4626-95-1972

IREDELL COUNTY HEALTH DEPARTMENT

14348 IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Joseph Perez DATE Nov 9, '92 PERMIT NO. 2F1145

PHONE: Business _____ Home _____

LOCATION 1/40 TR into Poplar Grove Bear Rt on Tawny Bark Dr. 3rd lot on right S.R. No. _____

SUBDIVISION NAME Poplar Grove LOT NO. 46 SECTION OR BLOCK NO. _____

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 720,000 ft²

Soil Characteristics Pscley

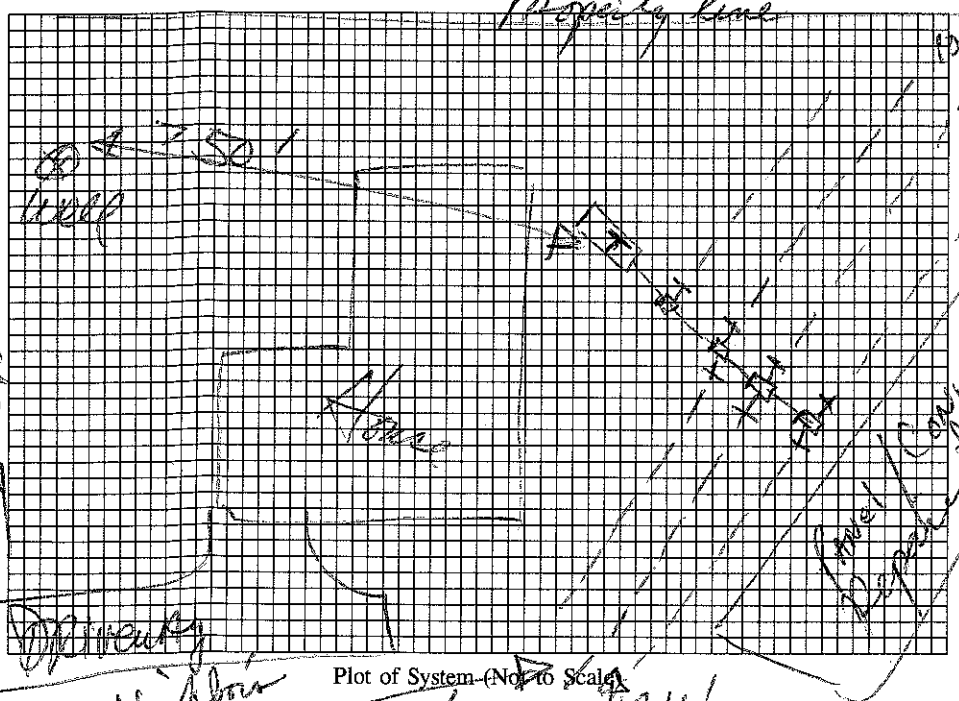
Application Rate 3 4620

Topography _____

Depth to Water Table 74"

Rock or other impervious formations None Obs

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement _____ Crawl Space



Plot of System (Not to Scale)

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 7

Sq. Ft. 420 Linear Ft. 490

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐

Installed by Carlton ST

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY _____

COMMENTS _____

CERTIFICATE OF COMPLETION BY D.R. Hinson, RS DATE 11/9/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold