4658-53-3676

IREDELL COUNTY HEALTH DEPARTMENT

Existing 1243

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

OWNER OR CONTRACTOR DAN'S COUNTRY MARKET Cicero DATE 3/7/91 PERMIT NO. IM-9-A-34

PHONE: Business _____ Home 663-2346

LOCATION NC 21 N off 150 W, on (R) before intersection with 115 N

S. R. No. NS 21

SUBDIVISION NAME N/A LOT NO. N/A SECTION OR BLOCK NO. _____

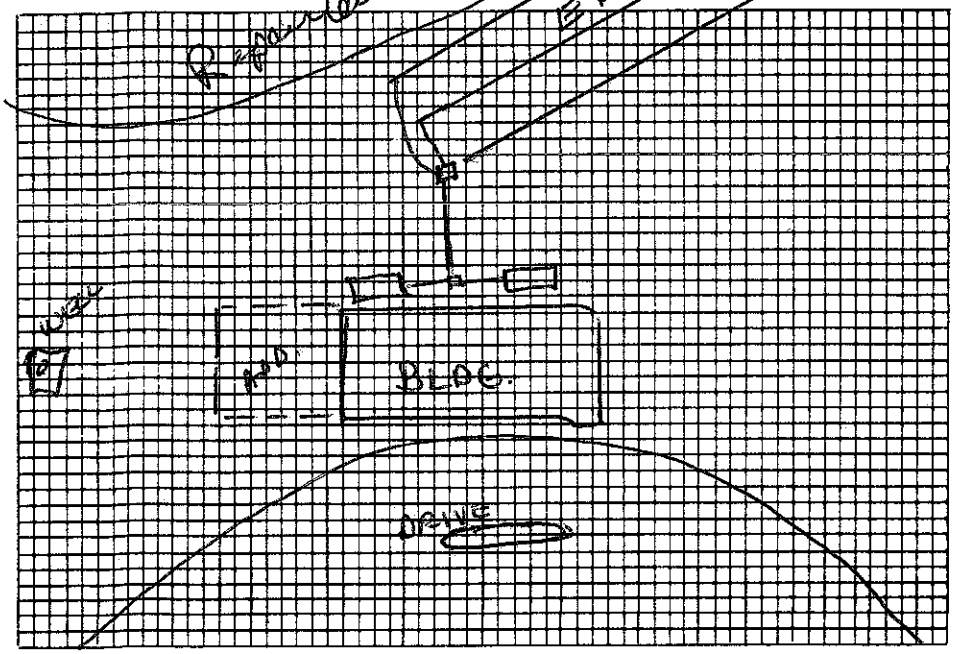
House ( ) Mobile Home ( ) Business ( ) (Other) ADDITIONAL STORAGE SPACE

No. Bedrooms _____ 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 clay - clay loam
Percolation Rate _____
Topography _____
Depth to Water Table > 48"
Rock or other impervious formations None Noted

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1500 / 1500 GT. Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
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 visible evidence of malfunction found 3/7/91
Addition if done as shown won't affect drainfield

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Wesley Sparks R.S. DATE 3/7/91

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