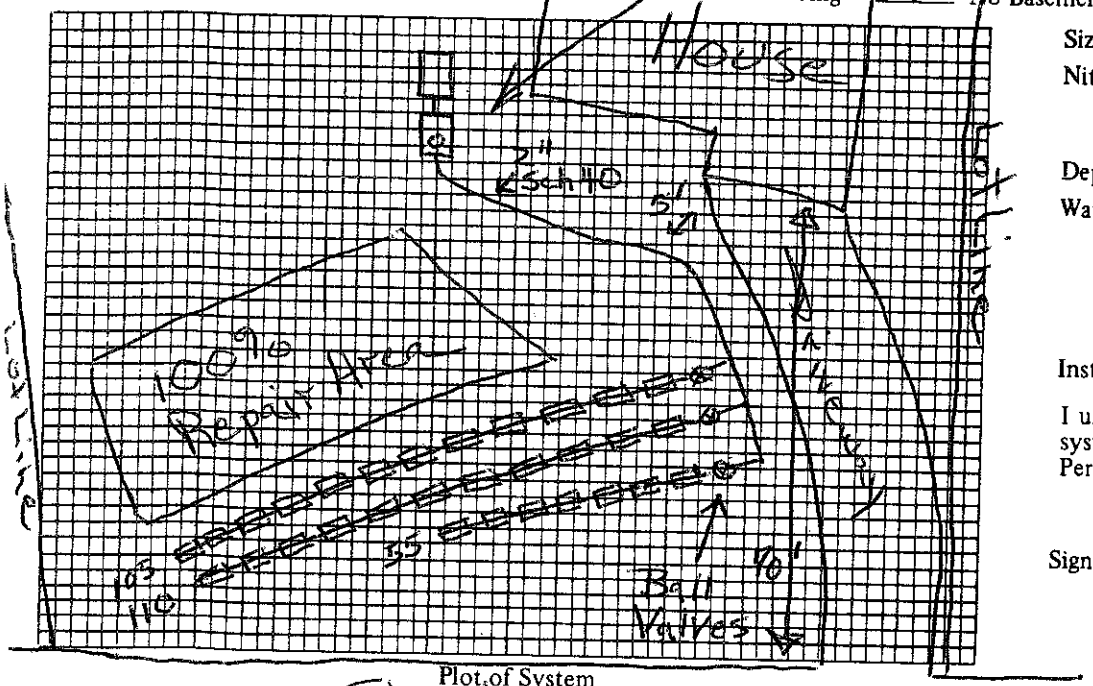
Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	PS clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	No 3
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	~ level
Site ~~Suitable~~ PS	Yes (✓)	No ( )	Depth to Water Table	4'+
Lot Area 20,000 Sq Ft limited			Rock or other impervious formations	none obs

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

1500 PT
1250

Size of Tank _____ Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 270'
Depth of Stone in Lines 16"
Water Supply: Individual (✓) T+T
Public ( ) Panel



Plot of System

Installed by Rowan Septic

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

Operation Permit

CERTIFICATE OF ~~COMPLETION~~ BY Sam Ingram, REHS DATE 8/2/90

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