4636654303

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 Max Spear DATE 4/26/88 PERMIT NO. _____

PHONE: Business _____ Home 636-1796

LOCATION 1100 TL Mallard Way In front of jct w/ dirt St (Teal) that connects PINTAIL S. R. No. _____

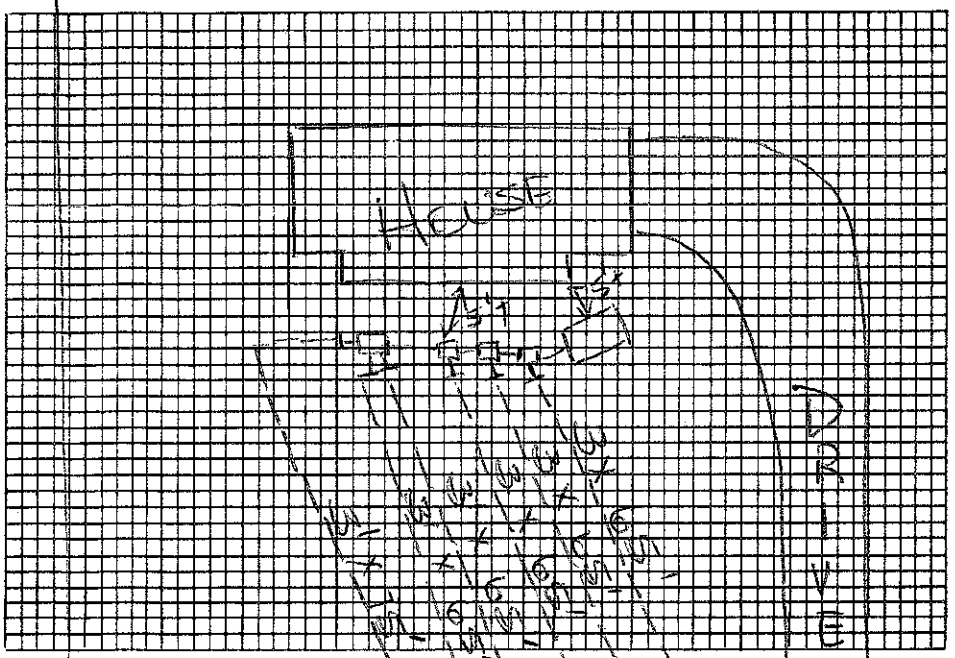
SUBDIVISION NAME Mallard Head LOT NO. 166 SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms _____
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 3/4 A.

Character & Porosity of Soil clayey
Percolation Rate .4 gpd/ft²
Topography 4%
Depth to Water Table 4'+
Rock or other impervious formations none observed

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 6
Sq. Ft. 1600 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public X

Installed by George KIRKPATRICK of ROWAN SEPTIC Co.

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP. 10' off ditch

COMMENTS: STREET

CERTIFICATE OF COMPLETION BY Andrew C. Price DATE 4/26/88

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