2047

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Broadmoor Homes DATE 12/7/92 PERMIT NO. IM16A14

PHONE: Business 663-7660 Home

LOCATION Sun Lone, Riverhead Rd. TL 1st Sunshine Est. TR
Then R again TR to first lot on R S.R. No.

SUBDIVISION NAME Sunshin Est. LOT NO. 24 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 ☐

Lot Area ~ 20,000 ft²

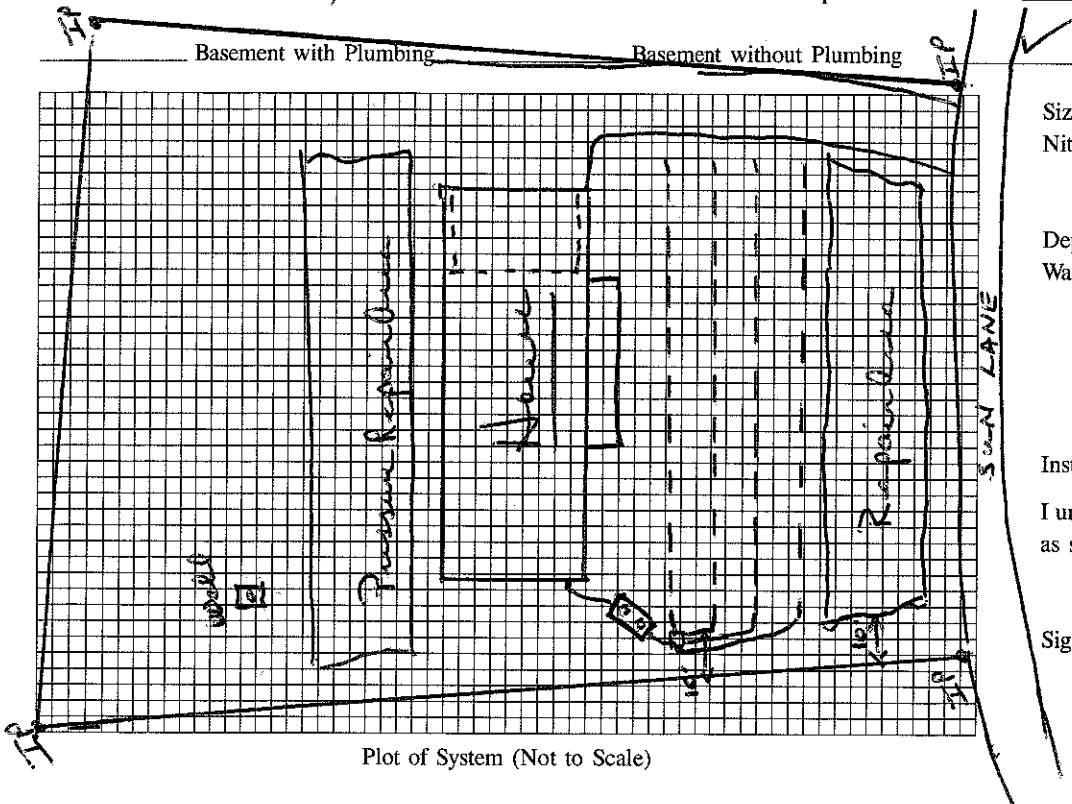
Soil Characteristics P - C - C1 / C TRANSITION

Application Rate P - .35 (ap. sF, wk structure)

Topography P 2-5%

Depth to Water Table S > 48"

Rock or other impervious formations S - NONE OBSERVED



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4 @ 86' X 3'
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"

Water Supply: Individual ☑
Public ☐

Installed by Eddie Young & Sons

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

Signed:

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY

COMMENTS

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 12/7/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold