IREDELL COUNTY HEALTH DEPARTMENT 4668-39-1874

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR George E. Insogna DATE 7-27-84 PERMIT NO. 243

PHONE: Business ______ Home ______

LOCATION 115 N TR 2383, 1 mile TR Reba Phelips BR below house behind on left

SUBDIVISION NAME Reba Phillips prop LOT NO. 9 SECTION OR BLOCK NO. ______ S. R. No. ______

House ( ) Mobile Home (X) Business ( ) Other ______

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area ±1 ACRE

Character & Porosity of Soil Clay loam

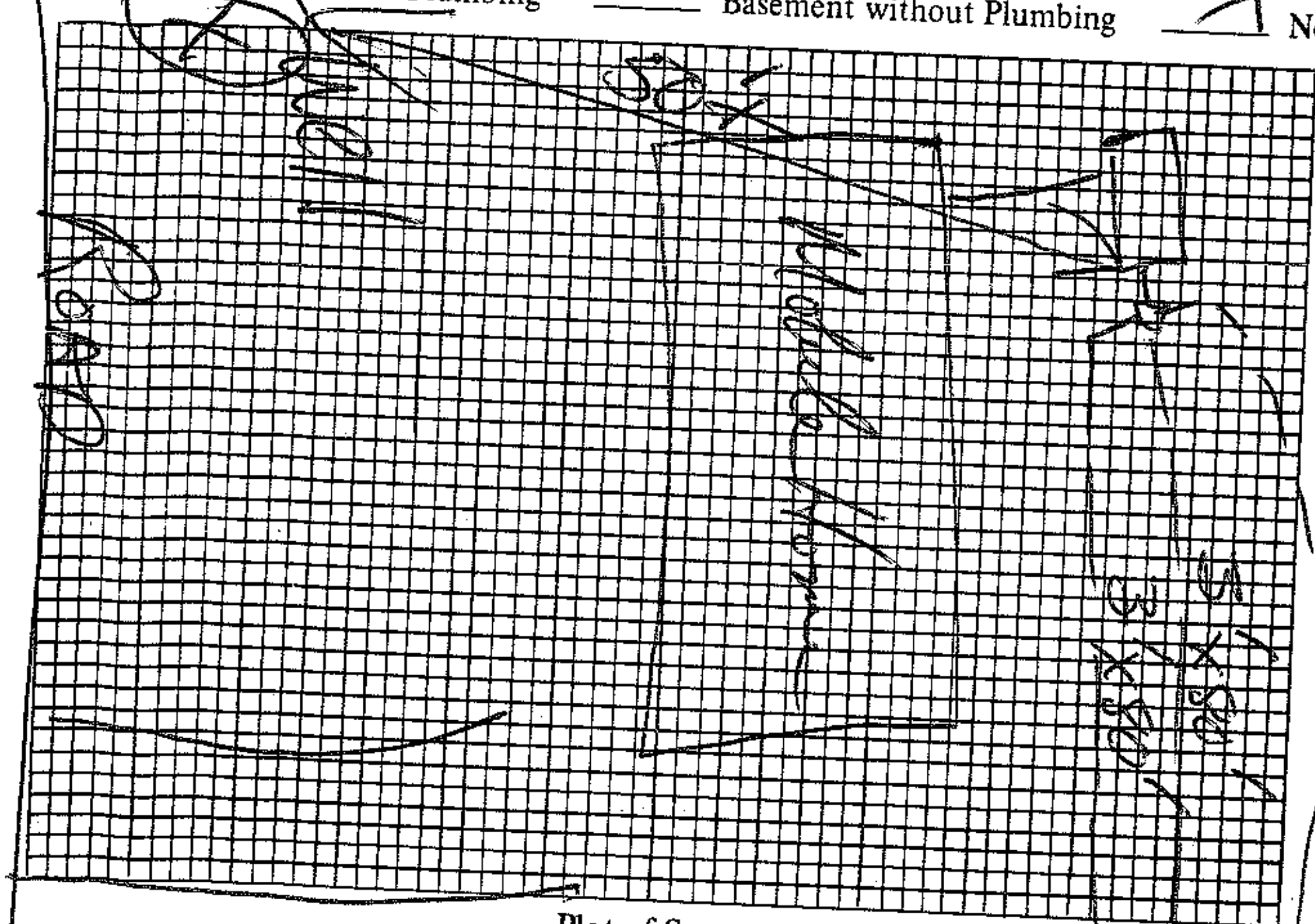
Percolation Rate 0.5 gal/ft²/day

Topography 2-8%

Depth to Water Table 4'

Rock or other impervious formations NONE obs

___ 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 (X)

Public ( )

Installed by J R Bowles

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

Signed: ______

IMPROVEMENTS PERMIT BY F.H. + C. Barnett

COMMENTS: ______

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 7-27-84

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