IREDELL COUNTY HEALTH DEPARTMENT

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

OR CONTRACTOR Timothy Pritchard DATE Aug 23, '89 PERMIT NO. 4E-3A-20

Business _____ Home _____

ION 15-21N TL 312 (Flower House Coop) TL 1311 (Rankin Hill Rd.)
2 into Palomino Park on Right S. R. No. _____

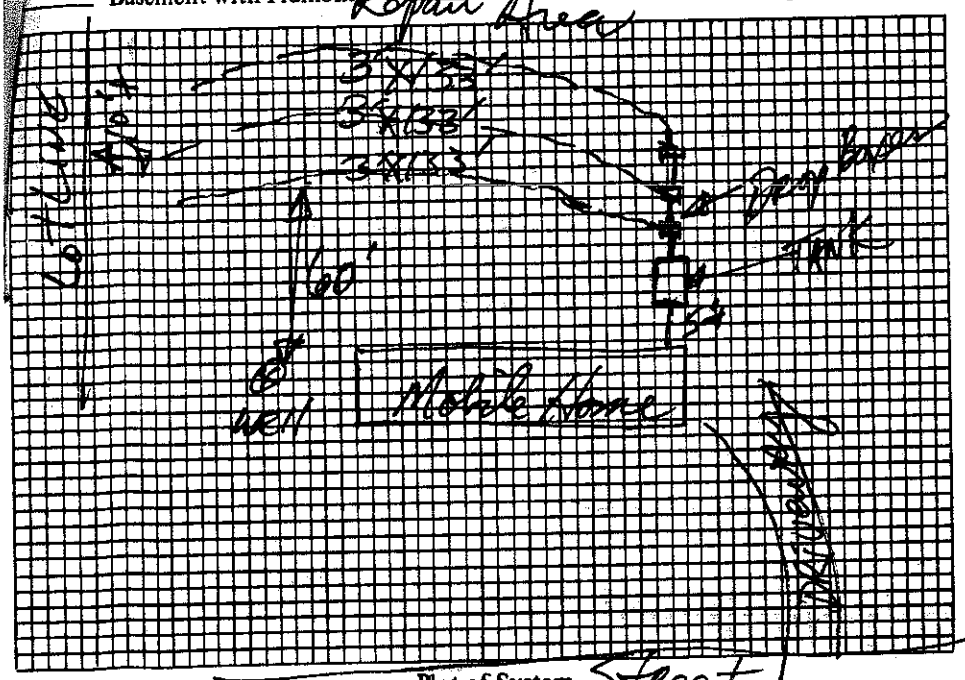
VISION NAME Palomino Park LOT NO. 20 & 21 SECTION OR BLOCK NO. _____

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

Bedrooms 3 No. Bathrooms 2
age Disposal Unit Yes ( ) No (✓)
o. Dishwasher Yes (✓) No ( )
to. Wash. Machine Yes (✓) No ( )
e ~~Suitable~~ PS Yes (✓) No ( )
ot Area ~ 2.74c

Character & Porosity of Soil clay
Percolation Rate ~3
Topography ~6%
Depth to Water Table 4'+
Rock or other impervious formations none obs.

___ Basement with Plumbing Repair Area ___ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by D. Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: Upper 2 lines deeper in spots than specified on imp. permit but soil looked OK there. DRH

CERTIFICATE OF COMPLETION BY DR Hinson, RS DATE 8-23-89

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