12094

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 Freddie Lee Heavner DATE 7/5/91 PERMIT NO. 10-B-25J

PHONE: Business _____ Home _____

LOCATION 115 N. TR across from Barfield Rd, 1/4 mile on (R)

S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ 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 ( )

Site Suitable Yes (✓) No ( )

Lot Area 1.29AC +/-

Character & Porosity of Soil P - clay

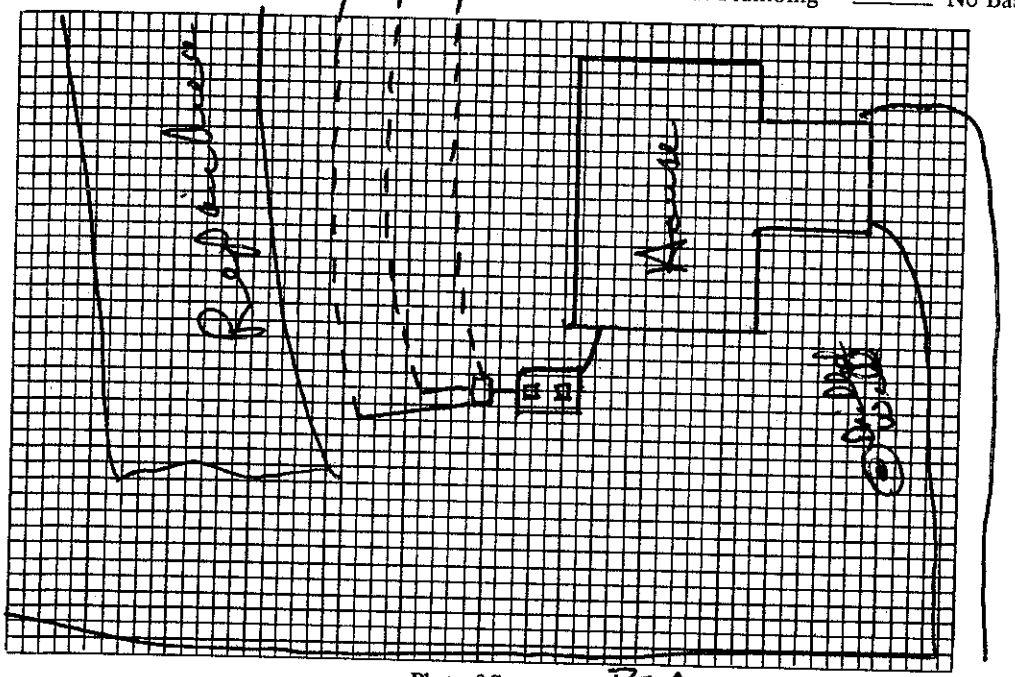
Percolation Rate .35

Topography 6-8%

Depth to Water Table >48"

Rock or other impervious formations None observed

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System ROAD.

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3 @ 125'

Sq. Ft. 1050 Linear Ft. 375

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Ray Beam

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Distribution Box with speed levelers. Lines good Lgth.

CERTIFICATE OF COMPLETION BY Wesley Sparks C.S. DATE 7/5/91

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