4638 31 9758

08587

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 Kevin Krug DATE May 11, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W. TR 1396 (Robinson Rd.) ~½ mile TR private road at end on left S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ 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 20000 ft²

Character & Porosity of Soil clay

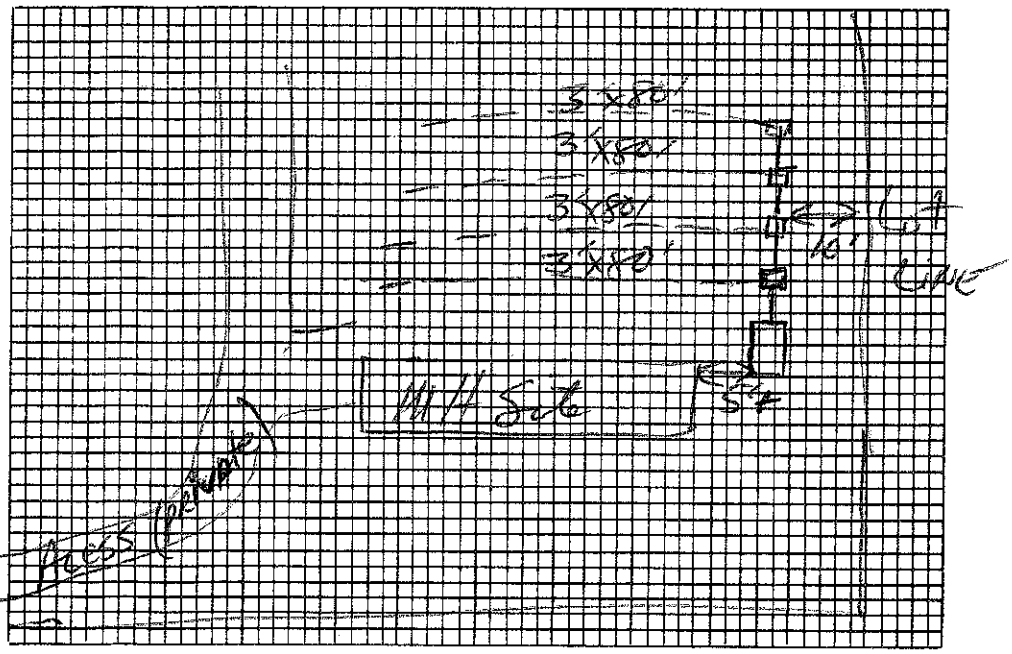
Percolation Rate 35-47

Topography ~10%

Depth to Water Table 47+

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 4

Sq. Ft. 960 Linear Ft. 320

Depth of Stone in Lines 12"

Water Supply: Individual (✓ Next door

Public ( )

Installed by Richard Abernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY ACH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 5/18/88

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

8587

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 Kevin Krug DATE 4/4/88 PERMIT NO. ______

PHONE: Business ______ Home 663-2779

LOCATION 150 W TR Robinson Rd. TR 1st dirt Rd. At end on left. S. R. No. ______

SUBDIVISION NAME Portion of Kevin Krug Prop. LOT NO. ______ 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 P.S. Yes (✓) No ( )

