4636-70-0055

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 Floyd Greene Realty DATE 10/28/91 PERMIT NO. Repair

PHONE: Business _____ Home _____

LOCATION 1100 TL on 1112, TL on second 1212 TL on Mainview Dr. on (L) "Big Rum" residence S. R. No. _____

SUBDIVISION NAME Commodore LOT NO. 226 SECTION OR BLOCK NO. _____

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

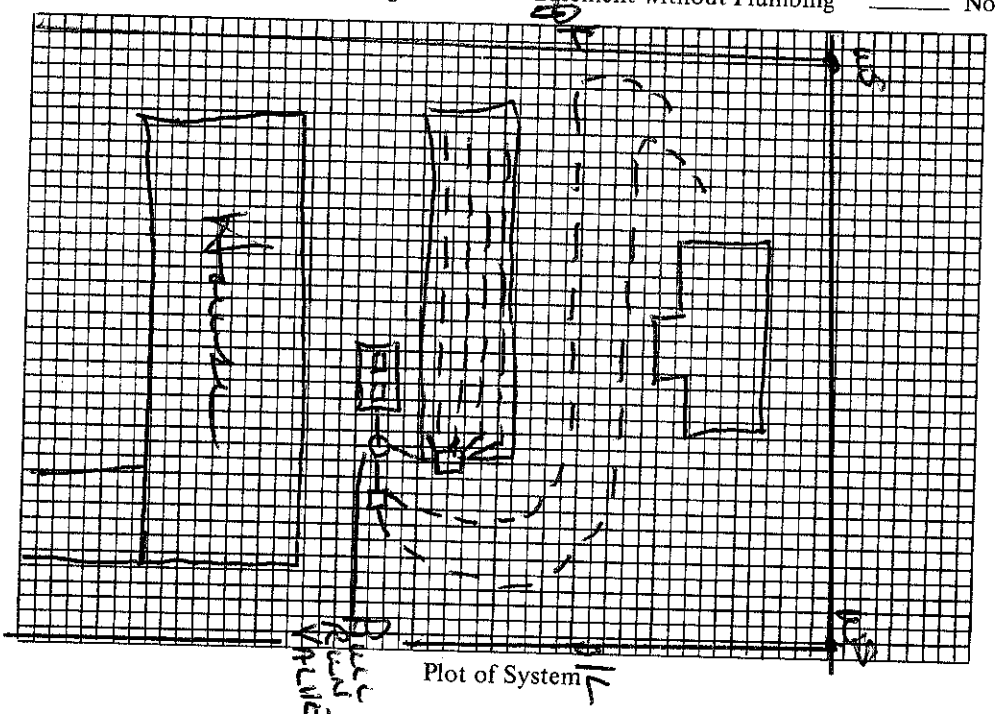
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes (✓)	No ( )	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Suitable	Yes (✓)	No ( )	

Lot Area Existg 1/2ac.

Character & Porosity of Soil P - c trans. (f-wk)
Percolation Rate .3
Topography 2%
Depth to Water Table >48"
Rock or other impervious formations None observed

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement Existg



Size of Tank 900 Gals.
Nitrification Field:
No. of Lines 15'x40' Bed
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 14-16"
Water Supply: Individual ( )
Public (✓) Comm. System

Installed by Tim Simmons.

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Speed levelers used in D box, valve set to load new system now.

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 10/28/91

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