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 Keith S. Carpenter DATE 5/4/89 Quad ~~PERMIT~~ NO. 22A

PHONE: Business ____________ Home 664-1121

LOCATION N. Main St. On L. across from Custom Products. 1st lot on left in Carpenter Acres S. R. No. ______

SUBDIVISION NAME Carpenter Acres LOT NO. 1 SECTION OR BLOCK NO. ______

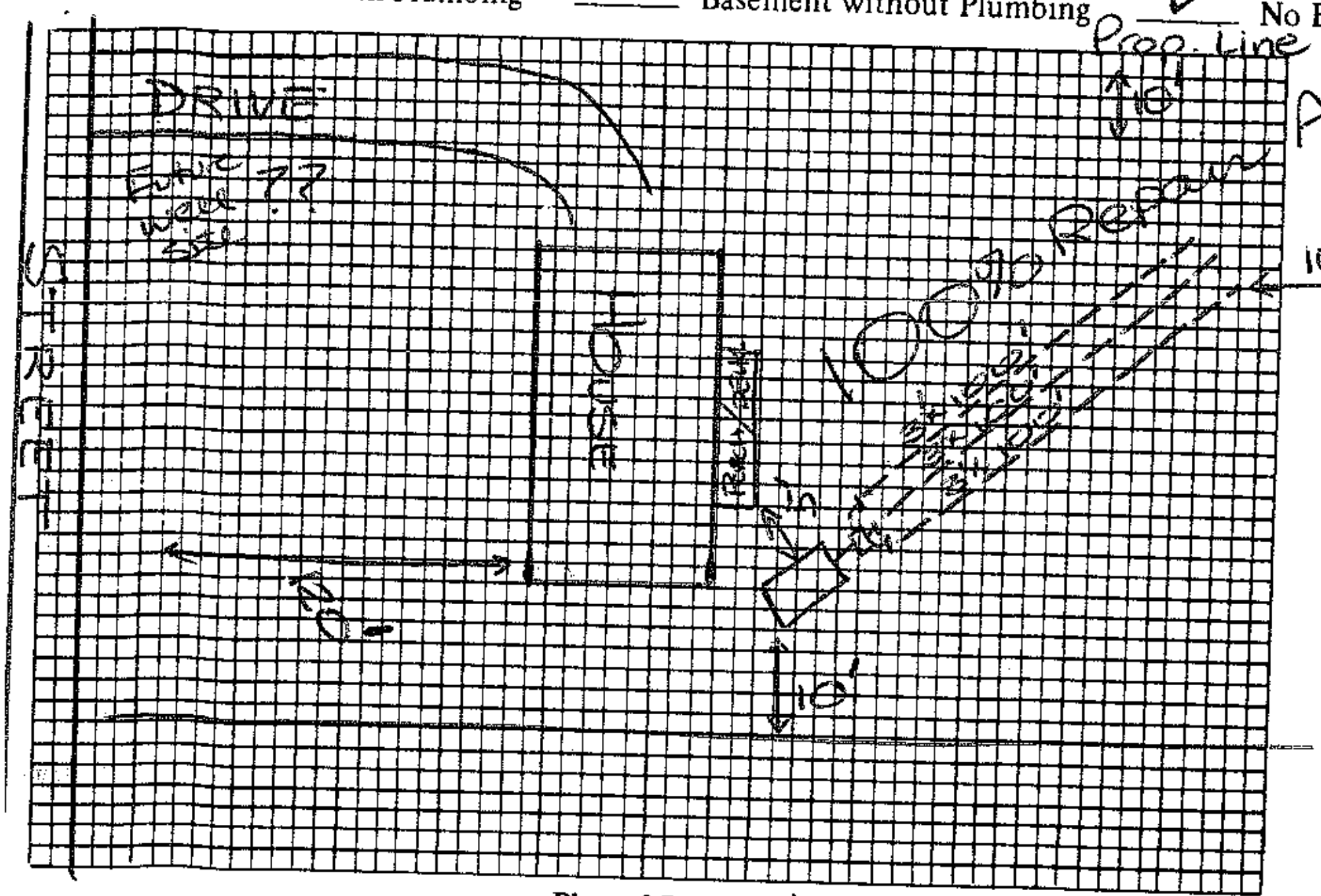
1N-10-A-1 Coddle Creek

House (✓) Mobile Home ( ) Business ( ) Other ____________

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	.4gpd/ft²
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	6%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'+
Lot Area .98A			Rock or other impervious formations	none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System NOT TO SCALE

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓) neighbor on Lot 3.

Public ( )

Installed by ____________

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

Signed: X Peggy Carpenter

IMPROVEMENTS PERMIT BY Andre C. Pierce

COMMENTS: [redacted] STUB PLUMBING OUT SHALLOW! Install tank at shallow depth and run drainlines at 30" maximum to ditch bottom. Keep drainfield level and ON CONTOUR.

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