4646269284

IREDELL COUNTY HEALTH DEPARTMENT # ~~4626~~

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Erwin Tumpkin DATE 6-19-81 PERMIT NO. 185

PHONE: Business _____ Home _____

LOCATION 1109 TR 1190 2nd lot on left past lot. w/ 1209

SUBDIVISION NAME Moorland Estates LOT NO. 3 SECTION OR BLOCK NO. _____ S. R. No. _____

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

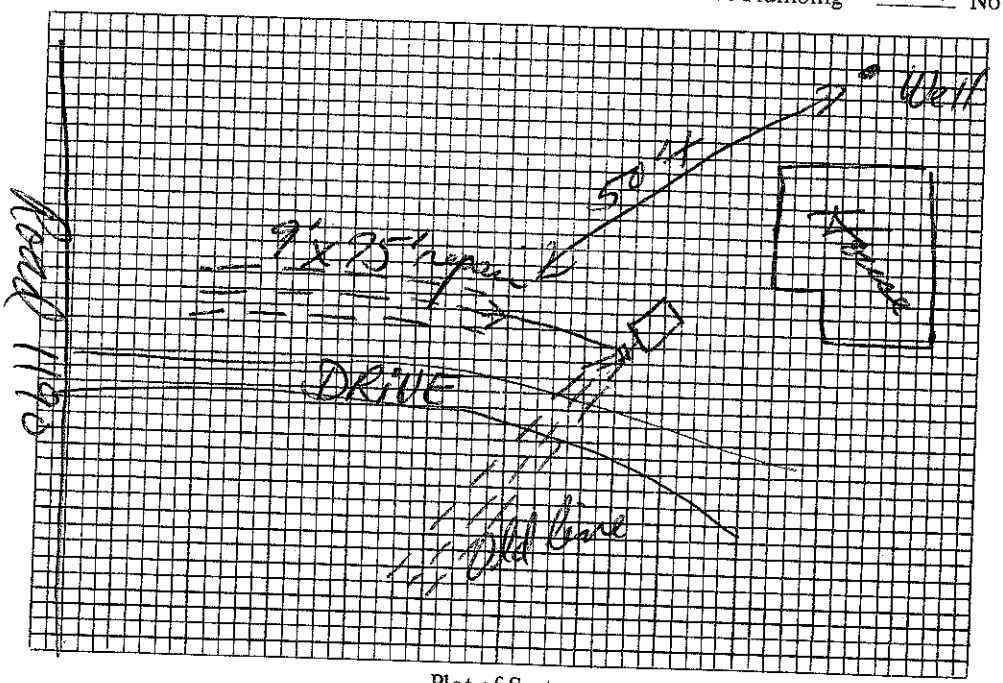
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes ( )	No (✓)	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Suitable	Yes (✓)	No ( )	

Lot Area ½ - ¾ AC.

Character & Porosity of Soil: Clay loam
Percolation Rate: 80
Topography: 2-4%
Depth to Water Table: sink.
Rock or other impervious formations: none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 575 Linear Ft. 225
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )

Installed by Ross Perkins

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Hinson DATE 6-1981

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