1/2 Noon
FJ.

10677

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 Melvin Painter DATE Nov. 6, '89 PERMIT NO. 1-B1-A5

PHONE: Business _____ Home _____

LOCATION 136 S. TR 1142 (Johnson Dairy Rd.) ~1/2 mile TR into Carolwoods on left at top of hill S. R. No. _____

SUBDIVISION NAME Carolwoods LOT NO. 5 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~~ PS Yes (✓) No ( )

Lot Area 1.2 ac

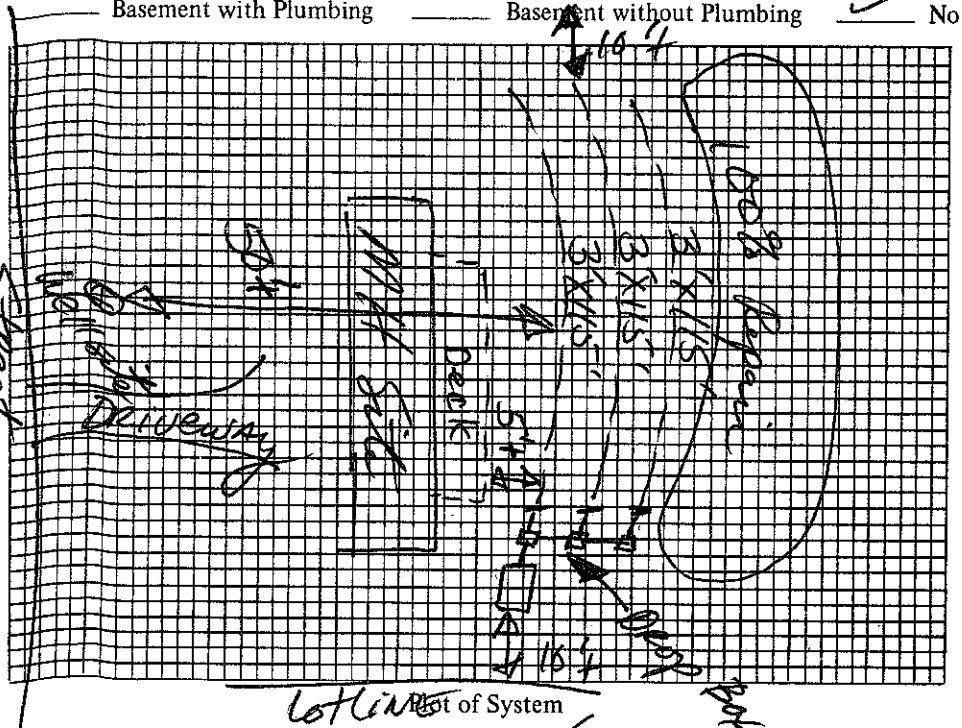
Character & Porosity of Soil silty clay

Percolation Rate ~0.35

Topography ~15%

Depth to Water Table 4'+

Rock or other impervious formations none obs.



_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1035 Linear Ft. 345

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: X Melvin Painter

IMPROVEMENTS PERMIT BY _____

COMMENTS: Follow contour with drainfield. Maximum trench bottom depth of 36".

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