4654-88-6368

09363

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 Bobby Honeycutt DATE April 19, '89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 455 TL 1138 (Presbyterian Rd.) on Right 1/4 mile before creek S. R. No. _____

SUBDIVISION NAME Hillcreek LOT NO. 7 SECTION OR BLOCK NO. _____

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

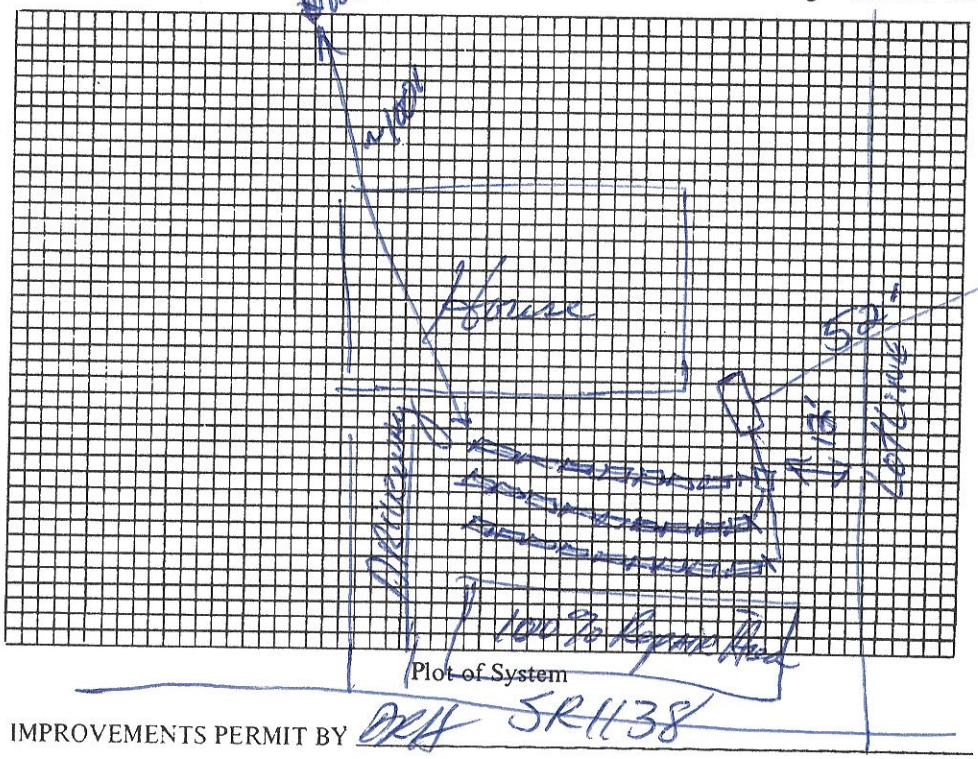
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable ~~IS~~ Yes (✓) No ( )

Character & Porosity of Soil Clay
Percolation Rate 2 & 3
Topography 2-4%
Depth to Water Table 4'+
Rock or other impervious formations none obs.

Lot Area 20000ft²+

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 200 ft
Depth of Stone in Lines 16" Total

Water Supply: Individual (✓) gravity flow
Public ( )

Installed by J. Irwin

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH SR1138

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. Irwin, L.S. DATE 4-19-89

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