4649765871

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 Dennis Humbie DATE 12/21/87 PERMIT NO. _____

PHONE: Business _____ Home 663-2220 John Craver

LOCATION 21N TL Flower House Loop TL Rankin Hill 2/3 mile on L. TL Thoroughbred TL Sorrel S. R. No. _____

SUBDIVISION NAME Palamino Park LOT NO. 61 SECTION OR BLOCK NO. _____

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

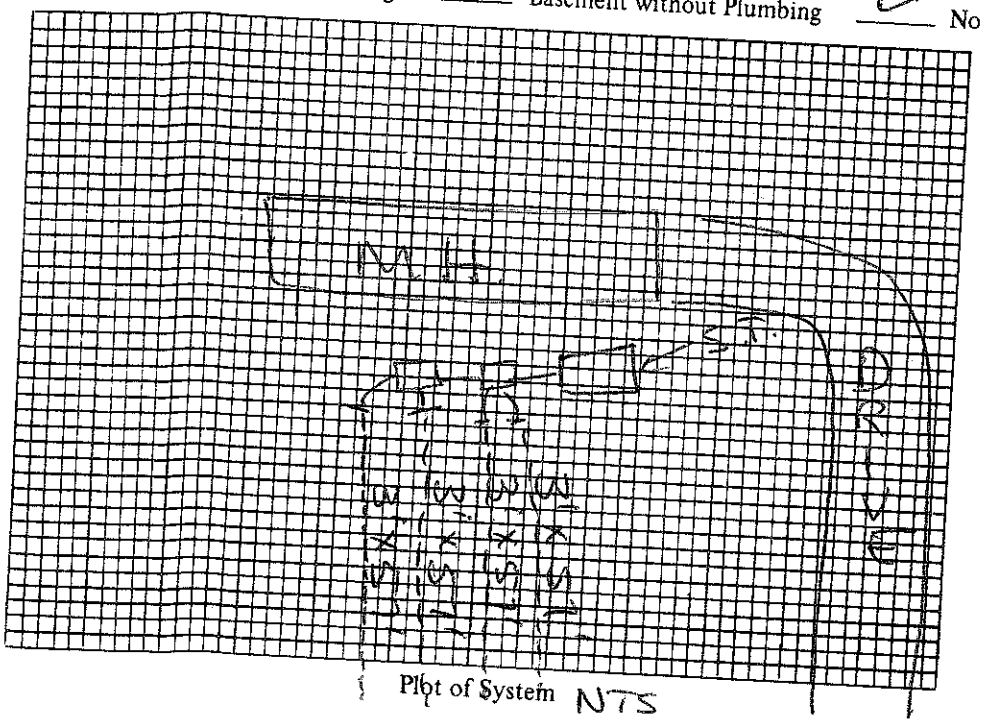
No. Bedrooms 2 No. Bathrooms 2

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

Lot Area 20000ft²

Character & Porosity of Soil Clayey
Percolation Rate ~35 spd/ft²
Topography <40%
Depth to Water Table 4'+
Rock or other impervious formations none observed

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System NTS

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 686 Linear Ft. 228
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by W. Potts

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: Recommend covering when dryer weather

CERTIFICATE OF COMPLETION BY Arlie C. Queen

EXISTING SYSTEM CHECKED BY: _____ DATE 12/21/87

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. _____ DATE _____

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