4677152147

IREDELL COUNTY HEALTH DEPARTMENT

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

OWNER OR CONTRACTOR REBECCA BARCO DATE 11/13/87 PERMIT NO.

PHONE: Business Home 663-7133

LOCATION 152 E. TR AZALEA AT END TR
MH (future) and HOUSE ON LEFT

SUBDIVISION NAME S. R. No.

LOT NO. SECTION OR BLOCK NO.

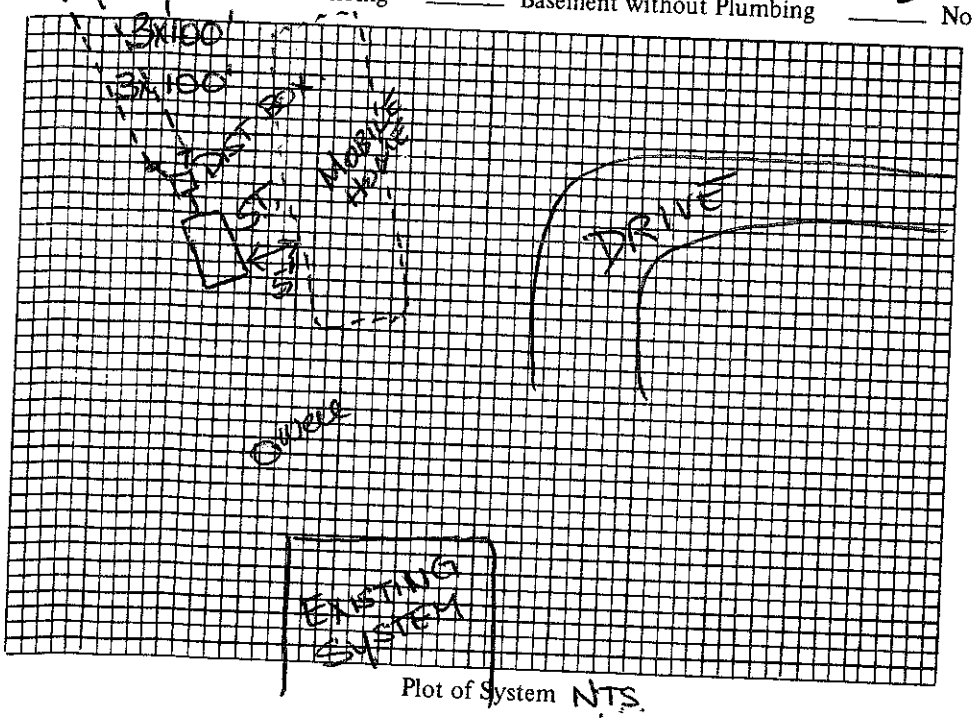
House ( ) Mobile Home (✓) Business ( ) Other

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil Clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate ~.4 gpd/ft²
Auto. Wash. Machine	Yes (✓)	No ( )	Topography 4% – 8%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table 4'+
			Rock or other impervious formations none observed

Lot Area 20000 ft² (~7 ACRES TOTAL)

Basement with Plumbing ____ Basement without Plumbing ____ No Basement (✓)



Plot of System NTS.

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by W. POTTS

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS:

CERTIFICATE OF COMPLETION BY Andrew C. Price

EXISTING SYSTEM CHECKED BY: _____ DATE 11/13/87

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. DATE _____

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

MOORESVILLE
0768

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 REBECCA BARCO DATE 11/12/87 PERMIT NO. ______

PHONE: Business ______ Home 663-7133

LOCATION 150 E. TR AZALEA AT END TR
MH (future) and HOUSE ON LEFT. S. R. No. ______

