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IREDELL COUNTY HEALTH DEPARTMENT

10218

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Doug Payseaur DATE July 9, '90 PERMIT NO. 2K-A-1 1pt.

PHONE: Business _____ Home _____

LOCATION 1100 TR Promenade Court Center at end

_____ S. R. No. _____

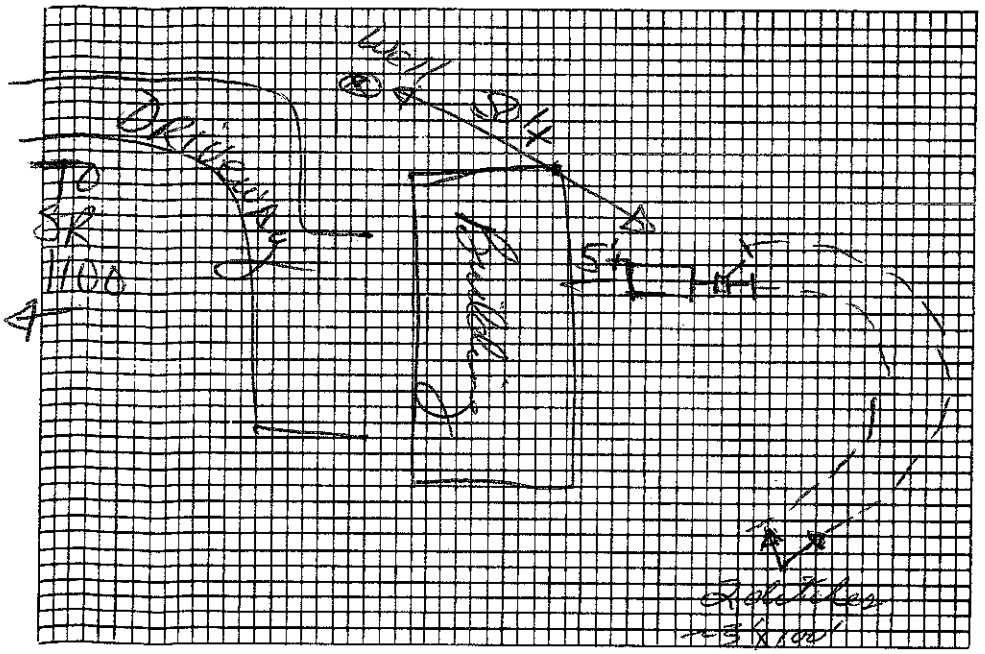
SUBDIVISION NAME Promenade Court Center LOT NO. 2 SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes ( ) No (✓)
Site ~~Suitable~~ PS Yes (✓) No ( )
Lot Area 20000 sq ft

Character & Porosity of Soil SCL clay
Percolation Rate 1, 3-4
Topography 2-4%
Depth to Water Table 6'+
Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Walter Barton

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D R Hinson, EHS DATE 7-9-90

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