4649-85-0946

# IREDELL COUNTY HEALTH DEPARTMENT

12304

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

OWNER OR CONTRACTOR Larry Miller DATE Jan. 9, '91 PERMIT NO. 4E-3-A-7

PHONE: Business _____ Home _____

LOCATION 115-21 N. TL 1312 (Flower House Loop) TL 1311 (Rankin Hilland Rd) TL into Palomino Park on Right S. R. No. _____

SUBDIVISION NAME Palomino Park LOT NO. 7 SECTION OR BLOCK NO. _____

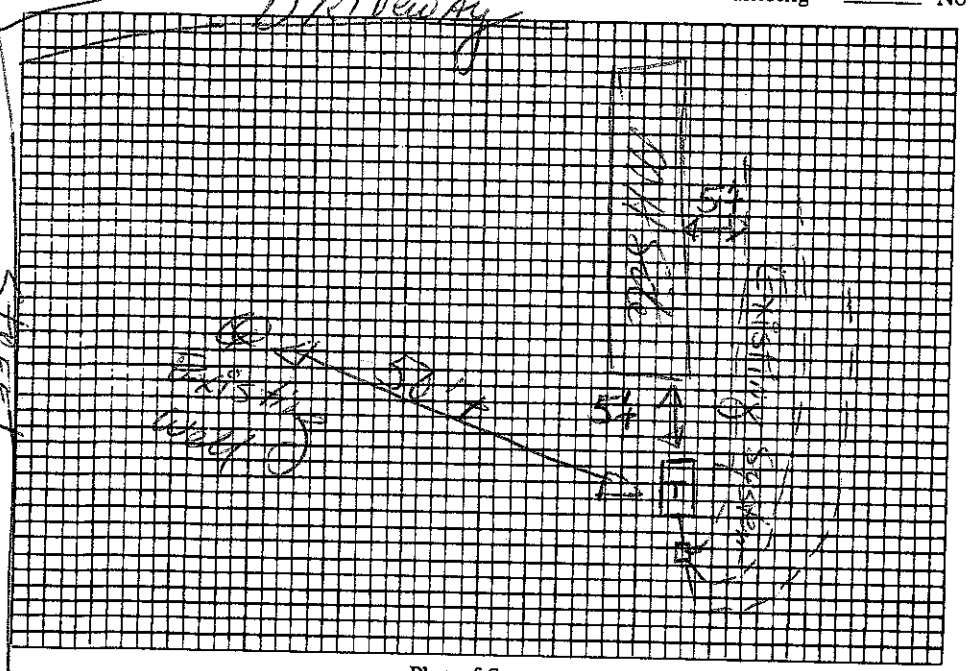
House ( ) Mobile Home (✓) Business ( ) Other replacing M.H.

No. Bedrooms 3 No. Bathrooms 2

| | | | |
|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No (✓) | Character & Porosity of Soil |
| Auto. Dishwasher | Yes (✓) | No ( ) | Percolation Rate |
| Auto. Wash. Machine | Yes (✓) | No ( ) | Topography |
| Site Suitable | Yes ( ) | No ( ) | Depth to Water Table |
| | | | Rock or other impervious formations |

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement




Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft _____
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system showing no sign of malfunction at time of inspection.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Darrell R. Hinson, EHT DATE Jan 9 '91

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