4647327183

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 Jerry W. Hacker DATE 12-31-86 PERMIT NO. 657

PHONE: Business _____ Home _____

LOCATION 1109 on left just past Williamson Chapel Church

S. R. No. _____

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

Future Temporary

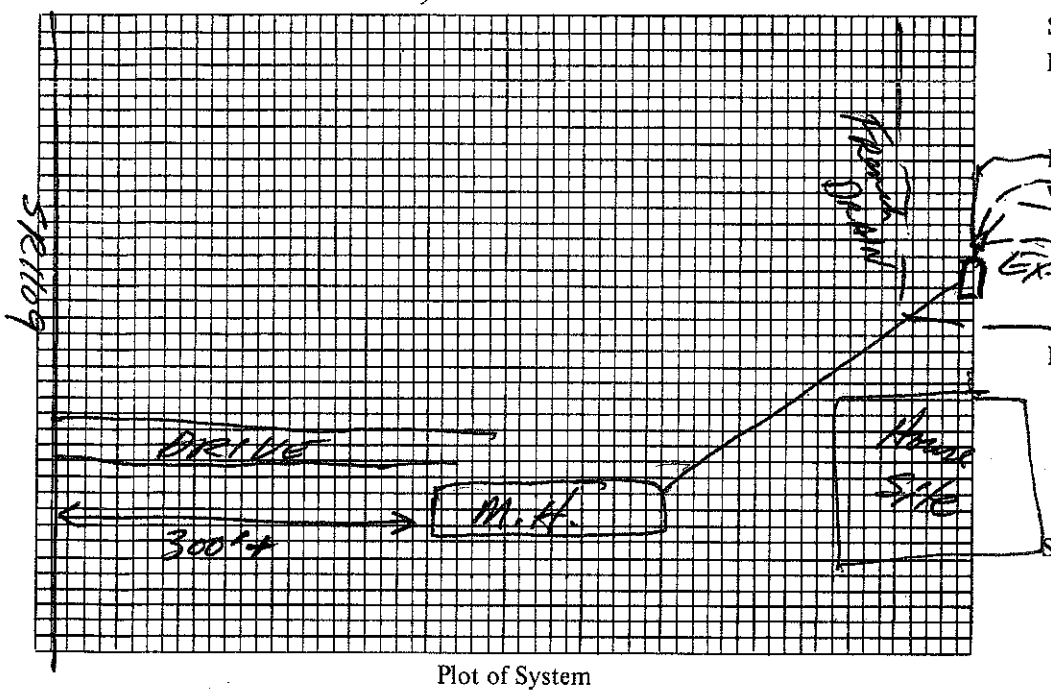
House (✓) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	5-40
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	8-10%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	2'+
			Rock or other impervious formations	High Water Table - "French" Drain installed

Lot Area 3.65 Ac

✓ Basement with Plumbing (House) ____ Basement without Plumbing ✓ No Basement (Mobile Home)



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 900 Linear Ft. 800
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by J. Beam

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system OK for use by Mobile Home until house is completed. System was installed 12-1-86

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: JK Jones R.S. DATE 12-31-86

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