4655325837

IREDELL COUNTY HEALTH DEPARTMENT

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

CONTRACTOR James McLeod DATE 10-12-84 PERMIT NO. 373

OWNER Business _____ Home 1223 (east pt) IR 1224 Knits

PHONE 485 7L 1223 IR 1224 Knits

LOCATION Okeydge Drive Lot on left Van cul de sac

DIVISION NAME Okeydge LOT NO. 18 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area 30,000 ft²

Character & Porosity of Soil Clay loam Friable

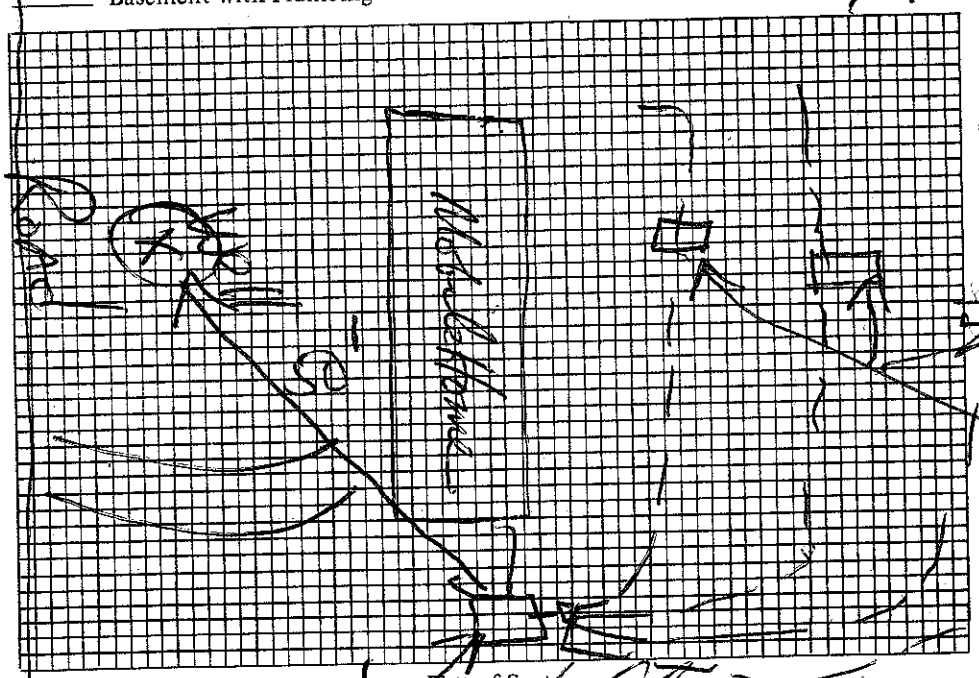
Percolation Rate 0.5 gpd/ft²

Topography 2-4%

Depth to Water Table _____

Rock or other impervious formations None obs.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 120 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by J.R. Bowles

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

Stepdowns

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: (X) Neighbors well

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 10-12-84

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