663-7965

IREDELL COUNTY HEALTH DEPARTMENT

4648-06-3143

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

OWNER OR CONTRACTOR Mike Campbell DATE Oct 26, 87 PERMIT NO. ____

PHONE: Business ____ Home ____

LOCATION 2 N. R 1302 (Cornelius Rd.) R Morgan Lane 1/8 mile on Rt

SUBDIVISION NAME Pirates Cove ____ S. R. No. ____

LOT NO. 25 SECTION OR BLOCK NO. ____

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

No. Bedrooms 4 No. Bathrooms 4 1/2

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 3/4 Ac

Character & Porosity of Soil silty clay

Percolation Rate 2.3

Topography 6-8%

Depth to Water Table 44

Rock or other impervious formations none obs.

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

1500 gal pump tank

Size of Tank 1500 Gals.

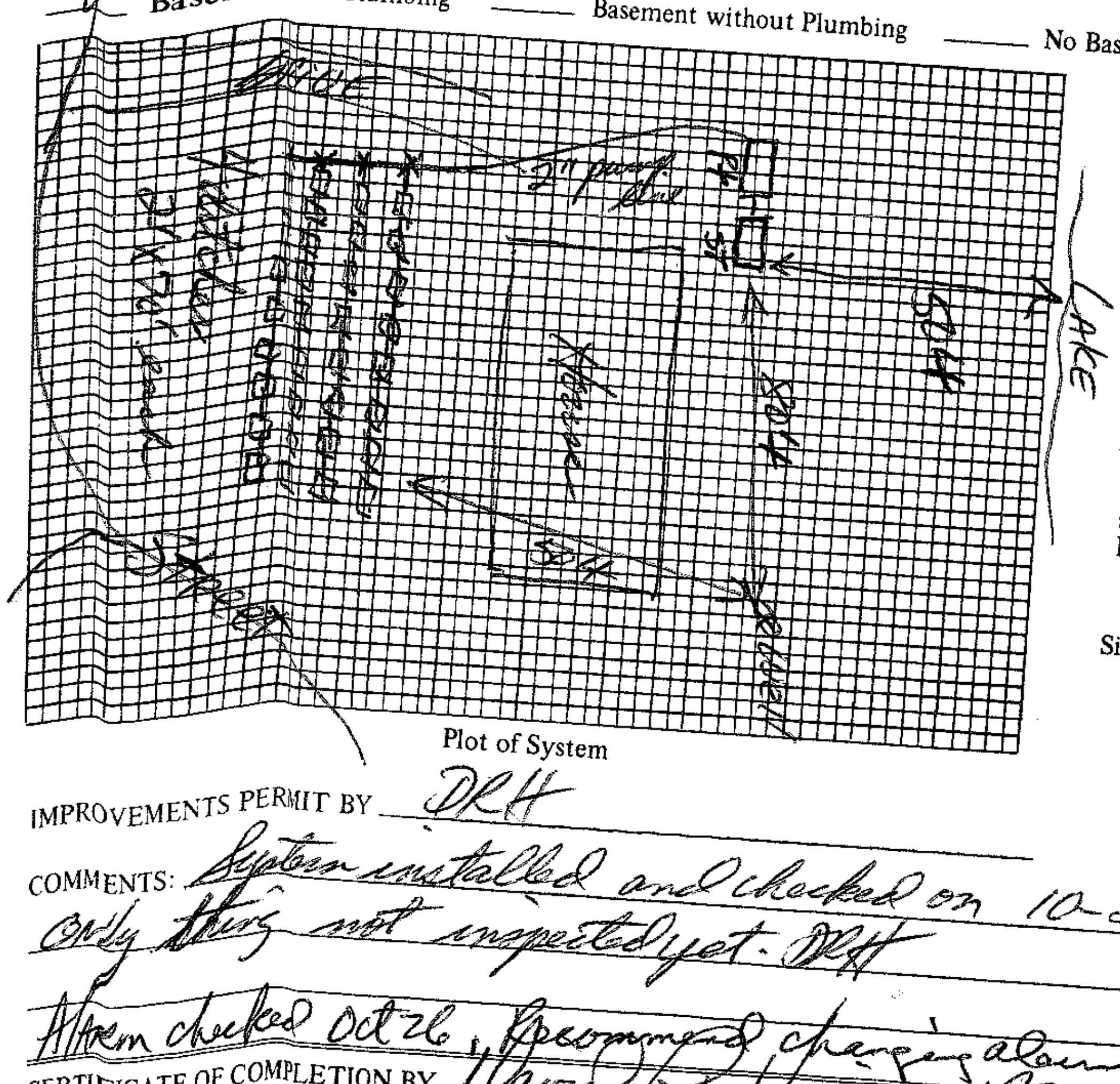
Nitrification Field:

No. of Lines 4

Sq. Ft. ____ Linear Ft. 280' of

Depth of Stone in Lines 16" T&J panels pressure-dosed

Water Supply: Individual ( ) Public ( )



Plot of System

Installed by Rowan Septic Tank

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

Signed: ____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: System installed and checked on 10-20-87. Alarm is only thing not inspected yet. DRH

Alarm checked Oct 26, Recommend changing alarm location

CERTIFICATE OF COMPLETION BY David R. Henson, R.S.

EXISTING SYSTEM CHECKED BY: ____ DATE Oct 26, 1987

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