10:00

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 William Burnette DATE Jan 29, '87 PERMIT NO. 25

PHONE: Business _____ Home _____

LOCATION 1109 TR 1191 (Ponderosa) Bear left at forks 1/4 mile on left S. R. No. _____

SUBDIVISION NAME Bonanza LOT NO. 38 SECTION OR BLOCK NO. _____

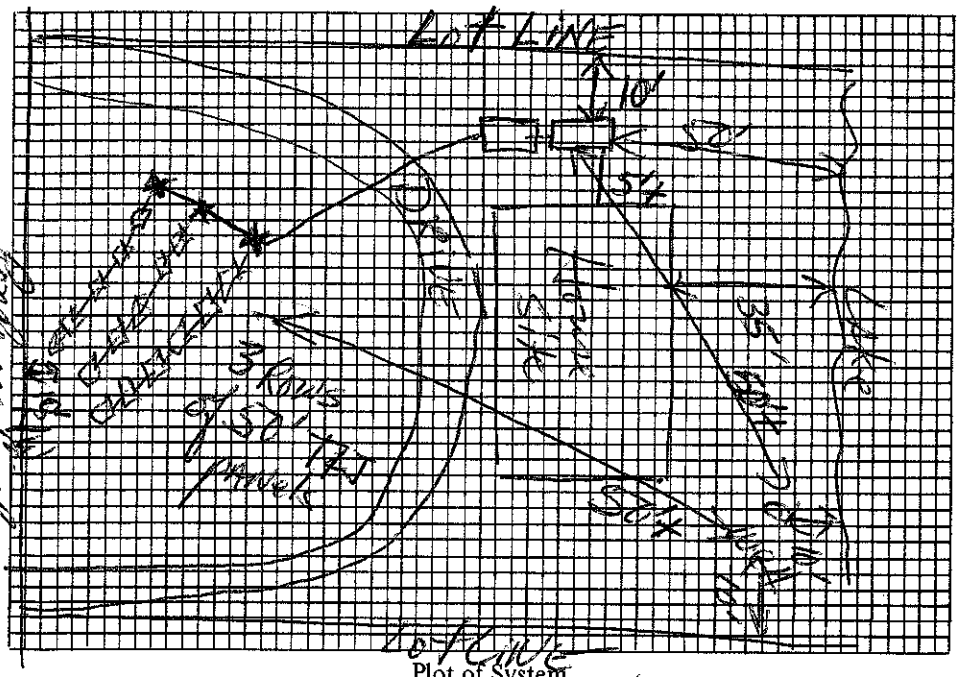
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2-3
Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area Existing ~ 20000 ft²

Character & Porosity of Soil shallow clay
Percolation Rate 4
Topography 5-10%
Depth to Water Table 34
Rock or other impervious formations none obs.

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

1250 gal pump tank w/out Baffle



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3-4
Sq. Ft. _____ Linear Ft. 150'ea
Depth of Stone in Lines 16" to bt panels
Water Supply: Individual (✓) Public ( )

Installed by _____

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

X Signed: Ray Beam

IMPROVEMENTS PERMIT BY Mark R. Hinson, R.S.

COMMENTS: Drainfield must be put in shallow. Pressure dose panels according to specs as follows: 2-5/32" holes every 5' at 4 & 8 o'clock positions; 2' of head/ditch.

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