11780

4649-76-6148

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 John Blankenship DATE 8/6/90 PERMIT NO. 4E-3-A 6?

PHONE: Business _____ Home _____

LOCATION 21N TL Flowerhouse TL Rankin Hill On left

SUBDIVISION NAME Palomino Park LOT NO. 67+68 SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes ( ) No ( )

Character & Porosity of Soil Ps clay

Percolation Rate N e 35 spt 15+c

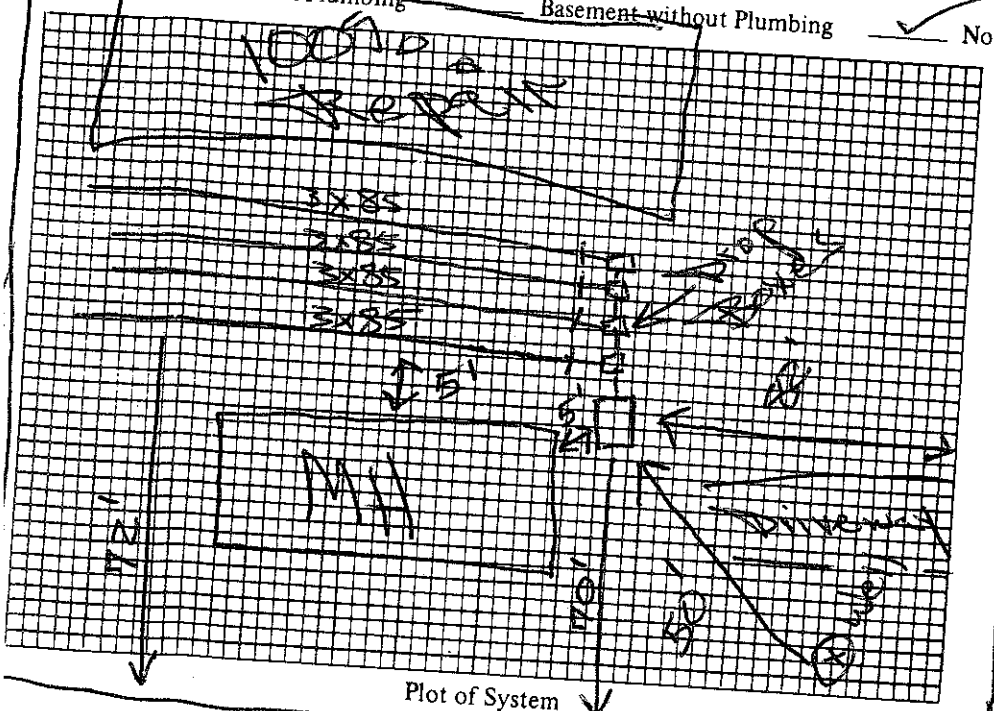
Topography S. 10% To +3'

Depth to Water Table _____

Rock or other impervious formations → Entrance none obs

Lot Area _____

Basement with Plumbing _____ Basement without Plumbing _____ No Basement ✓



Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 1020 Linear Ft. 340

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Darrell Dobson

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

Signed: _____

IMPROVEMENTS PERMIT BY Line

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Sam Bingham EHS DATE 8/6/90

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

11780

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 John Blankenship DATE 7/23/90 PERMIT NO. 4E-3-A-67+68

PHONE: Business _____ Home _____

LOCATION 21 N TL Flowerhouse TL Rankin Hill On left

SUBDIVISION NAME Palomino Park S. R. No. _____

LOT NO. 67+68 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash Machine Yes (✓) No ( )

Site Suitable Yes ( ) No ( )

Lot Area _____

Character & Porosity of Soil Clay

Percolation Rate W. 35 gpd/ft²

Topography 5.10% W

Depth to Water Table + 3'

Rock or other impervious formations none obs. <

_____ Basement with Plumbing 0 1 Basement without Plumbing ✓ No Basement

Size of Tank 1000 Gals.

Nitrification Field:

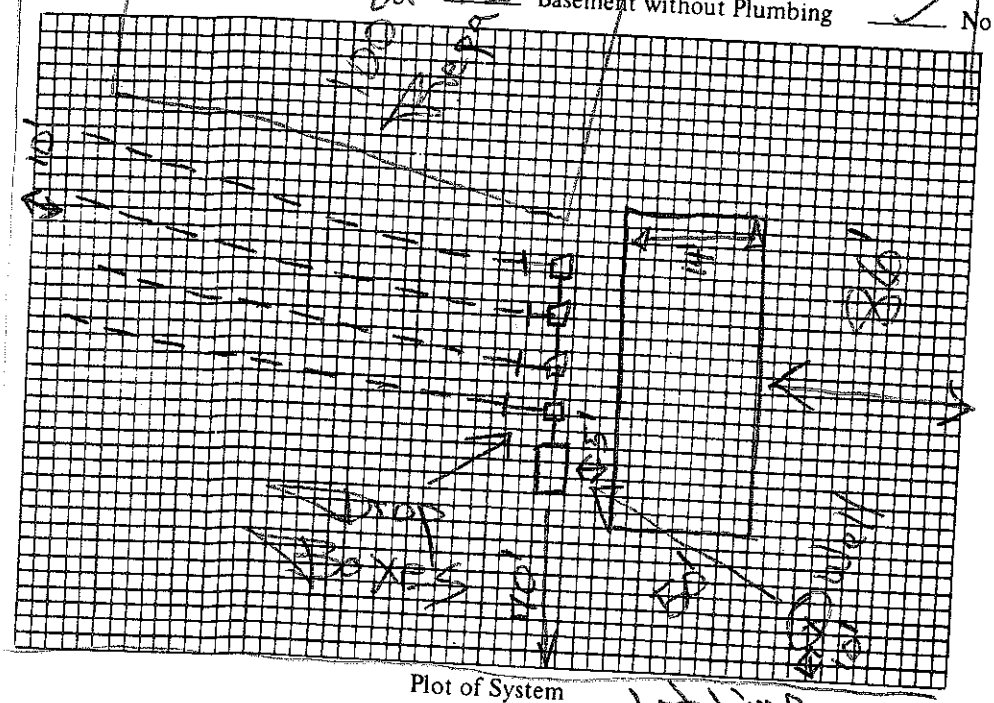
No. of Lines 4

Sq. Ft. _____ Linear Ft. 340

Depth of Stone in Lines _____

Water Supply: Individual (✓)

Public ( )



Plot of System

Installed by _____

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

Signed: John Blankenship

IMPROVEMENTS PERMIT BY Sam Ingram 6/18

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

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