4649880241

IREDELL COUNTY HEALTH DEPARTMENT

8458

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

OWNER OR CONTRACTOR Dennis Karriker DATE 8/18/88 PERMIT NO.

PHONE: Business Home 528-4567

LOCATION 21 N TL Flowerhouse Loop TL Rankin Hill. On left ~ 1/4 mile. S. R. No.

SUBDIVISION NAME LOT NO. 66 SECTION OR BLOCK NO.

House ( ) Mobile Home ( ) Business ( ) Other

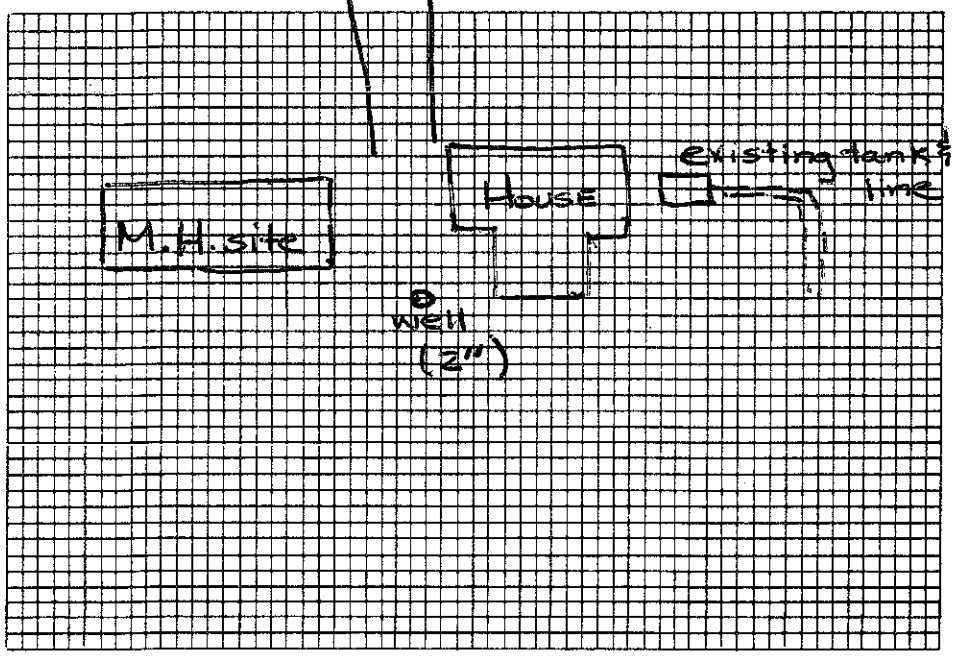
4 BR going to 3 BR

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	existing	
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 6.3 ACRES RANKIN HILL RD.

~~Basement with Plumbing~~ Basement without Plumbing ✓ No Basement



Plot of System NOT TO SCALE

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: No sign of sewage seen at ~~sign~~ time of inspection

CERTIFICATE OF COMPLETION BY DATE

EXISTING SYSTEM CHECKED BY: Andrea C. Owen DATE 18 Aug. 88

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