Type 4 Inspection 2-12-2003

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 Danny Daniel R. Creasey DATE 9/28/88 PERMIT NO. 4637-43-8517 21A

PHONE: Business 376 Oak Home Tree! 6664-2743

LOCATION 1100 TR 1250 (OAK TREE Rd.) Bear left at lake ~2nd lot on Rt. S. R. No.

SUBDIVISION NAME Timberlane Shores LOT NO. 4 SECTION OR BLOCK NO.

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

No. Bedrooms 3 No. Bathrooms 3

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

Character & Porosity of Soil shallow clay

Percolation Rate ~.4

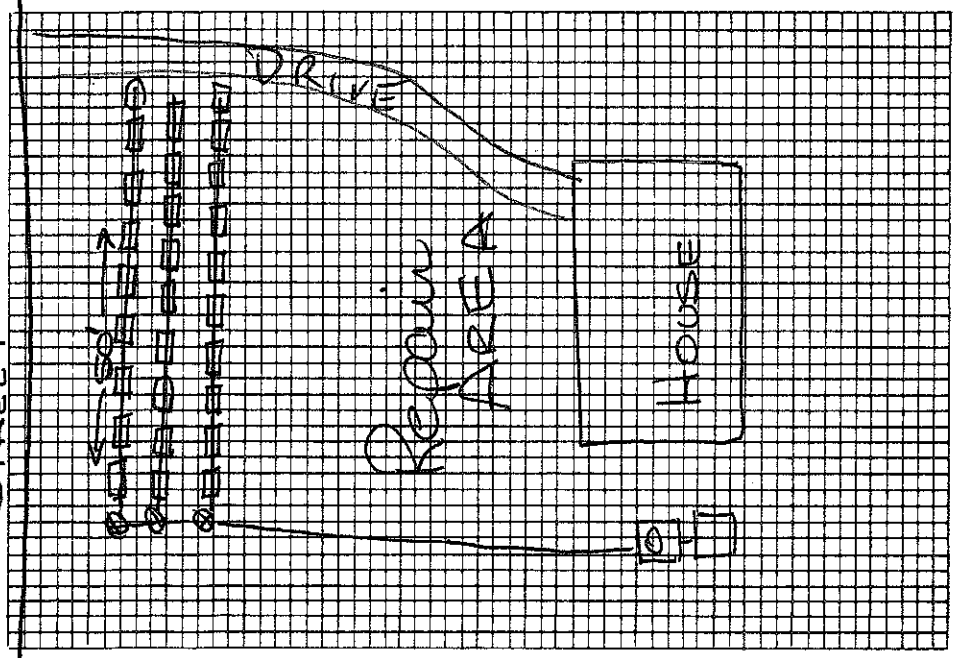
Topography 8-10% complex

Depth to Water Table 41+

Rock or other impervious formations none obs.

Lot Area ~24,000

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement P.T.: 1250 gallons



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines ____

Sq. Ft. ____ Linear Ft. 150' of 16"

Depth of Stone in Lines T & J Panels

Water Supply: Individual ( )

Public ( )

Installed by BOBBY MAYHEW

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

Signed: ____

IMPROVEMENTS PERMIT BY DRH.

COMMENTS: Cked tanks, drainfield, regulated pump 14" head on ea. ditch. - 7/22/88.
Alarm checked 9/28/88 ACP.

CERTIFICATE OF COMPLETION BY Andrew C Price DATE 9/28/88

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