IREDELL COUNTY HEALTH DEPARTMENT 463618 6989

10389

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

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

OWNER OR CONTRACTOR C. W. Brewer DATE Feb 1, '90 PERMIT NO 2L-9-A-14

PHONE: Business _____ Home _____

LOCATION 1100 TR 1178 (Blume) TR 1234 (Beech Tree) ~ 1/4 mile TR Meadow Creek Lane TR Beechfield on left S. R. No. _____

SUBDIVISION NAME Springfield LOT NO. 14 SECTION OR BLOCK NO. _____

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

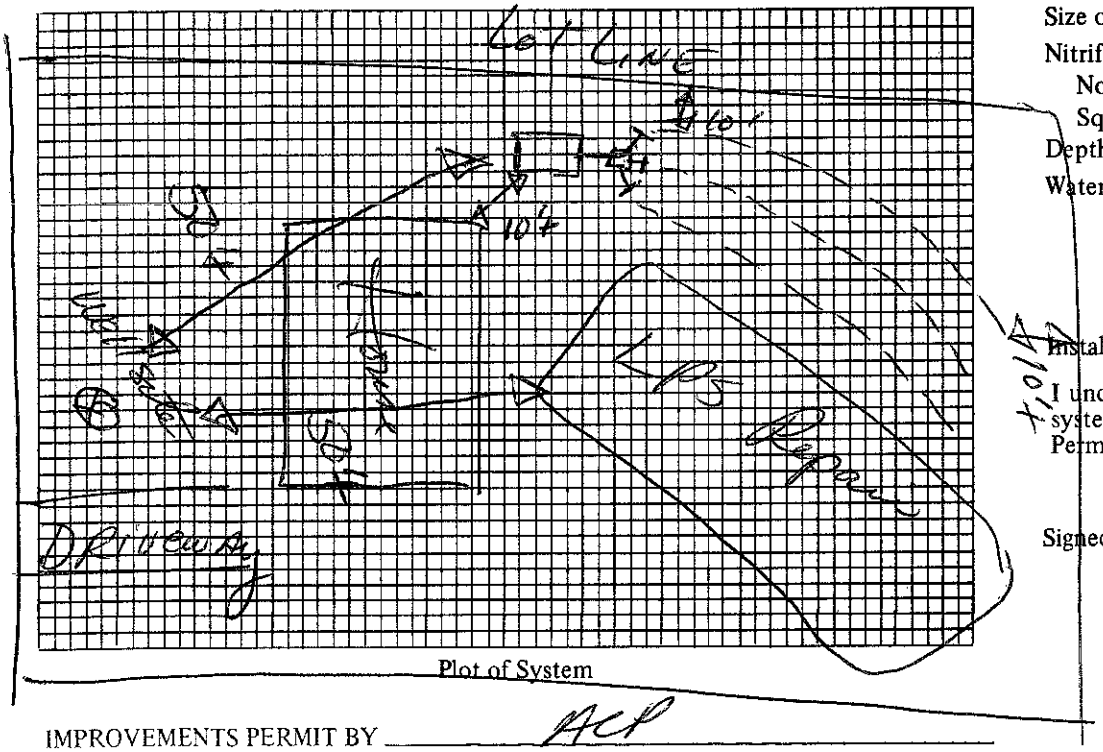
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil RS clay
Percolation Rate ~ 35
Topography 2-4% S
Depth to Water Table 4'+
Rock or other impervious formations none obs.

Lot Area ~.588 Ac.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Richard Abernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: Well not installed.

CERTIFICATE OF COMPLETION BY D. R. Hinson, EHS DATE Feb 1, '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