4626-32-8013

13174

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 Charles Keaton DATE 10/3/91 PERMIT NO 2F-6A-108

PHONE: Business _____ Home 664-7447

LOCATION Lakeland, 1100 TR 1177, TR Riviera, TL Lakeland ~ 200ft on (R) S. R. No. _____

SUBDIVISION NAME Holiday Harbor LOT NO. 108 SECTION OR BLOCK NO. _____

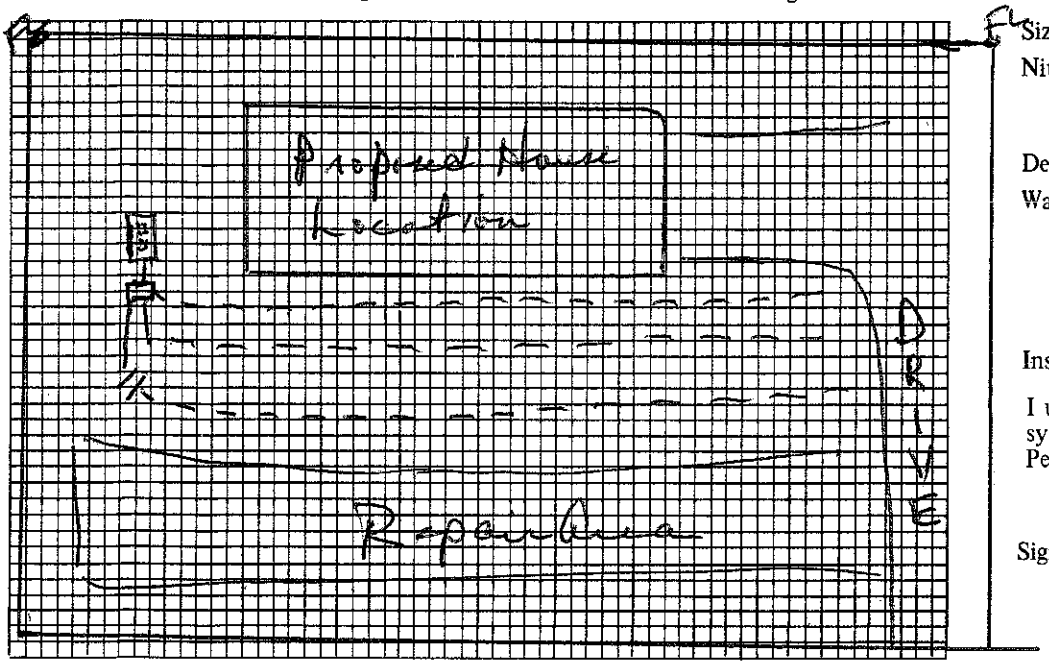
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	P-cl-sicl
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	4
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-5%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	48"
			Rock or other impervious formations	none observed

Lot Area 125' X 160'

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System LAKELAND RD.

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3@ 100'x3'
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Richard Abernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Drilled well not installed this date; must be minimum 50' from all parts of septic tank system

CERTIFICATE OF COMPLETION BY Wesley Sparks R.S. DATE 10/3/91

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