0728

~ 4:00

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 Everett L. Baxter DATE May 3, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115-21 N. TR 2353 (Shinnville Rd.) TR at Shinn's Store onto Winthrow Creek Rd. ~¼ mile on left S. R. No. _____

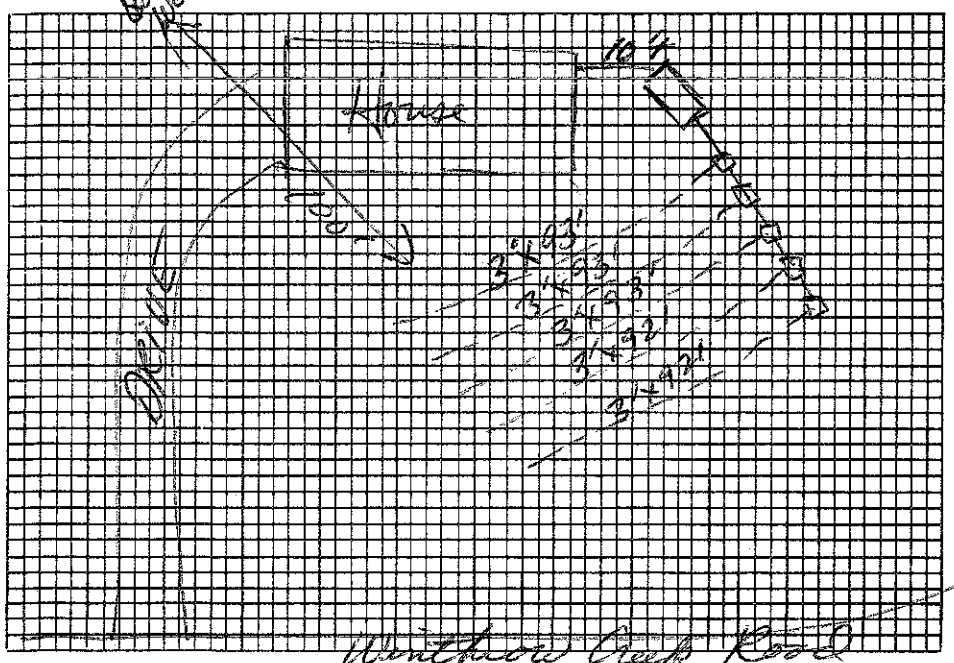
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business (✓) Other (1 chair beauty shop possible in house)

No. Bedrooms 3	No. Bathrooms 2½	Character & Porosity of Soil	clay
Garbage Disposal Unit	Yes ( ) No (✓)	Percolation Rate	2.35
Auto. Dishwasher	Yes (✓) No ( )	Topography	2-5%
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	4'+
Site ~~Suitable~~ PS	Yes (✓) No ( )	Rock or other impervious formations	none obs.

Lot Area acreage (15+)

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 5

Sq. Ft. 1386 Linear Ft. 462

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by _____

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

Signed: Everett L. Baxter

IMPROVEMENTS PERMIT BY _____

COMMENTS: Follow contour with drainfield (may be slightly different than drawn). Maintain 12"-18" over stone but not more. Use drop boxes to distribute effluent.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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