05993

PIN# 4638-21-0604

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 Richard L. Wilson Jr. DATE April 11, '89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1500' TR1396 (Robinson Rd.) ~1/4 mile TL Private Way Lane ~350' on Right S. R. No. _____

SUBDIVISION NAME East Lake LOT NO. 3 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 ~3/4 Ac.

Character & Porosity of Soil clay

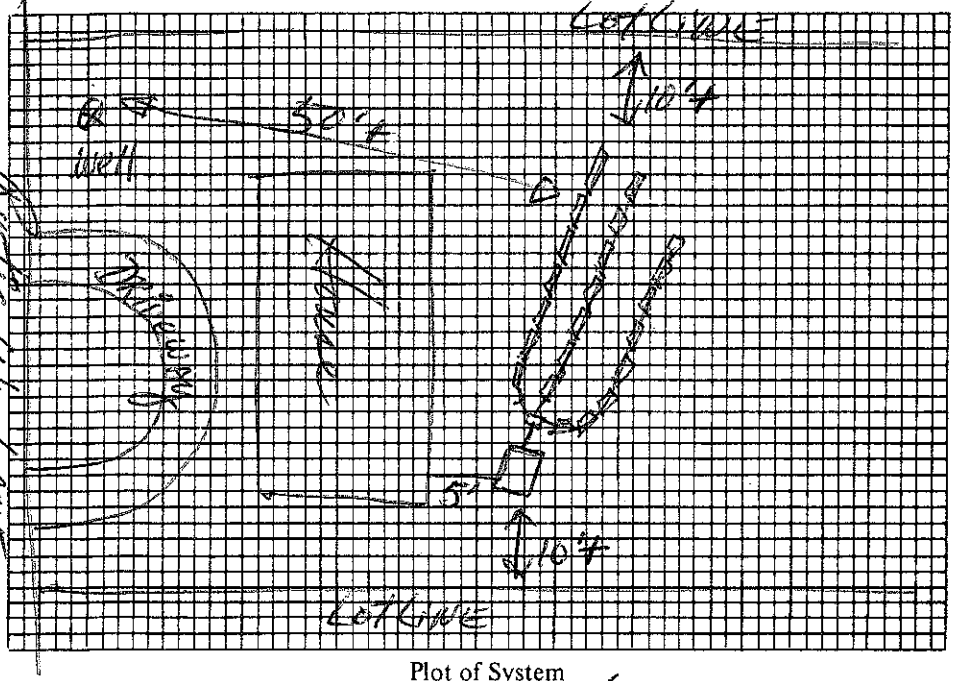
Percolation Rate 2-4

Topography 6-8% front + 8-2% back

Depth to Water Table 34"

Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. _____ Linear Ft. 150'

Depth of Stone in Lines 16" Top

Water Supply: Individual (✓) gravity-flow

Public ( )

Installed by D. Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: Divert surface drainage around system.

CERTIFICATE OF COMPLETION BY D. L. Lackey, RS. DATE 4-11-89

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