# 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 Lanley's Fish Camp DATE 1-22-86 PERMIT NO. 34

PHONE: Business _____ Home _____

LOCATION Hwy 21 North on left before 1307

S. R. No. _____

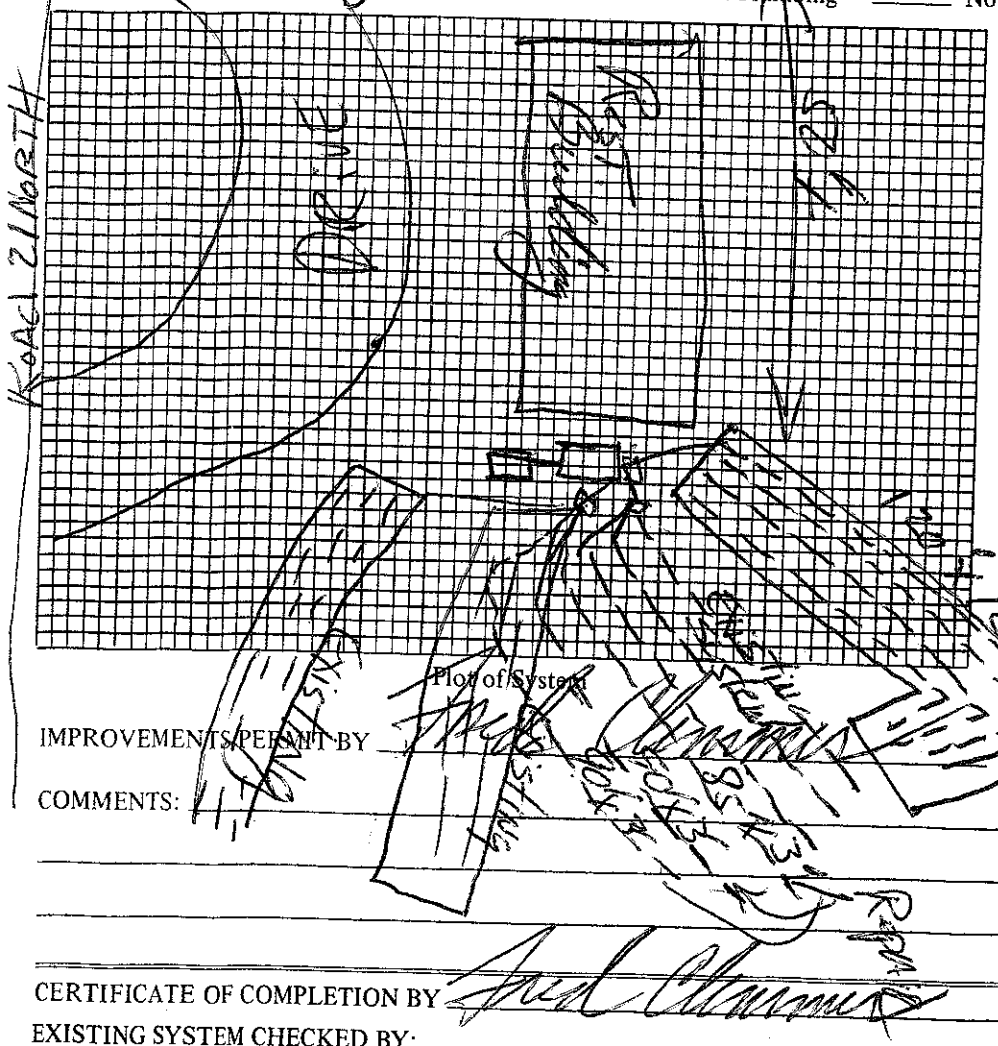
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business (X) Other Kitchen + Employees Bath Repair

No. Bedrooms _____ No. Bathrooms 2

| | | | | |
|---|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No ( ) | Character & Porosity of Soil | |
| Auto. Dishwasher | Yes ( ) | No ( ) | Percolation Rate | |
| Auto. Wash. Machine | Yes ( ) | No ( ) | Topography | EXISTING |
| Site Suitable | Yes ( ) | No ( ) | Depth to Water Table | System |
| Lot Area EXISTING | | | Rock or other impervious formations | |

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement




Size of Tank EXISTING Gals.

Nitrification Field:

No. of Lines 7

Sq. Ft. 1800± Linear Ft. 600

Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by Gene Hilliard

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

Signed: _____

IMPROVEMENTS/PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 1-22-86

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