4:30

10687

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 Dwight Sherrill DATE Nov. 16, '89 PERMIT NO. 2P-4A-123

PHONE: Business _____ Home _____

LOCATION 150 W. TR 1303 (Perth Rd.) TL 1428 (Normandy) ~1 mile on Right S. R. No. _____

SUBDIVISION NAME CL&T LAKE NORMAN LOT NO. 1095 SECTION OR BLOCK NO. 11

Future TEMPORARY

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

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Lot Area ~1 Ac.

Character & Porosity of Soil Clay

Percolation Rate 2 @ 35 / 2 @ 60

Topography 4%

Depth to Water Table 4' + more obs.

Rock or other impervious formations _____

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

1250 P.T.

Size of Tank 1250 Gals.

Nitrification Field:

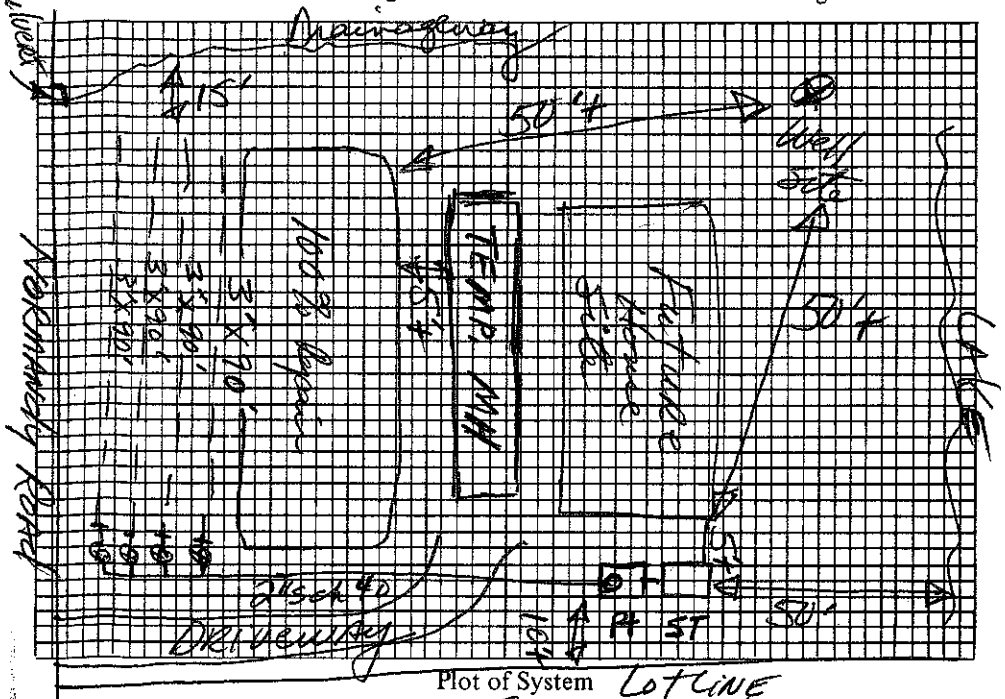
No. of Lines 4

Sq. Ft. 1080 Linear Ft. 360

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )



Installed by _____

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

Signed: Kim Ratterree

IMPROVEMENTS PERMIT BY David R. Hanson, R.S.

COMMENTS: Follow contour with drainfield. Maximum trench bottom depth of 36". Use 1½" Sch 40 laterals with one 5/32" hole drilled every 5 feet. Two feet pressure head/ditch. Pump Specs: 30 gal/min at approx. 20' TDH.

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