10306

# IREDELL COUNTY HEALTH DEPARTMENT

4635-70-6567 4635-80-6248

## (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR H + F Construction DATE Mar 7, 1990 PERMIT NO. 2B-1-C-9

PHONE: Business _____ Home _____

LOCATION Langtree Rd. On R past 1st Lakeshore Drive ⅛ - ¼ mi on R.

S. R. No. _____

SUBDIVISION NAME Lakeview Shores LOT NO. 9 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 clayey

Percolation Rate .4 gpd / ft²

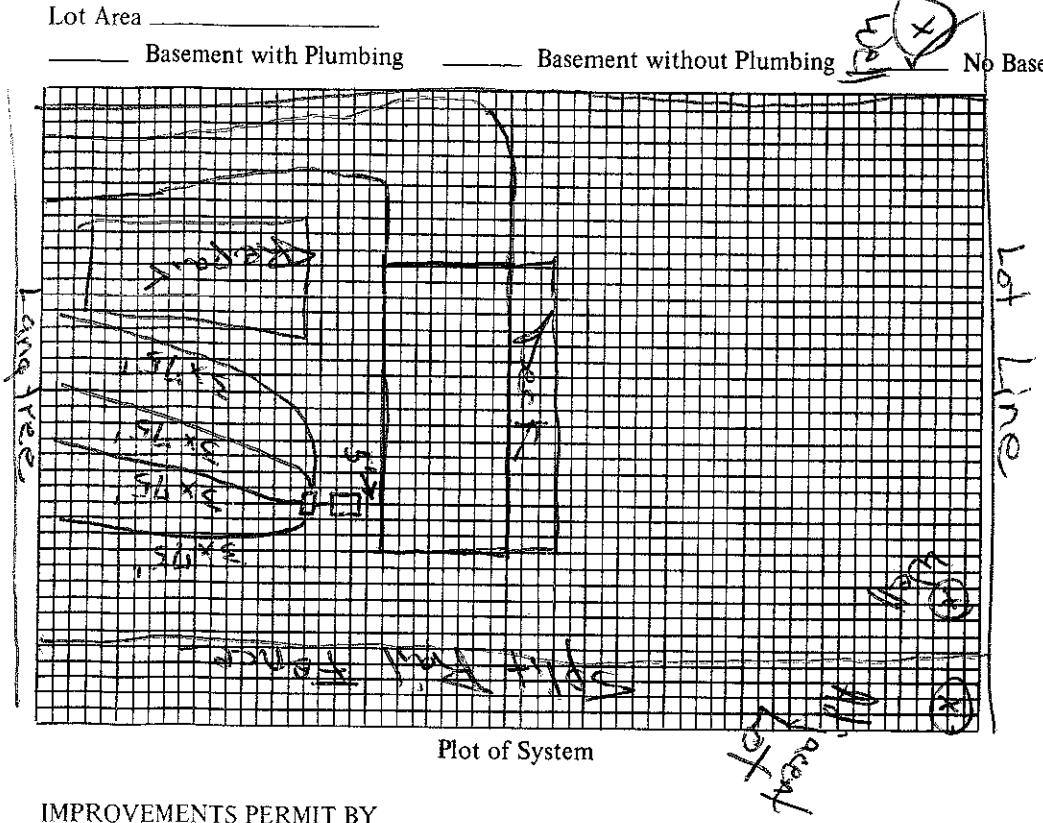
Topography 2%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement




Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 4@75'

Sq. Ft. 900 Linear Ft. 300'

Depth of Stone in Lines _____

Water Supply: Individual (✓)

Public ( )

Installed by George Moser

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well not installed at time of final

CERTIFICATE OF COMPLETION BY Sam Ingram E.H.S. DATE Mar 7, 1990

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