4649 28 2693

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 Darrell Ramsey DATE 9-30-88 PERMIT NO. 419

PHONE: Business _____ Home _____

LOCATION 115-21N TL 1313 X TL 77 TL 1313 ~1mile TR 1477 .3mile on left

S. R. No. _____

SUBDIVISION NAME King Acres LOT NO. 42 SECTION OR BLOCK NO. _____

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

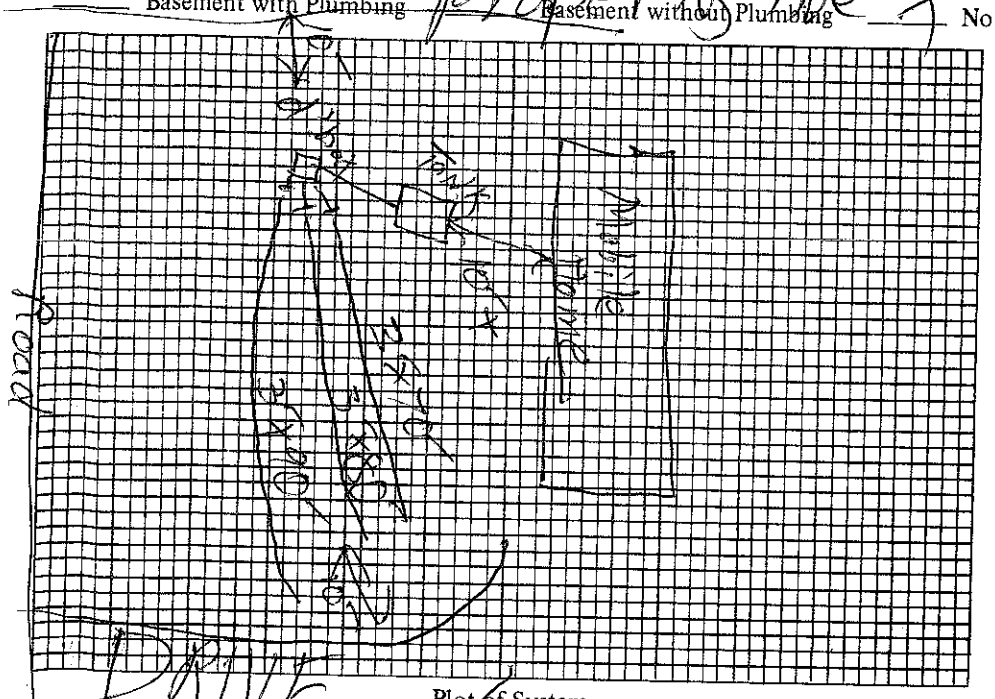
No. Bedrooms 2 No. Bathrooms 1 1/2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )

Lot Area 20,000 Sq Ft

Character & Porosity of Soil Clay
Percolation Rate 0.3 gal/ft²/day
Topography 2-8%
Depth to Water Table 4'+
Rock or other impervious formations None obs

_____ Basement with Plumbing Property line _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual ( ) public
Public (X) water

Installed by Chapin

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

Signed: _____

IMPROVEMENTS PERMIT BY FAC

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Charles K. Barnett DATE 9-30-88

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