4658445690

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 Robert Bowman DATE 8/16/91 PERMIT NO. ———

PHONE: Business ——— Home 663-0928

LOCATION 21N – TL Cornelius Rd, 4th house on (R)

S. R. No. ———

SUBDIVISION NAME ——— LOT NO. ——— SECTION OR BLOCK NO. ———

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

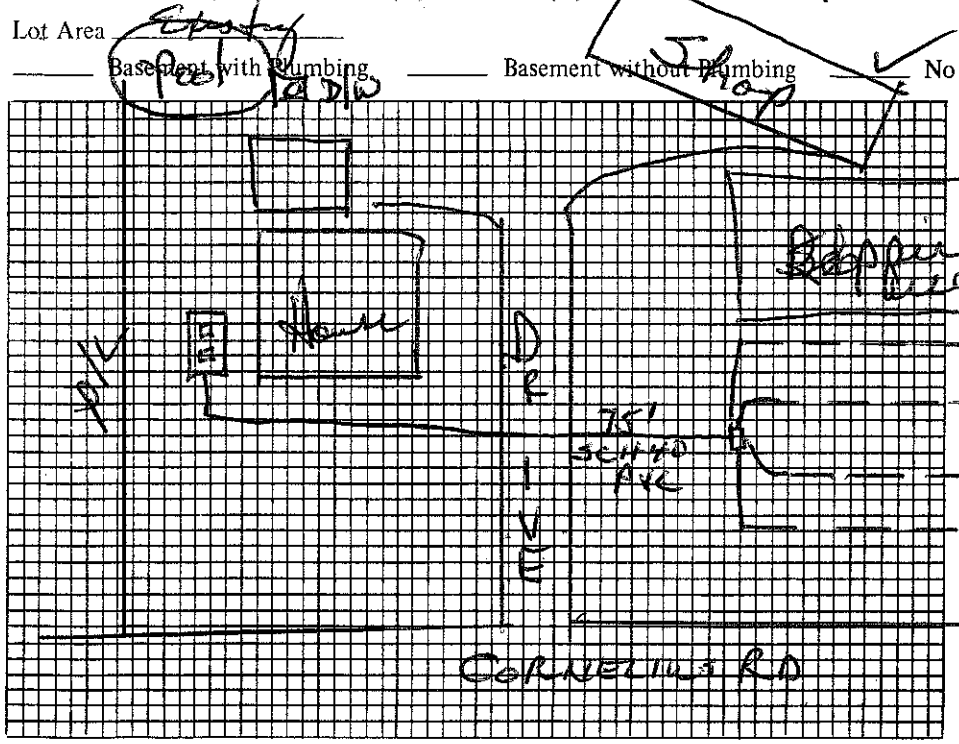
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil A – sandy clay
Percolation Rate 35
Topography 2-3%
Depth to Water Table >48"
Rock or other impervious formations None observed

Lot Area Existing

——— Basement with Plumbing ——— Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing + 1000 Gals.
Nitrification Field:
No. of Lines 4 @ 70'x3'
Sq. Ft. 840 Linear Ft. 280
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Dean Willis

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

Signed: ———

IMPROVEMENTS PERMIT BY ———

COMMENTS: Bldg to be waterlevled – all lines to stop to begin at same time. Soil much better (structure, plasticity) on this side of driveway

CERTIFICATE OF COMPLETION BY Wesley Sparks RS DATE 8/16/91

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