4649-86-3651

IREDELL COUNTY HEALTH DEPARTMENT

11476 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Gary Stinson DATE 8/9/90 PERMIT NO. 4E-3-A-12

PHONE: Business _____ Home _____

LOCATION 2 N TL Flowerhouse, TL Rankin Hill TL Palomino Park 3rd trailer on right S. R. No. _____

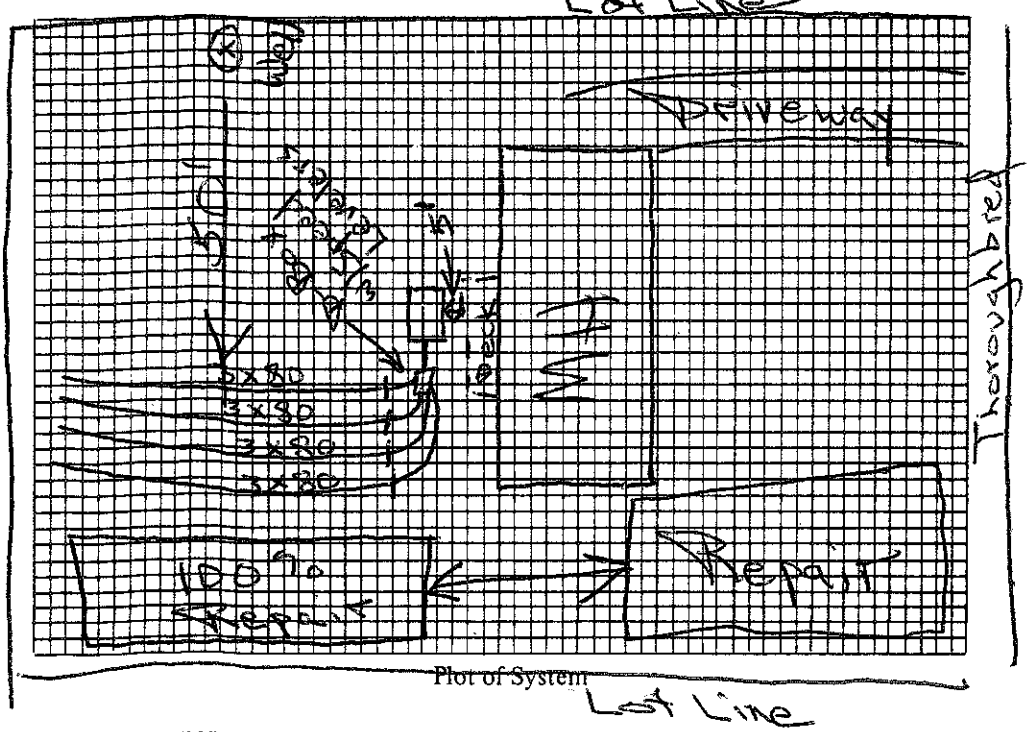
SUBDIVISION NAME Palomino Park LOT NO. 12 SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other Permit set up for future 3 Bdr

No. Bedrooms 2	No. Bathrooms 1			Character & Porosity of Soil	clayey
Garbage Disposal Unit	Yes ( )	No (✓)		Percolation Rate	No 4
Auto. Dishwasher	Yes ( )	No (✓)		Topography	1-5 %
Auto. Wash. Machine	Yes ( )	No (✓)		Depth to Water Table	+ 31
Site Suitable PS	Yes (✓)	No ( )		Rock or other impervious formations	none obs

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 960' Linear Ft. 320'
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Darrell Dobison

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well not installed at time of final.

CERTIFICATE OF COMPLETION BY Sam Ingram EHS DATE 8/9/90

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