02115

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 PAUL MEECH DATE 4-17-85. PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Morrison Farm Rd. - off State Park Rd - T.R. on April Lane - then T.L. on 2nd st. - lot on left rear end. S. R. No. _____

SUBDIVISION NAME SECTION 17 LOT NO. 109 SECTION OR BLOCK NO. _____

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

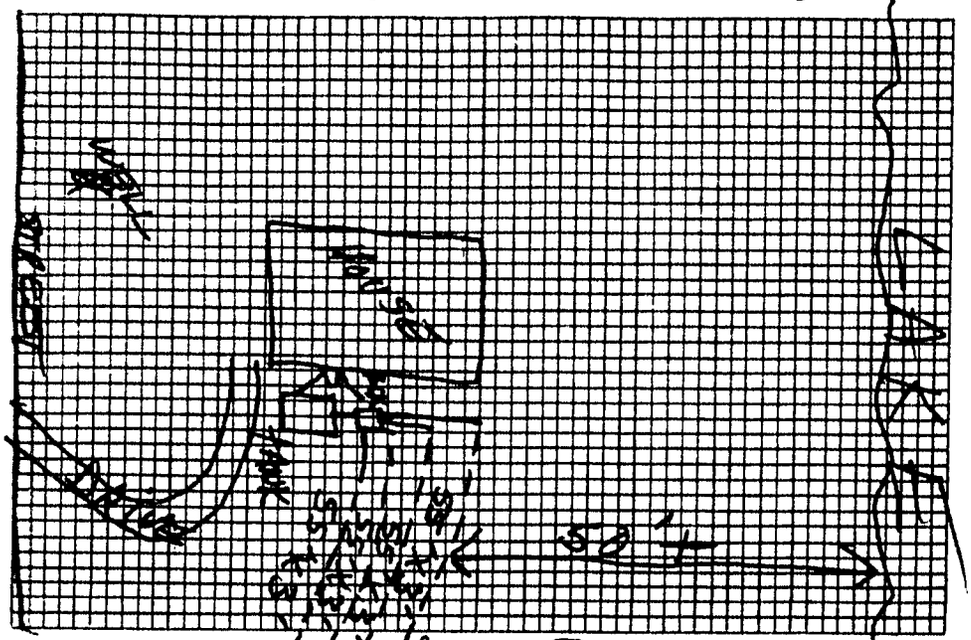
No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Lot Area .89 acre

Character & Porosity of Soil Prov. Suitable
Percolation Rate 5 gal/sq ft
Topography 2 to 6%
Depth to Water Table 12 +
Rock or other impervious formations none observed.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 660 Linear Ft. 220
Depth of Stone in Lines 24"
Water Supply: Individual (✓)
Public ( )

Installed by Eddie Yount

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Septic tank layout changed because of proximity to neighbor's well.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 4-17-85.

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