PIN# 4659-37-8956

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 Jewell Kay Turner DATE Dec. 20, '90 PERMIT NO. ______

PHONE: Business ______ Home ______

LOCATION 115-21 N. TR 2390 (Westmoreland Rd) TL 2nd Street (Cardinal Lane) 3rd house on left S. R. No. ______

SUBDIVISION NAME Cardinal Acres LOT NO. 20 SECTION OR BLOCK NO. ______

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

No. Bedrooms 3 No. Bathrooms 1-2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes ( ) No ( )

Character & Porosity of Soil ______

Percolation Rate ______

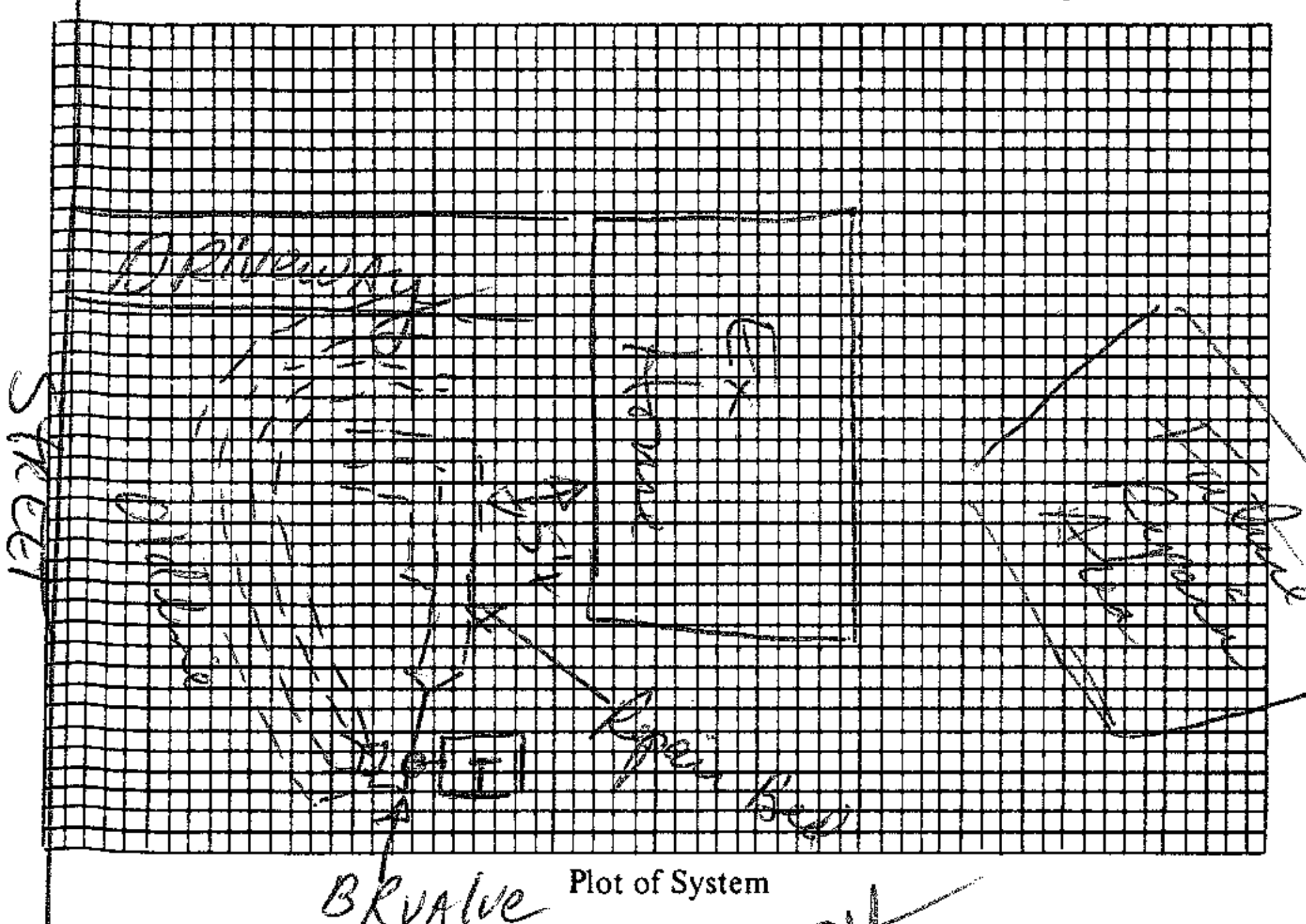
Topography ______

Depth to Water Table ______

Rock or other impervious formations ______

Lot Area Existing

______ Basement with Plumbing ______ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 6-9' wide bed
Sq. Ft. ~315 Linear Ft. ~105
Depth of Stone in Lines 18"-24"

Water Supply: Individual ( )
Public (✓) TCW

Installed by F J Erwin

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

Signed: ______

IMPROVEMENTS PERMIT BY DBH

COMMENTS: Old drainfield made turn at driveway back towards house which resulted in less room (space) for repair. As much footage installed in front yard in new line as space allowed.

CERTIFICATE OF COMPLETION BY DB Hinson, EHe DATE 12-20-90

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