06753

IREDELL COUNTY HEALTH DEPARTMENT 4649069431

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

OWNER OR CONTRACTOR Odell Stamey DATE Nov. 13, '87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W TR 1303 (Peeth) TR ~¼ mile before jct w/ 1300 (Fern Hill) on Rt S. R. No. _____

SUBDIVISION NAME S&S Properties LOT NO. 7 SECTION OR BLOCK NO. _____

PW:

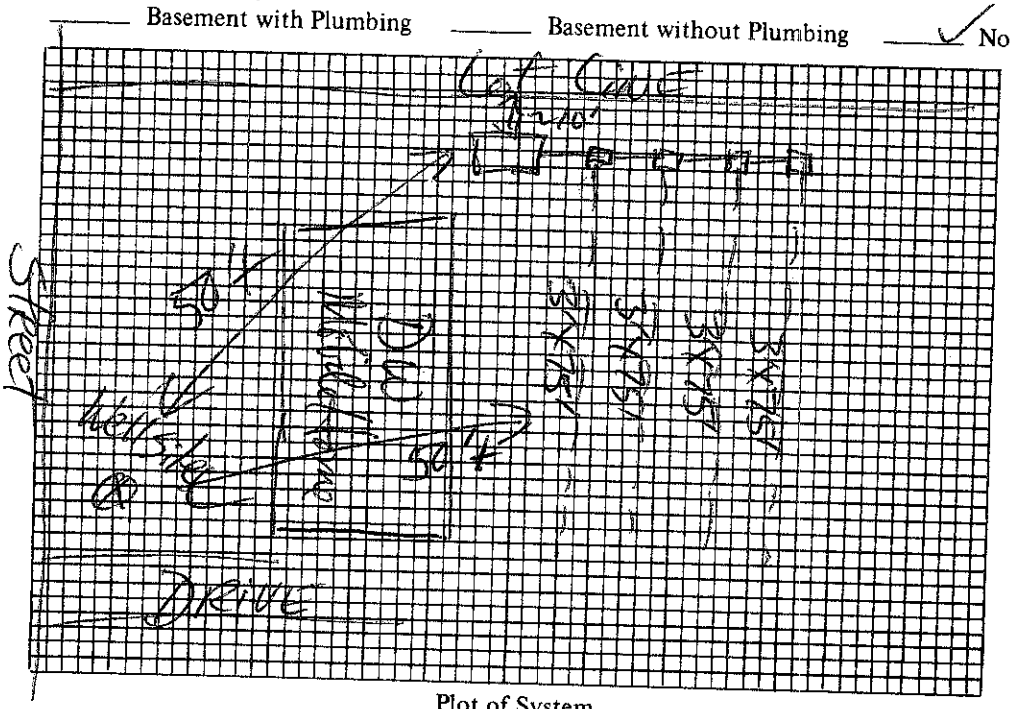
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	shallow clay	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	2.4	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	15-25%	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4FT	
			Rock or other impervious formations	scattered rock	

Lot Area ~ 3/4 Ac

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 200 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Odell Boston

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

Signed: _____

IMPROVEMENTS PERMIT BY [signature]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature], R.S. DATE 11-13-87

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