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5848

IREDELL COUNTY HEALTH DEPARTMENT

13301

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR John Masiello DATE Jan. 29, '92 PERMIT NO. 2-4-A-185

PHONE: Business _____ Home _____

LOCATION 1303 N TL 1428 (Normandy Road) TL Amelia Lane on left S.R. No. _____

SUBDIVISION NAME L.N. Airpark LOT NO. 28 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 ☐

Lot Area 1 Ac Lot Line

Soil Characteristics ps clay

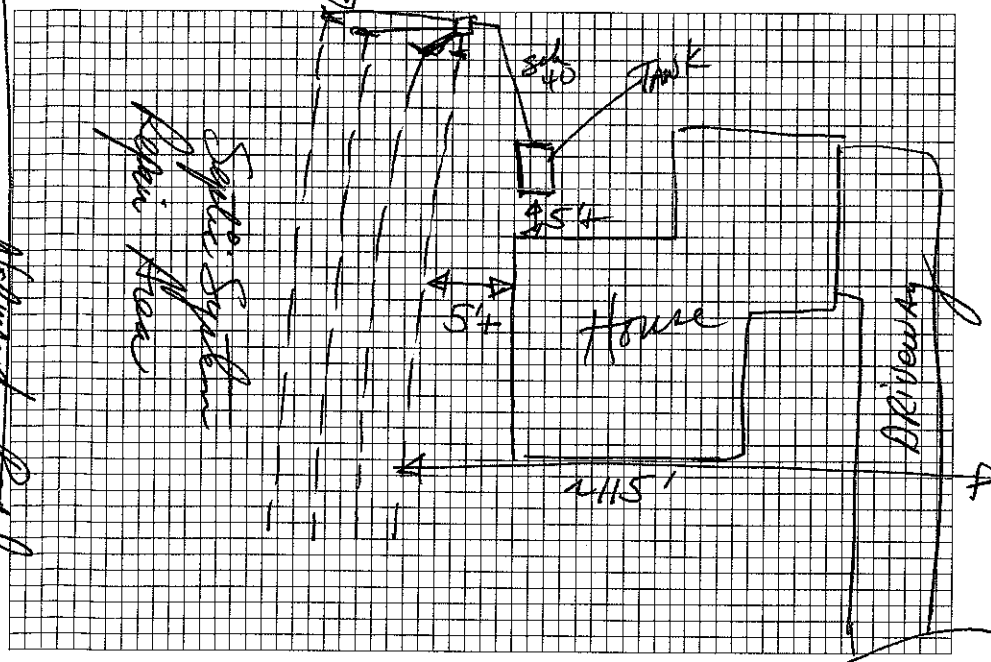
Application Rate ~.3

Topography ~4%

Depth to Water Table 6'+

Rock or other impervious formations some scattered rock

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement ✓ Crawl Space



Plot of System (Not to Scale)

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 1200 Linear Ft. 400

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐

Installed by Walter Baston

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY _____ Cul-d-Sac

COMMENTS _____

CERTIFICATE OF COMPLETION BY _____, RS DATE 1-29-92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold