11290

IREDELL COUNTY HEALTH DEPARTMENT

PNTF 4636 ST 8684

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

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

OWNER OR CONTRACTOR Mitchell Taylor DATE May 2, '90 PERMIT NO. 2G-7-B-15

PHONE: Business _____ Home _____

LOCATION 1100 ft 1112 (Stutts Rd.) on Right just past Coperview Rd. S. R. No. _____

SUBDIVISION NAME Coperview Park LOT NO. 15 SECTION OR BLOCK NO. _____

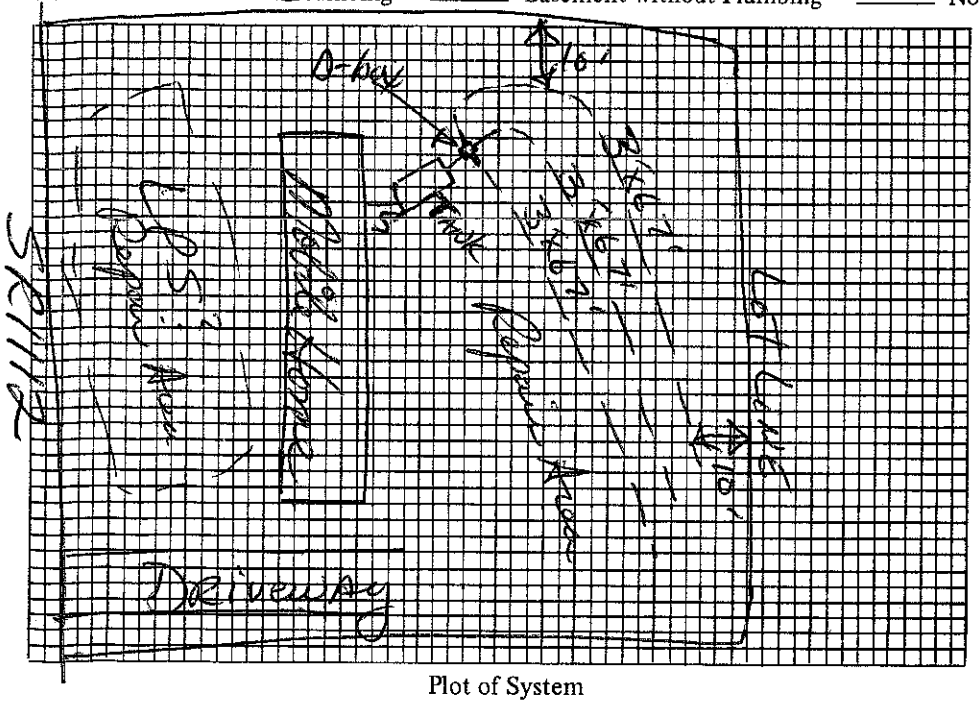
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area Existing (~15,000 sq ft 103 x 146')

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 600 Linear Ft. 200

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓) CW

Installed by Rowan Septic Tk.

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

Signed: _____

IMPROVEMENTS PERMIT BY ST

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Hinson, EHS DATE 5-2-90

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