4634 79 7143

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 Phil Smith DATE 2-26-86 PERMIT NO. 84

PHONE: Business Langtree Home

LOCATION 1192 on left before All Seasons Marina Rt Dirt Road Near ... S. R. No.

SUBDIVISION NAME Annie Knox Honeycutt prop. LOT NO. 4 SECTION OR BLOCK NO.

120 Clearwater Ln.

House (X) Mobile Home ( ) Business ( ) Other

No. Bedrooms 3 No. Bathrooms 2½ Character & Porosity of Soil Clay loam - clay

Garbage Disposal Unit EXISTING Yes No (X) Percolation Rate 0.4 gal/ft²/day

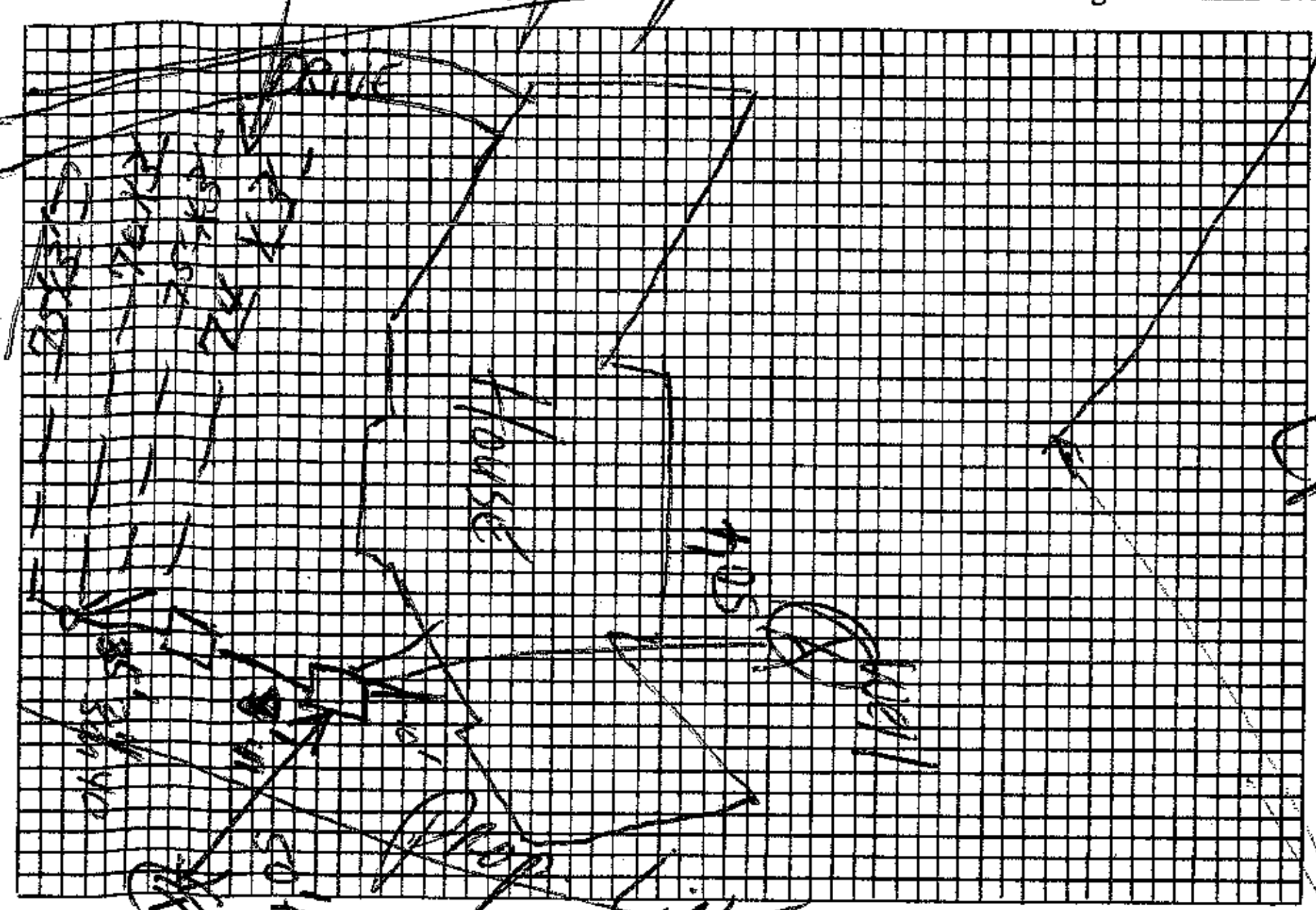
Auto. Dishwasher (X) Well Yes (X) No ( ) Topography 8-10%

Auto. Wash. Machine Yes (X) No ( ) Depth to Water Table 4'

Site Suitable 50' Yes (X) No ( ) Rock or other impervious formations NONE obs.

Lot Area 20,000 Ft²

____ Basement with Plumbing Drop Line ____ Basement without Plumbing X No Basement



Plot of System

1000 pump

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (X)

Public ( )

Installed by R. Abernathy

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

Signed:

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Be Sure to wire pump and Alarm ON Separate ~~Alarm~~ power line

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 2-26-86

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