Lot Area 20,000 ft²

Character & Porosity of Soil Clayey

Percolation Rate .4

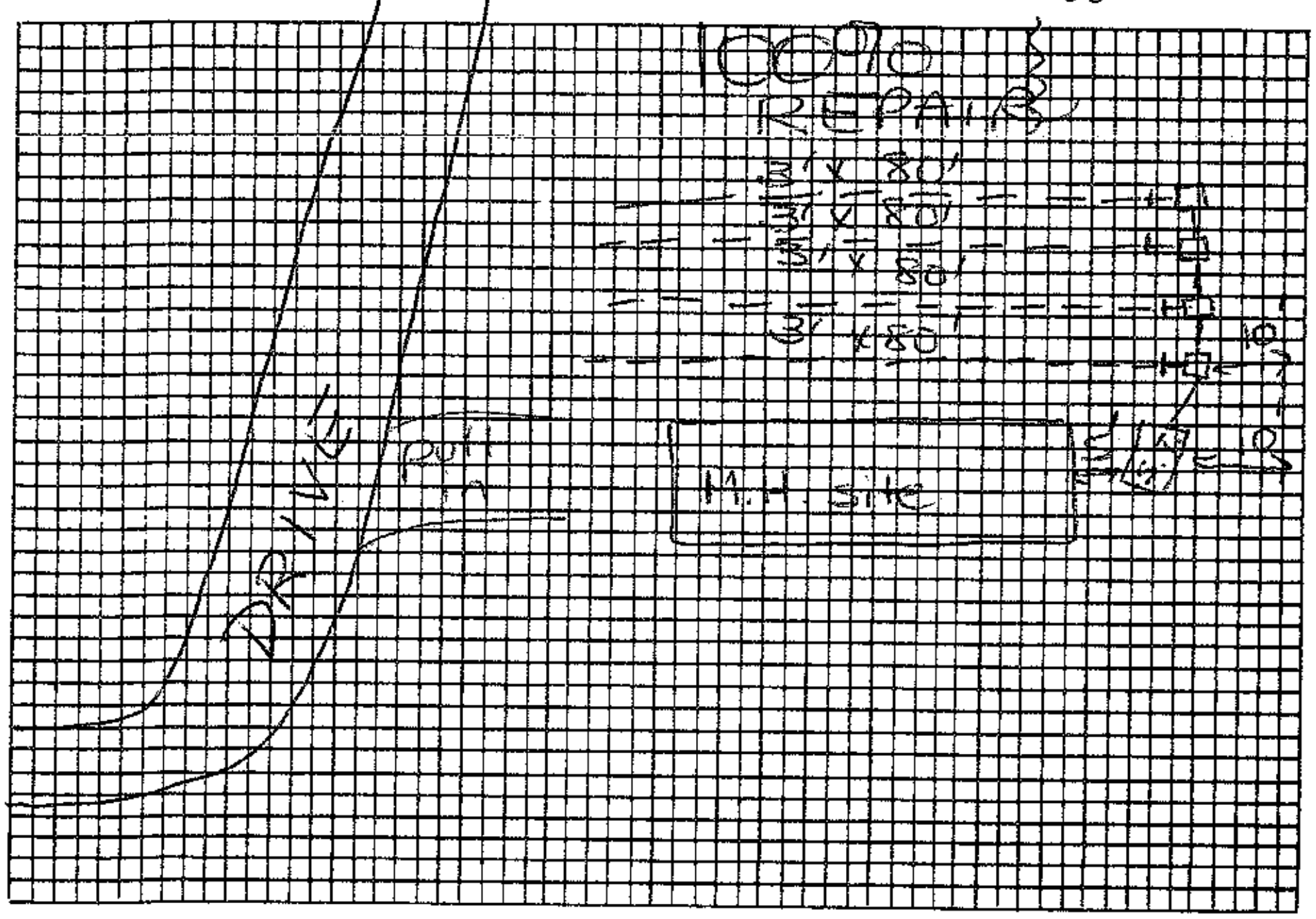
Topography 6-10%

Depth to Water Table 4'+

Rock or other impervious formations none observed

existing ravine (to be modified)

______ Basement with Plumbing ______ Basement without Plumbing ✓ No Basement



Plot of System NOT TO SCALE

Size of Tank 1000 Gals.

Nitrification Field: 4

No. of Lines 4

Sq. Ft. 1280 Linear Ft. 320

Depth of Stone in Lines 12"

Water Supply: Individual (✓) next door

Public ( )

Installed by ______

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

Signed: Kevin M. Krug

IMPROVEMENTS PERMIT BY Andre C. Rein

COMMENTS: Set tank and plumb to a series of properly installed drop boxes. Lines will be shallow (30") and on contour.

CERTIFICATE OF COMPLETION BY ______ DATE ______

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