4627891171

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 Fred Jones DATE June 25, '91 PERMIT NO.

PHONE: Business Home

LOCATION 1100 TR 1178 (Blume) TL 1443 TL 1444 (Beaten Path) 3rd house on Right S. R. No.

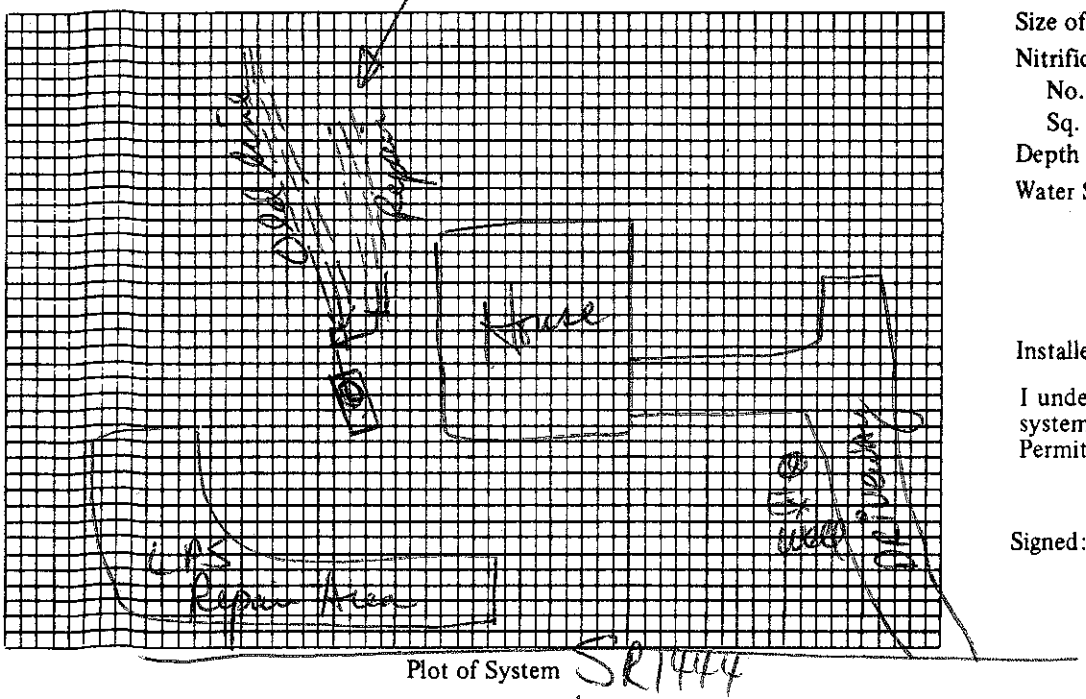
SUBDIVISION NAME Crescent Lake Normand LOT NO. 71 SECTION OR BLOCK NO. 9

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

No. Bedrooms 3 No. Bathrooms 2-3
Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes ( ) No ( )
Lot Area Existing

Character & Porosity of Soil loamy sandy clay
Percolation Rate ~1/2
Topography ~15%
Depth to Water Table 48"
Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 10' x 30' Bed
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 24"
Water Supply: Individual (✓)
Public ( )

Installed by Ingram

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: No Bell Rex valve used due to small amount of line able to get in. Wet area below old drainfield combined with terrain) land caused ST contractor only to get in 30' length. Stone depth doubled in an effort to compensate.

CERTIFICATE OF COMPLETION BY D. Hinson, RS DATE 6/25/91

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