4655671

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 Irvington Lee Davis DATE 2-17-86 PERMIT NO. 73

PHONE: Business _____ Home _____

LOCATION 1125S TL onto Timberview (I) 2nd entrance, 2nd lot on Right

S. R. No. _____

SUBDIVISION NAME Timberview LOT NO. 10? SECTION OR BLOCK NO. _____

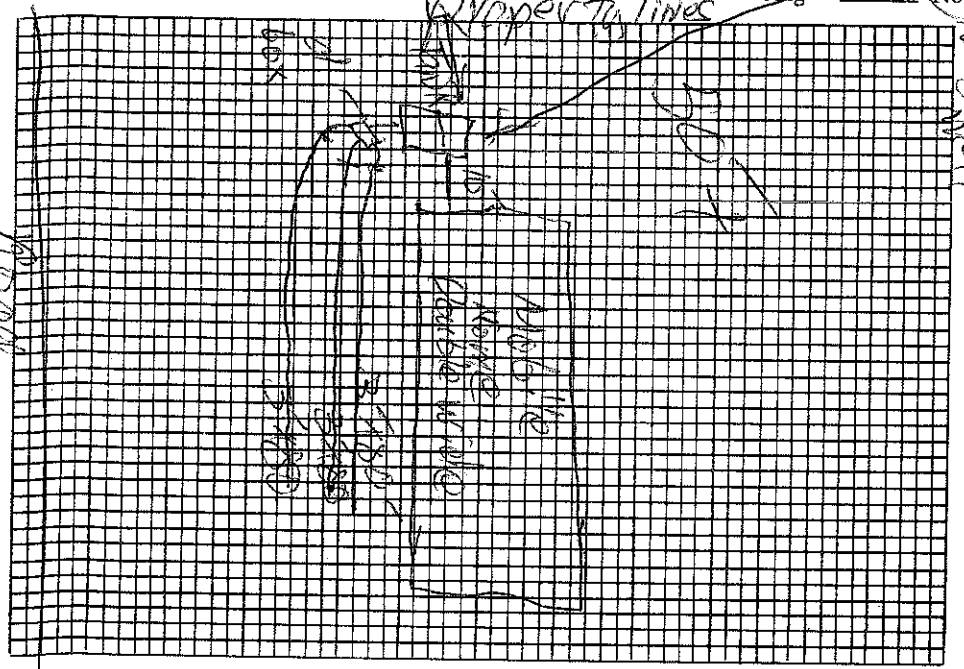
House ( ) Mobile Home (✓) Business ( ) Other Double wide

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	0.5 gal/sq ft/day
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-10%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'
			Rock or other impervious formations	None obs

Lot Area ~1 acre

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓) Next door
Public ( )

Installed by Bostain

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

Signed: _____

IMPROVEMENTS PERMIT BY CKB

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Charles K. Bennett DATE 2/17/86

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