08267

IREDELL COUNTY HEALTH DEPARTMENT 9104 4646 88-8793

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

OWNER OR CONTRACTOR Mary Misenheimer DATE Feb. 13, 89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 S. TR 1100 (Brawley Sch. Rd.) TL Sumfield TR Clyde's Lane at end on left S. R. No. _____

SUBDIVISION NAME Clyde's Lane LOT NO. 12 SECTION OR BLOCK NO. _____

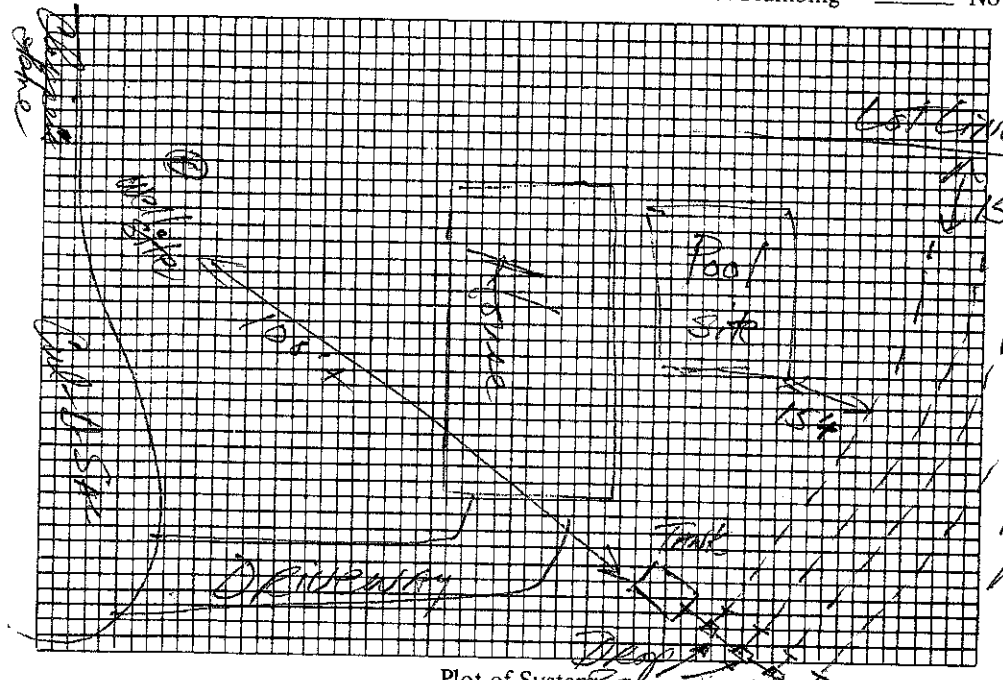
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site ~~Suitable~~ PS Yes (✓) No ( )
Lot Area 2 1/4 Ac.

Character & Porosity of Soil clay
Percolation Rate n. 3
Topography 10-15%
Depth to Water Table 4ft
Rock or other impervious formations none obs.

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by J J Erwin

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

Signed: _____

Repair Area 507 LAKE

IMPROVEMENTS PERMIT BY DRH

COMMENTS: Lot Line

CERTIFICATE OF COMPLETION BY D Henson, RS DATE 2-13-89

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