4639 10 3280 Type 4 insped 2-13-2003

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 Terry & Rose Dorton DATE 11/10/88 PERMIT NO. 170

PHONE: Business 116 Quail Ln Home

LOCATION 150 W TR Perth TL Fern Hill Ch. Rd. TR Periwinkle TR Quail Lane at end S. R. No.

SUBDIVISION NAME C L and T LOT NO. 146 SECTION OR BLOCK NO. 15

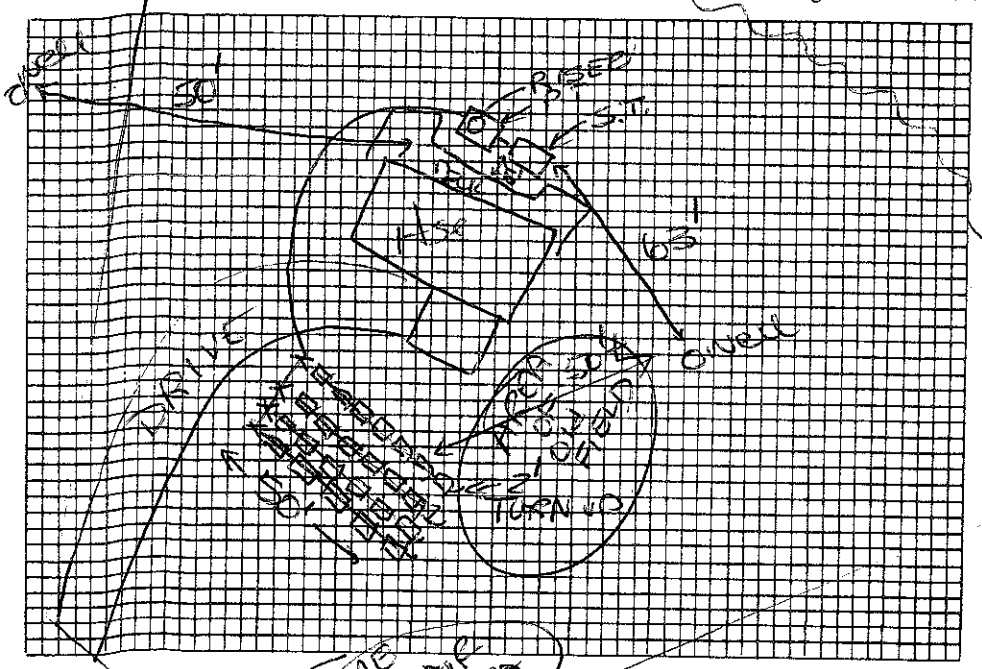
116 Quail ~~Run~~ Ln.

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

No. Bedrooms 3	No. Bathrooms 3 1/2			Character & Porosity of Soil	clayey
Garbage Disposal Unit	Yes ( )	No (✓)		Percolation Rate	.3
Auto. Dishwasher	Yes (✓)	No ( )		Topography	good
Auto. Wash. Machine	Yes (✓)	No ( )		Depth to Water Table	4'+
Site Suitable	Yes (✓)	No ( )		Rock or other impervious formations	none obs.

Lot Area

___ Basement with Plumbing ___ Basement ~~without~~ Plumbing ___ No Basement P.T. : 1000 gal



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. Linear Ft. 200 T&J
Depth of Stone in Lines panel syst

Water Supply: Individual (✓)
Public ( )

Installed by

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

Signed:

IMPROVEMENTS PERMIT BY

COMMENTS: Deck and proposed deck will be 5' off system as described to me this a.m.

CERTIFICATE OF COMPLETION BY Andrew C Price DATE 11/10/88

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