10557

4626-86-4121

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 Stephen Gazel DATE May 24 '90 PERMIT NO. 2F-1-A-4

PHONE: Business ________ Home ________

LOCATION 1100 TR into Poplar Grove TL 1st street near end on left S. R. No. ________

SUBDIVISION NAME Poplar Grove LOT NO. 4 SECTION OR BLOCK NO. ________

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Character & Porosity of Soil PS clay trans

Percolation Rate L.3

Topography 8-10%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

Lot Area 25000 ft² +

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

Size of Tank 1250 p.t. 1250 Gals.

Nitrification Field:

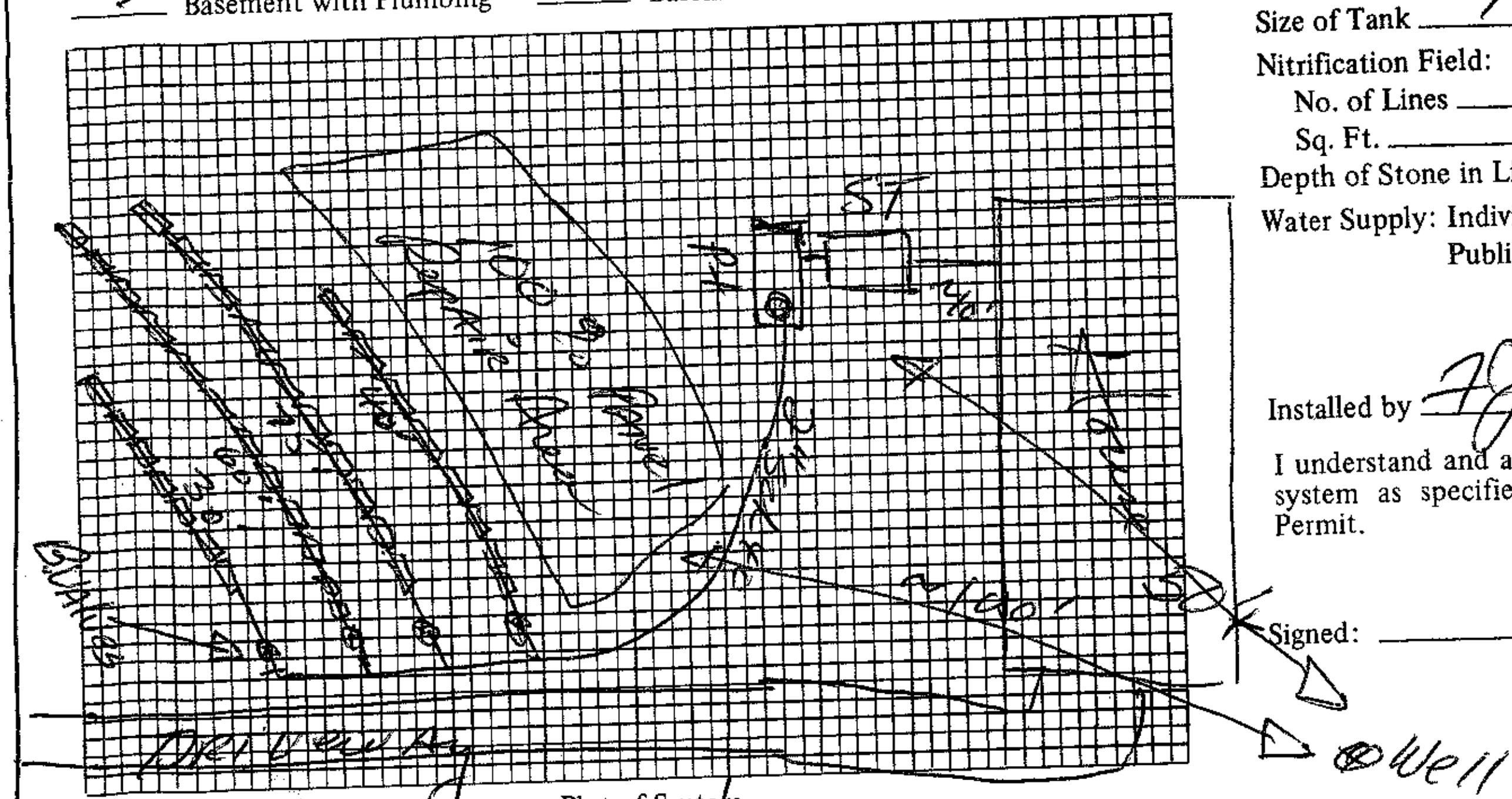
No. of Lines 4

Sq. Ft. ________ Linear Ft. 200' 8'

Depth of Stone in Lines 16" T4y

Water Supply: Individual (✓) panels

Public ( ) p-d.



Plot of System

Installed by F J Ervin

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 David R. Hinson, EHS DATE 5-24-90

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