IREDELL COUNTY HEALTH DEPARTMENT

10779

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

OWNER OR CONTRACTOR Robert E. Leonard DATE July 31, '90 PERMIT NO. 2J-11-A-16

PHONE: Business _____ Home _____

LOCATION 21 S. TR 1100 (Brawley Sch. Rd.) TL Sunfish TL Clippers Lane 2nd Lot on Right S. R. No. _____

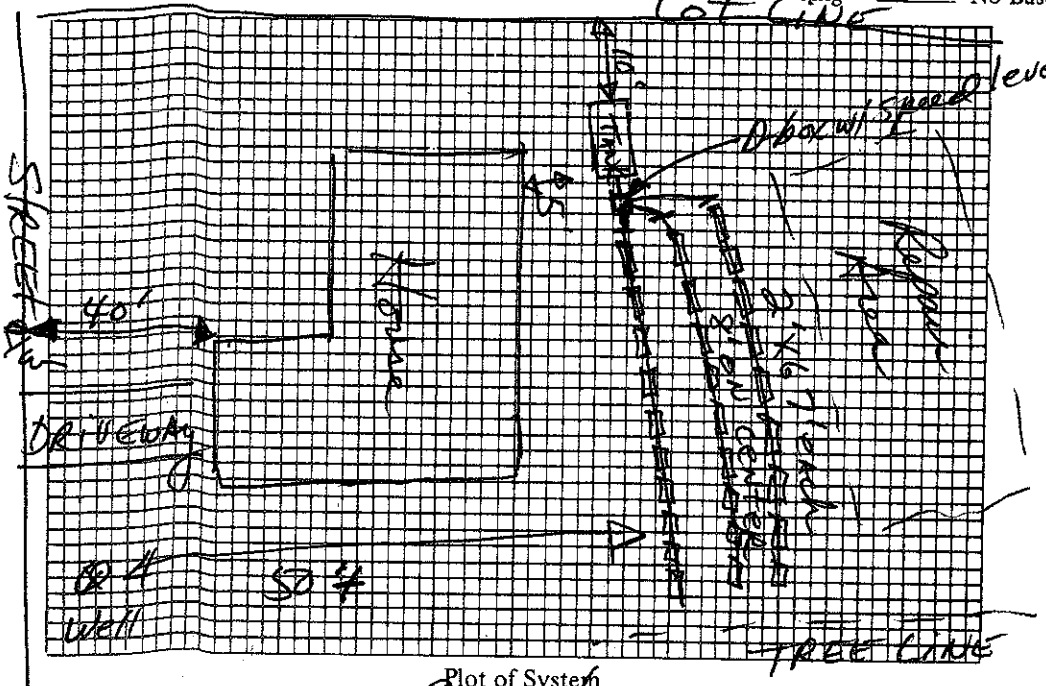
SUBDIVISION NAME Clippers Run LOT NO. 16 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil		25 clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate		.3 - 1.4
Auto. Wash. Machine	Yes (✓)	No ( )	Topography		4-8%
Site Suitable PS	Yes (✓)	No ( )	Depth to Water Table		4'+
Lot Area 1 Ac. +			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 3
Sq. Ft. _____ Linear Ft. 200'
Depth of Stone in Lines 16" Top

Water Supply: Individual ( ) panels gravity flow
Public ( )

Installed by _____

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

Signed: Robert E. Leonard

IMPROVEMENTS PERMIT BY Jack R. Smith HS Lot Line

COMMENTS: Follow contour with drainfield. Maximum trench bottom of 34".

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