7904

4646372221

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 David L. SUMMERS DATE 2/9/88 PERMIT NO. _____

PHONE: Business _____ Home 664-3011

LOCATION 150 W TL 1109 TR Sundown Last house on left b/f pavement ends S. R. No. _____

SUBDIVISION NAME Idlewood Harbor LOT NO. 119 SECTION OR BLOCK NO. _____

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

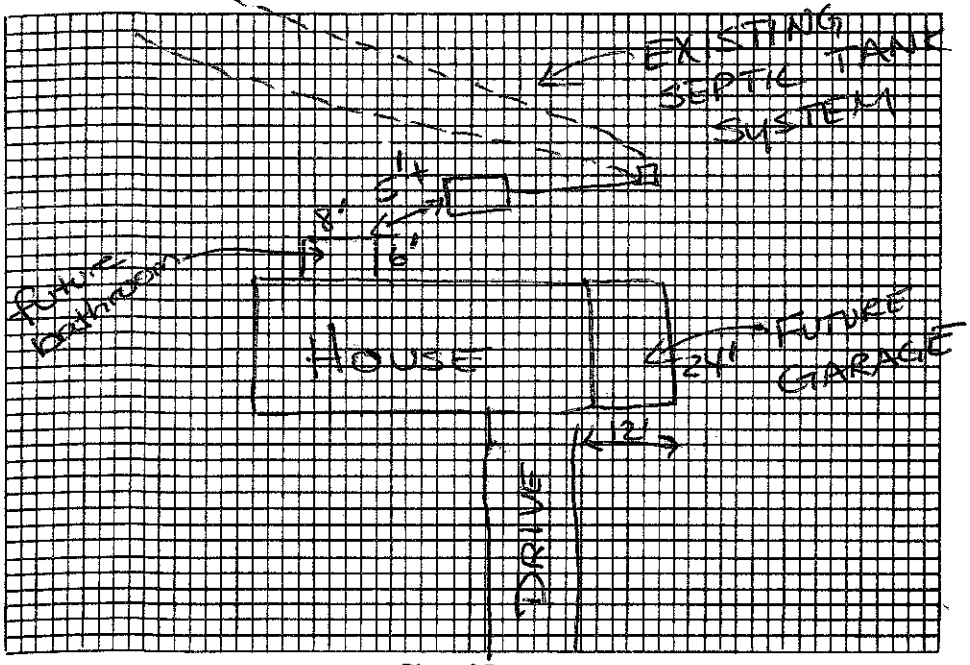
No. Bedrooms 3 No. Bathrooms 1

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

Character & Porosity of Soil existing system
Percolation Rate installed 3/23/84 C.W. Brewer.
Topography
Depth to Water Table
Rock or other impervious formations

Lot Area 1.00 Acre

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank exist. 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 780 Linear Ft. 260
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

info from completion. 3-23-84 Brewer

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: System is >5' from new additions. System shows no sign of failure at this time.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Andrea C. Pierce 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