09619

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 H. Wells DATE 3-31-89 PERMIT NO. 208

PHONE: Business _____ Home 669-5242

LOCATION 1100 TR McKendrie TR Lakeview On R about ½ way roundabout S. R. No. _____

SUBDIVISION NAME CL and T LOT NO. 332 SECTION OR BLOCK NO. 8
2L-3-A-332 Dvsn.

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 Yes (✓) No ( )

Character & Porosity of Soil clayey
Percolation Rate ~.3 gpd/ft²
Topography 2-6%
Depth to Water Table 4'+
Rock or other impervious formations none obs.

Lot Area _____

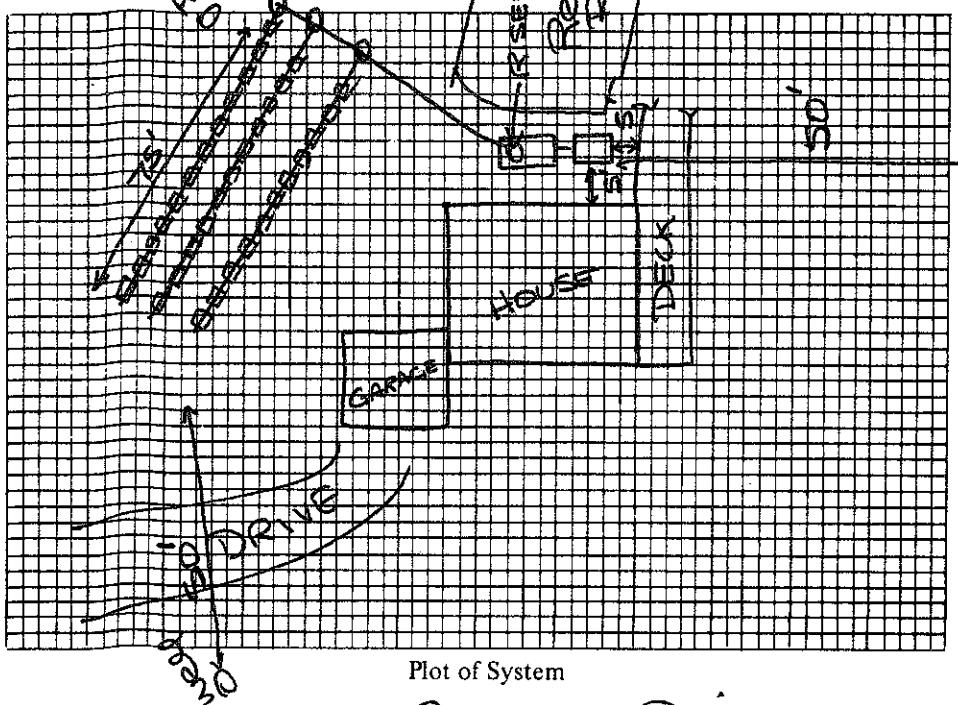
_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Pump Tank: 1250

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 225' of 16"
Depth of Stone in Lines T and T panels.

Water Supply: Individual (✓)
Public ( )



Plot of System

Installed by _____

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

Signed: [illegible] / charlswells

IMPROVEMENTS PERMIT BY Andre C. Brien

COMMENTS: (51 panels) (TDH = ~22) (Total flow = 187 gals) Flow rate = 20 gpm. Set tanks and pump to pressurized field. Pump through 2" Sch. 40 PVC and reduce to 1¼" pipe w/ 1 hole / panel. High water alarm and floats must be installed & complete before final approval. Well must be properly abandoned and approved by NCNRCD before we will final. Send us a letter.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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