07824

4654-86-5588

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 Ronald P. Fink DATE June 13, 88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115 S. TR 1138 (Presbyterian Rd.) TR into Davidson Downs (2nd entrance) Bear Rt on Rt at corner of Canterbury & Devonshire S. R. No. _____

SUBDIVISION NAME Davidson Downs LOT NO. 97+98 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Lot Area ~1 Ac

Character & Porosity of Soil clay

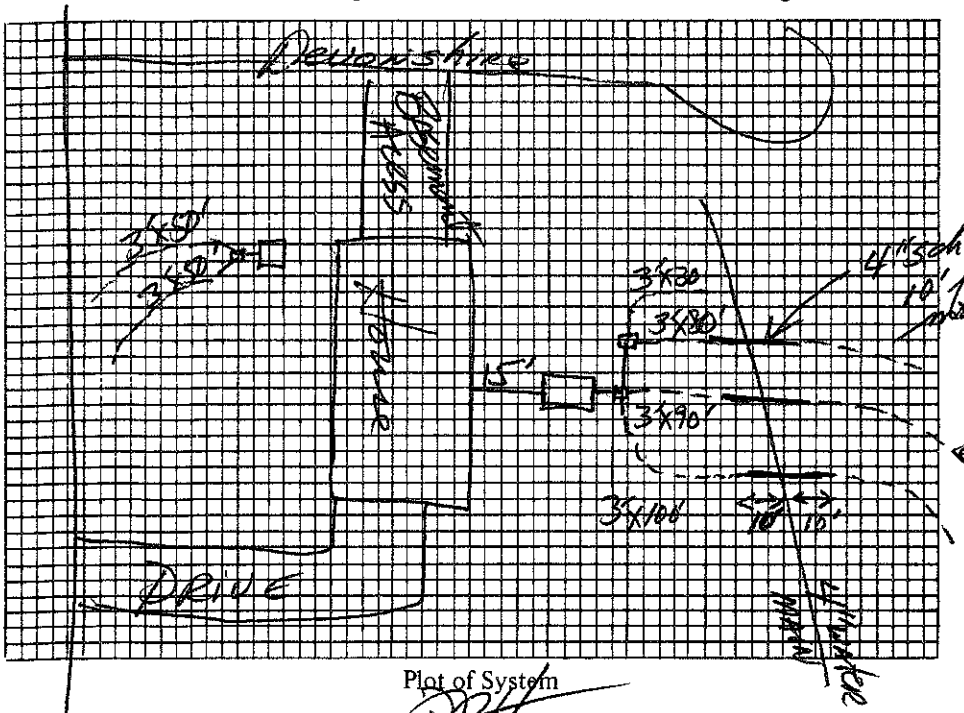
Percolation Rate 3-4

Topography 4-8%

Depth to Water Table 6'+

Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement Main System



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual ( ) Public (✓ Community Well

Installed by Mike Holland of Dennis Callihan

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

Signed: _____

Basement System
440 gal tank - 100 lin feet
2 - 3'x50'S

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE June 13, 88

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

