11202

IREDELL COUNTY HEALTH DEPARTMENT 4634-89-1010

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Simonini Builders DATE 8/24/90 PERMIT NO. 2B-7-A-1

PHONE: Business _____ Home _____

LOCATION 1155. TR 1102 (Langtree) TL into Royal Pointe
TR 2nd Street ~400' on left S. R. No. _____

SUBDIVISION NAME Royal Pointe LOT NO. 1 SECTION OR BLOCK NO. _____

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

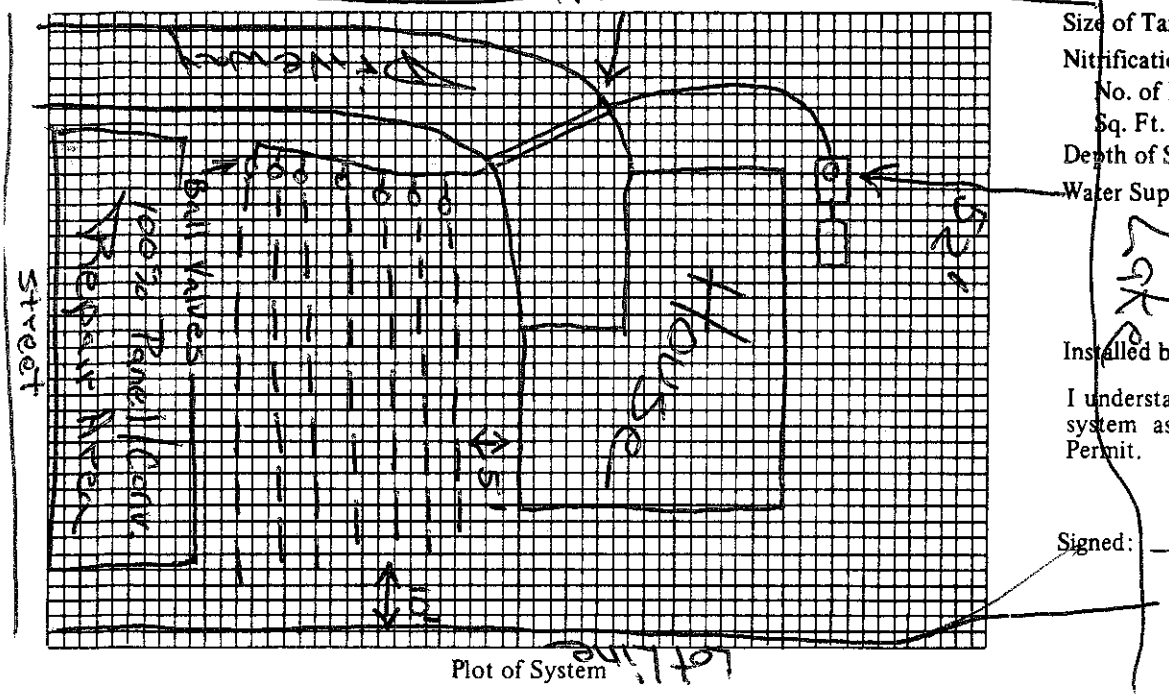
No. Bedrooms 3 No. Bathrooms 2½

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

Character & Porosity of Soil: Ps clay
Percolation Rate: .3-.35
Topography: 4-6%
Depth to Water Table: 41
Rock or other impervious formations: none obs.

Lot Area _____

_____ Basement with Plumbing ~~Basement without Plumbing~~ No Basement



1500 PT

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 7
Sq. Ft. 1080 Linear Ft. 370
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)
C. W.

Installed by F J Ervin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

Operation Permit

~~CERTIFICATE OF COMPLETION~~ BY Sam Ingram EHS DATE 8/24/90

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