10992

4626-51-5488

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 F. H. Reed Jr. DATE Sept. 30, 91 PERMIT NO 2F-6-A-4

PHONE: Business _____ Home _____

LOCATION 1180 TR1177 TR 1279 ~300' on Right

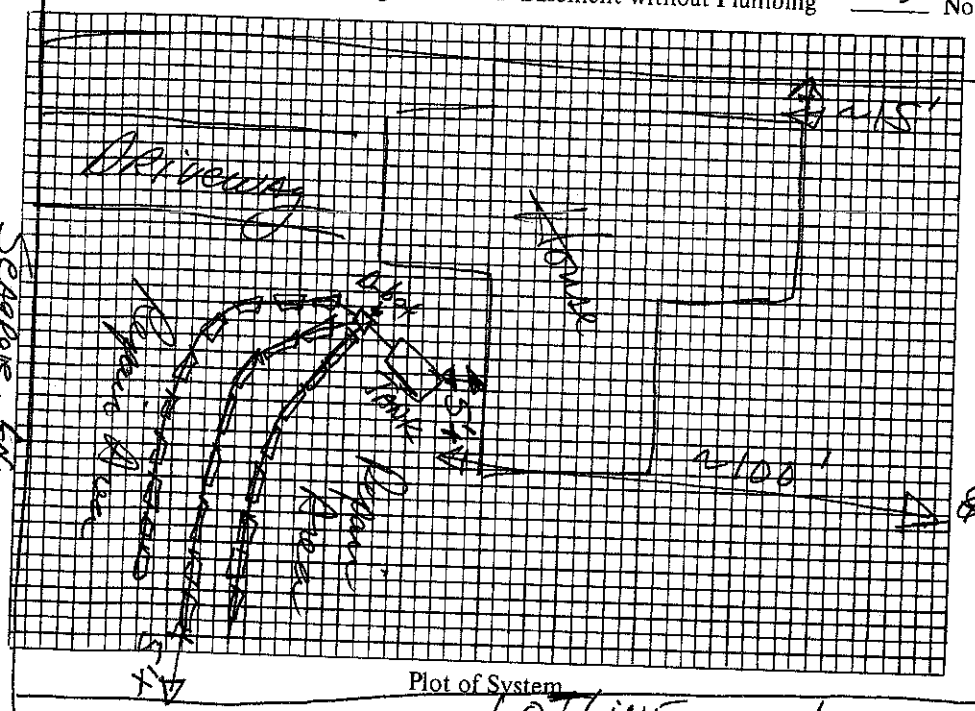
SUBDIVISION NAME Holiday Harbor LOT NO. 4 SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	LS clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	2.3
Auto. Wash. Machine	Yes ( )	No (✓)	Topography	4%
Site ~~Suitable~~ PS	Yes (✓)	No ( )	Depth to Water Table	4'+
Lot Area 108 x 184'			Rock or other impervious formations	none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 200'
Depth of Stone in Lines 16" perf. block
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 _____ DATE _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D K Hinson, RS DATE 9-30-91

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