4646-09-2814

12988

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 R Macleod DATE 8/7/91 PERMIT NO. 2K-F-A-34

PHONE: Business _____ Home _____

LOCATION Fairstead Estates, Brawley School, TL into Fairstead, TR 1st. road, 4th lot on (L) before next intersection S. R. No. _____

SUBDIVISION NAME Fairstead LOT NO. 34 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 Yes (✓) No ( )

Lot Area 20,000 FT²

Character & Porosity of Soil clay (of, os) P

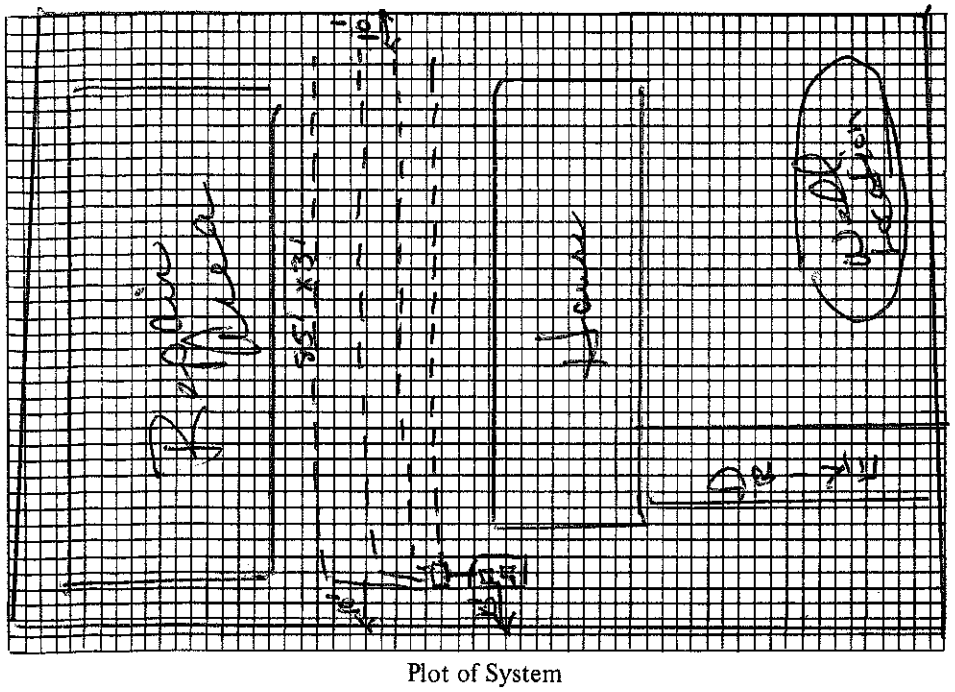
Percolation Rate .35

Topography 2%

Depth to Water Table >48"

Rock or other impervious formations None encountered

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4 (L) 85'x3'

Sq. Ft. 1028 Linear Ft. 340

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by R Macleod

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS DATE 8/7/91

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