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IREDELL COUNTY HEALTH DEPARTMENT

14693

4636202243

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Robert Ingram Homes DATE 9/4/92 PERMIT NO. 2C-23-A-14

PHONE: Business 342-0866 Home _____

LOCATION Isle of Pines TL off 1100, TR into North Shore, to 4th lot on (L) Crawley School Road S.R. No. _____

SUBDIVISION NAME Pinesdale / North Shore LOT NO. 119 SECTION OR BLOCK NO. 1

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 3 No. Bathrooms 2.5

Garbage Disposal Unit Yes ☑ No ☐

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 20,000 FT2

Soil Characteristics P - C1/C TRANSITION

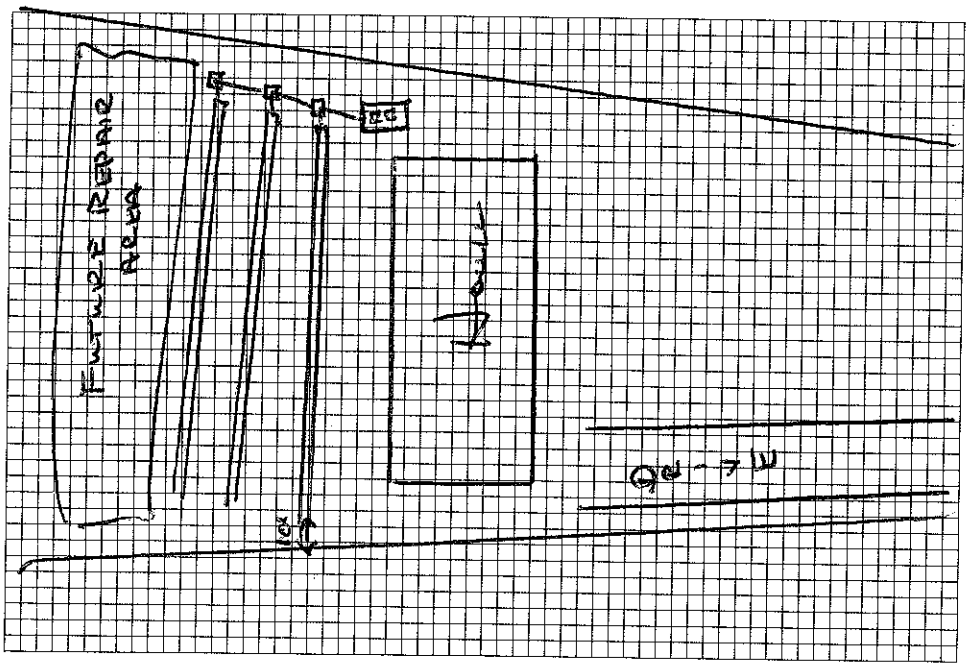
Application Rate P - .35 (40-wk gran.)

Topography P - 3-4%

Depth to Water Table S - >48"

Rock or other impervious formations S - None observed

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement ✓ Crawl Space



Plot of System (Not to Scale)

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3 @ 70' x 2'

Sq. Ft. _____ Linear Ft. 210' *

Depth of Stone in Lines _____

Water Supply: Individual ☐ Public ☐

16" PREFABRICATED PERMEABLE PANELS

Installed by HARVEY LEATHERMAN

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY _____

COMMENTS _____

206922

The proposed / existing SLAB addition does not appear to impact the existing septic system.

**NOTE: Do Not Pour Over DRAINFIELD

R.S.

Date: APPROVED NOV 18 2014

ICHD-Environmental Health Division

CERTIFICATE OF COMPLETION BY Wesley Sparks R.S. DATE 9/8/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold