4636 71 1237

08654

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 Joel and Lori Turpin DATE Sept. 6, '89 PERMIT NO 2G-17-B-14

PHONE: Business _____ Home _____

LOCATION 1100 TR 1112 (Stutts Rd.) TR Peninsula Dr. at end on left

S. R. No. _____

SUBDIVISION NAME Norman Shores LOT NO. 14 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~~ PS Yes (✓) No ( )

Lot Area 110' X 169'

Drainfield Area

Character & Porosity of Soil clay

Percolation Rate no 3

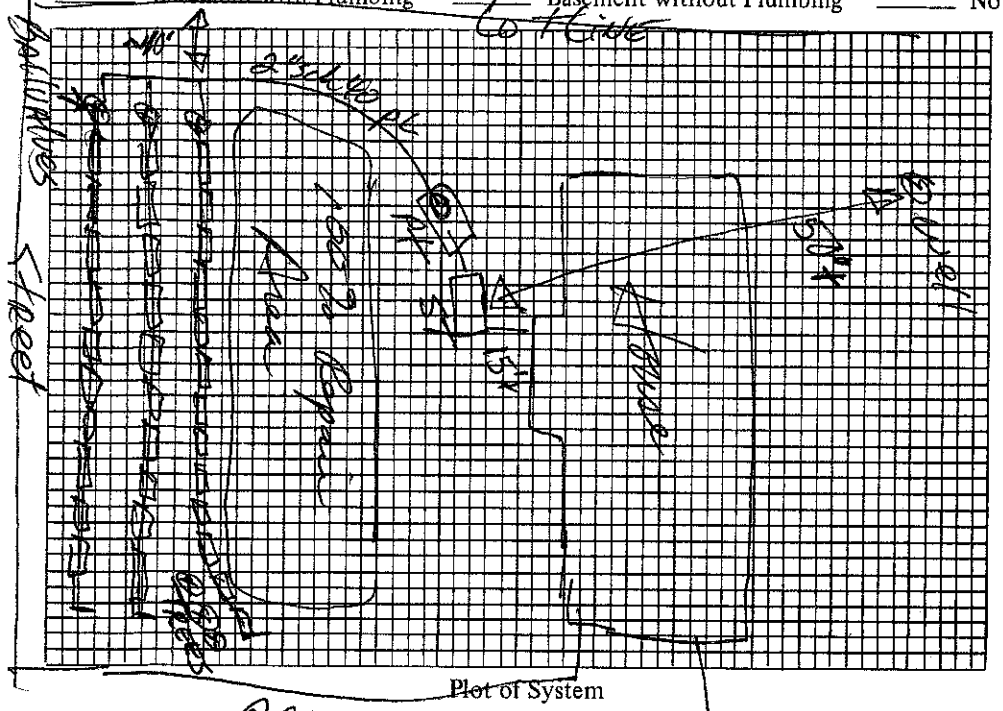
Topography 2%

Depth to Water Table 4+

Rock or other impervious formations none obs.

_____ Basement with Plumbing ✓ PARTIAL Basement without Plumbing _____ No Basement

1000 P.T.



Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. _____ Linear Ft. 200'

Depth of Stone in Lines 16" ET

Water Supply: Individual (✓) Public ( )

pavels pressure-dosed

Installed by H J Erwin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Alarm on site & working but not mounted.

CERTIFICATE OF COMPLETION BY _____ DATE 9-6-89

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