11:00

08535

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 Ray Hunt DATE Sept 9, '88 PERMIT NO. 21A

PHONE: Business _____ Home _____

LOCATION 1100 TL 1112 on Rt at corner of Marina Lane and Statts Rd. S. R. No. _____

SUBDIVISION NAME Commodore Peninsula LOT NO. 310 SECTION OR BLOCK NO. _____

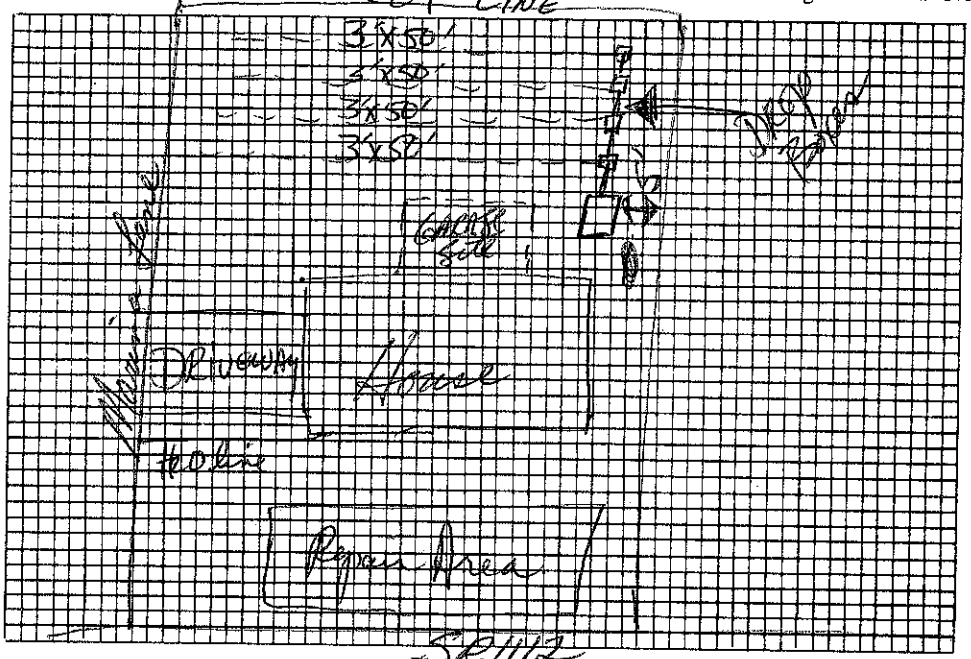
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	n.t.	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2%	
Site ~~Suitable~~ OK	Yes ( )	No ( )	Depth to Water Table	4'	
			Rock or other impervious formations	none obs.	

Lot Area 70' x 143'

_____ Basement with Plumbing 6" + Line Basement without Plumbing _____ No Basement ✓ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓) CW

Installed by _____

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

Signed: Ray N Hunt

IMPROVEMENTS PERMIT BY Patrick R. Henson, RS.

COMMENTS: Install drainfield at a max depth of 30" to trench bottom.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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