4638193833

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 A. J. Bourgeois DATE June 25, '91 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1303 N. TL 1300 (Teen Hill) TR Periwinkle Bear left at fork 1st house on Right S. R. No. _____

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

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

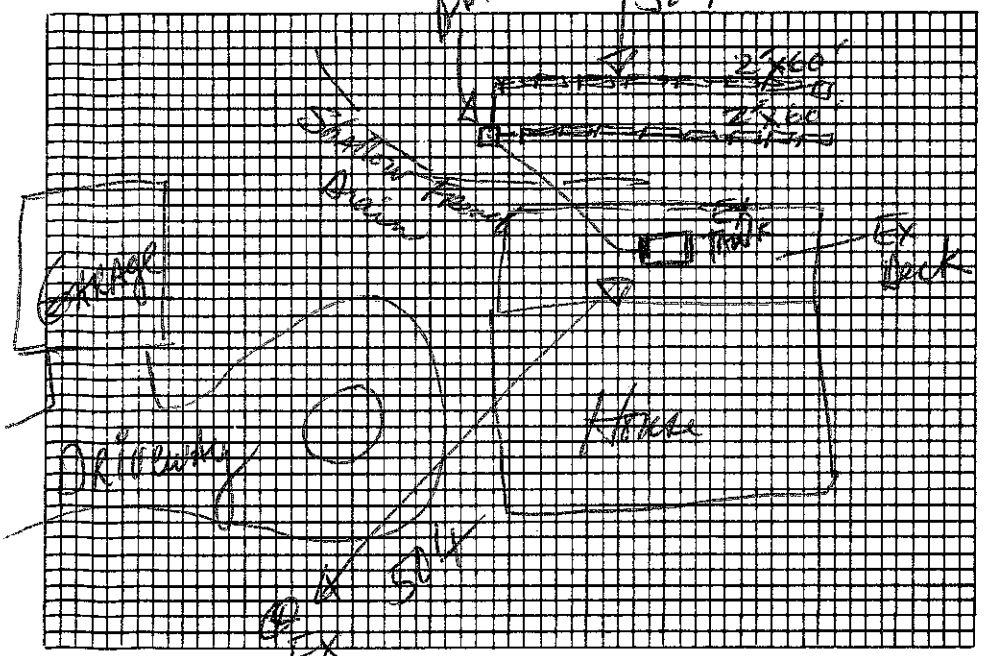
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 20,000 ft²+

Character & Porosity of Soil sandy clay / trans - saprolite
Percolation Rate 2.4
Topography 15-20%
Depth to Water Table unk.
Rock or other impervious formations scattered rock

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. _____ Linear Ft. 120'
Depth of Stone in Lines 16" Tot
Water Supply: Individual (✓) panels
Public ( )

Installed by Donald Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY AWS

COMMENTS: Upper line feeds first.

CERTIFICATE OF COMPLETION BY D R Hinson, RS DATE 6/25/91

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