4635-56-2953

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 Robert Burcham DATE 6-5-85 PERMIT NO. 252

PHONE: Business _____ Home _____

LOCATION 1100 TL on 1112 (Stutts Rd) go to end bear right on Shoreline Dr. (2nd entrance) go to end of paved rd. lot on (left) where gravel rd begins S. R. No. _____

SUBDIVISION NAME Imperial Point LOT NO. 6 SECTION OR BLOCK NO. _____

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

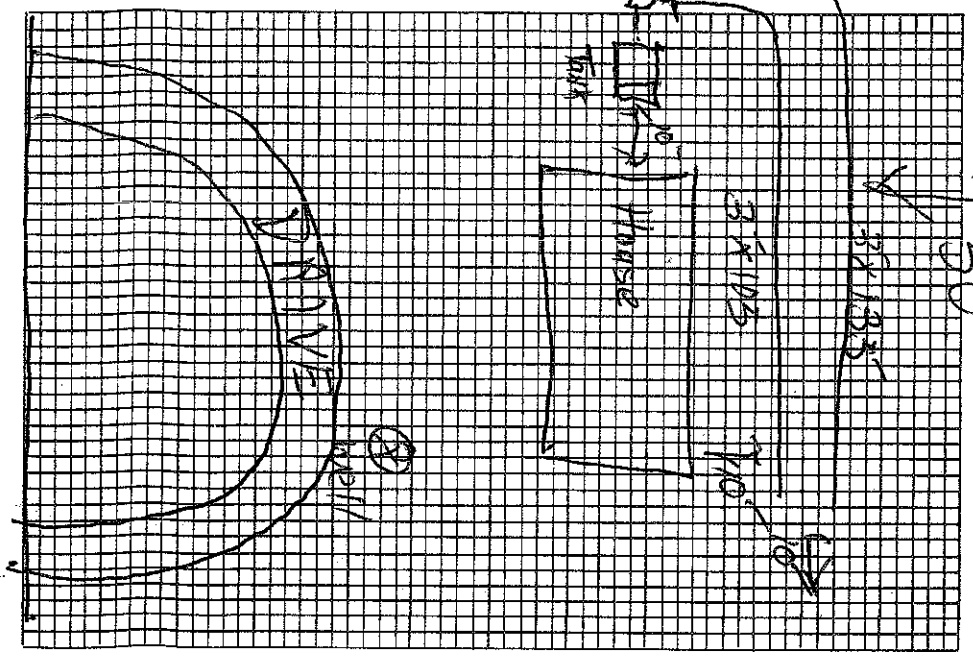
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
~~Auto. Wash. Machine~~ Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area 20,000+/-

Character & Porosity of Soil Clay
Percolation Rate 0.5 gal/ft²/day
Topography 2-8%
Depth to Water Table 40+ ft
Rock or other impervious formations none observed

Proper Title V10

_____ Basement with Plumbing ___/___ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by Symon

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

Signed _____

IMPROVEMENTS PERMIT BY Charles K. Barnett & Fred Clemmer

COMMENTS: area dug out for basement, which the owner did not mention to me or inform me of when building lines in some area had to dig deep and shallow in other others because some top soil was removed

CERTIFICATE OF COMPLETION BY Charles K. Barnett DATE 6-5-85

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