4638228996

IREDELL COUNTY HEALTH DEPARTMENT

10909

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

OWNER OR CONTRACTOR Clifton Tyler DATE Feb 1, '90 PERMIT NO. 2R4-A-154

PHONE: Business _____ Home _____

LOCATION 150 W. SR 1323 (Peeler Rd) TL Normandy Rd. at end on Right S. R. No. _____

SUBDIVISION NAME CLIFT CAKE NORMAN LOT NO. 1107 SECTION OR BLOCK NO. 11

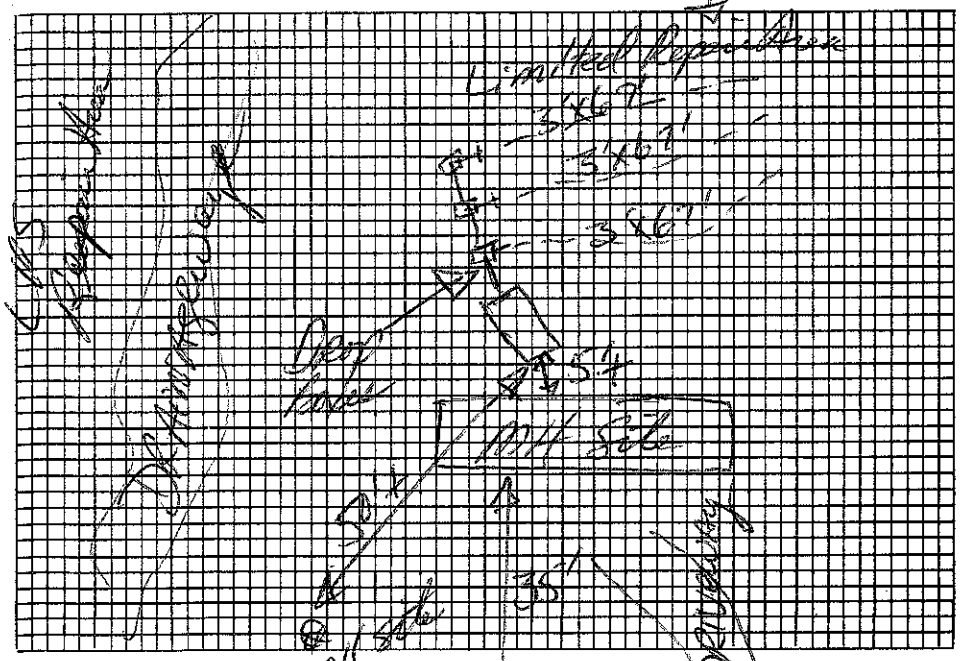
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil		PS clay
Auto. Dishwasher	Yes (,)	No (✓)	Percolation Rate		4
Auto. Wash. Machine	Yes (✓)	No ( )	Topography		S-Top
Site Suitable	Yes (✓)	No ( )	Depth to Water Table		44
			Rock or other impervious formations		none obs.

Lot Area 1.13AC.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by C Wayne Potts

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

Signed: _____

IMPROVEMENTS PERMIT BY DCH Normandy Rd.

COMMENTS: Well not installed, M.H. not on site

CERTIFICATE OF COMPLETION BY D R Hinson, EHS DATE Feb 1, '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