4636-44-5409

07096

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 G & O Contractors DATE Jan. 27, 88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TR 1112 (Statts Rd) TR Fairway Drive on Rt. _____ S. R. No. _____

SUBDIVISION NAME Fairway Estates LOT NO. 234 SECTION OR BLOCK NO. _____

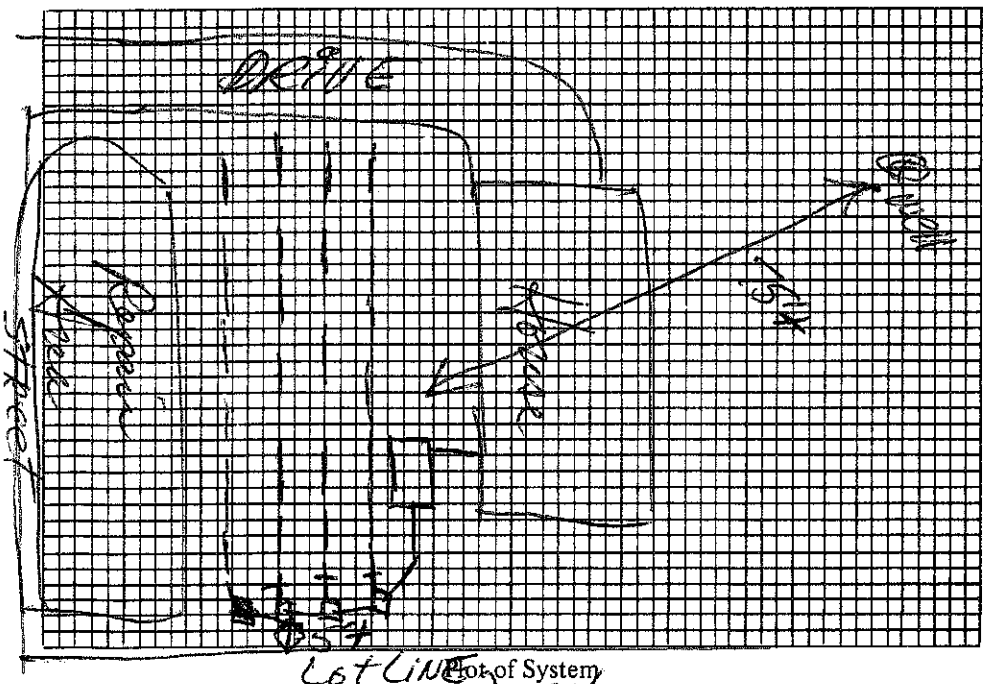
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	Clay	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	35	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-6%	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'+	
			Rock or other impervious formations	none obs.	

Lot Area 20000 ft+

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 990 Linear Ft. ~330
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by T J Ervin

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

Signed: _____

IMPROVEMENTS PERMIT BY DLH

COMMENTS: Drainfield Approx 10-15' less (overall) because of close proximity of driveway. Also plumbing not stubbed out where indicated on improvements permit.

CERTIFICATE OF COMPLETION BY D L Hanson RS DATE Jan 27, 88

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