4647-91-4729

12681

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 Raymond Moore DATE 10/1/91 PERMIT NO. 2J-17-A-4

PHONE: Business _____ Home 895-5120

LOCATION Talbert Rd, TL off 150 W, last brick house on (L)

S. R. No. 1116

SUBDIVISION NAME Forest Hills LOT NO. 4 SECTION OR BLOCK 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 20,000 FT²

Character & Porosity of Soil P suc / wk structure

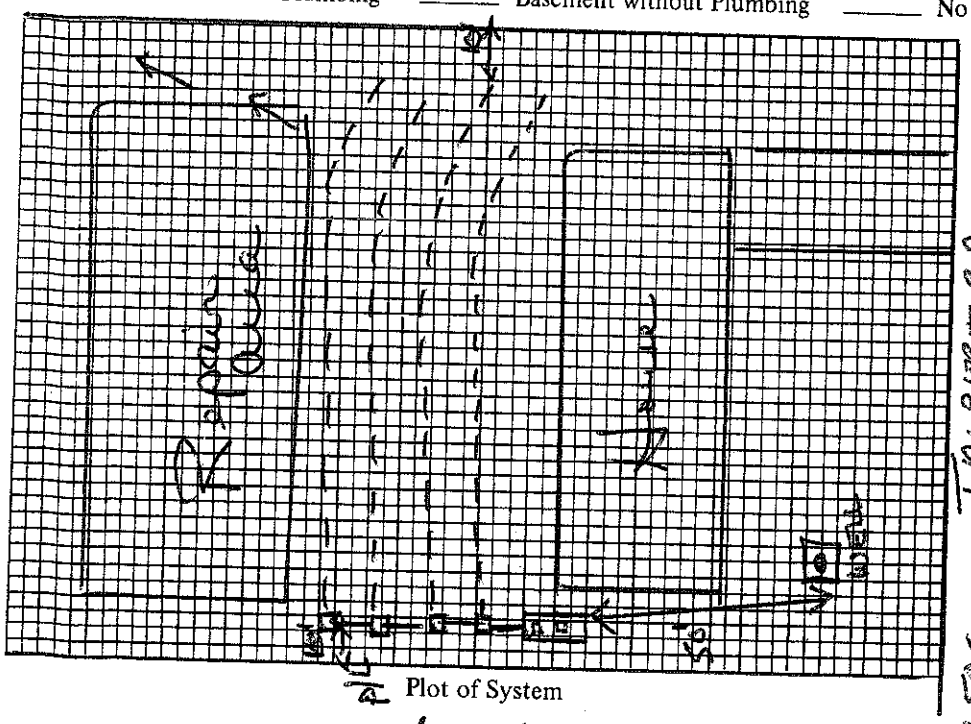
Percolation Rate 3

Topography 2-4%

Depth to Water Table >48"

Rock or other impervious formations Ven gran -40-42"

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4 @ 90' x 3'

Sq. Ft. 1080 Linear Ft. 360

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Dennis Gallahan

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

Signed: _____

IMPROVEMENTS PERMIT BY AWS

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 10/1/91

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