07841

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 Gary Graham DATE Oct. 19, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W TR Bluefield Rd. TL Beaufort Rd (1395) TL into Beaufort Bay ~1/8 mile on Rt. S. R. No. _____

SUBDIVISION NAME Beaufort Bay LOT NO. 849 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 3½

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~/S Yes (✓) No ( )

Character & Porosity of Soil clay

Percolation Rate 2, 3

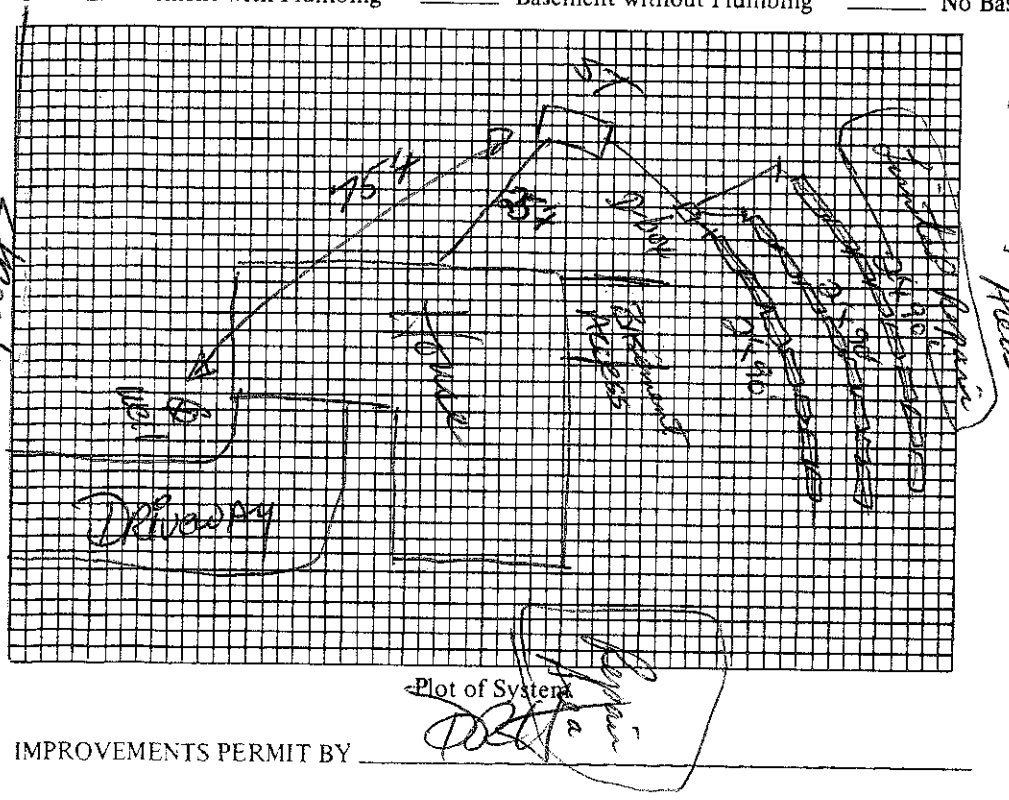
Topography 4-6%

Depth to Water Table 3½'+

Rock or other impervious formations none obs.

Lot Area 1 Ac +

_____ Basement with Plumbing ✓ PARTIAL Basement without Plumbing _____ No Basement



Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. _____ Linear Ft. 270 '

Depth of Stone in Lines 16" T&J

Water Supply: Individual (✓) private well

Public ( )

Installed by F J Ervin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D R Ervin, RS DATE 10-19-88

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