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

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

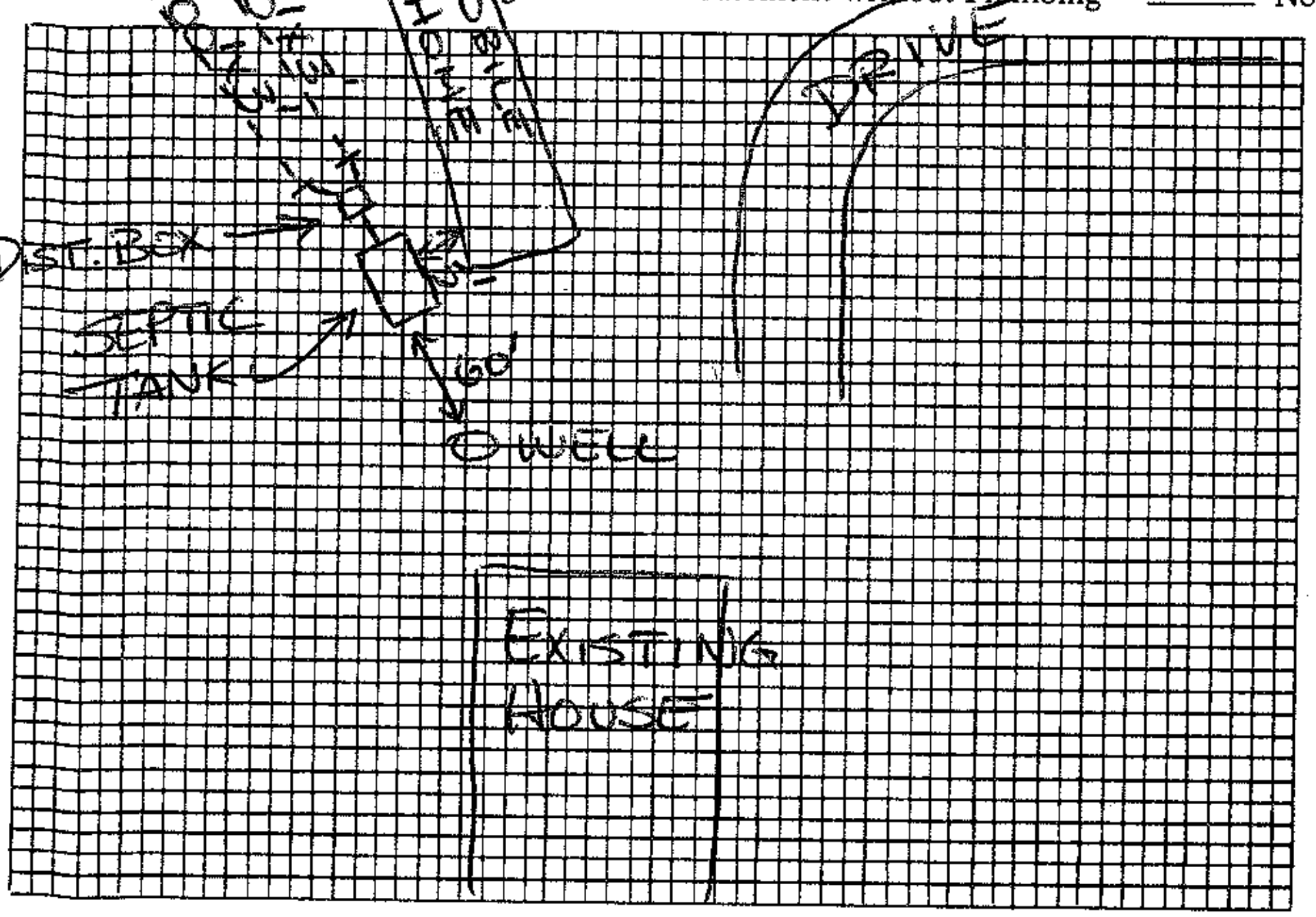
No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)
Auto. Dishwasher	Yes (✓)	No ( )
Auto. Wash. Machine	Yes (✓)	No ( )
Site Suitable	Yes (✓)	No ( )

Character & Porosity of Soil Clayey Tes to P.M.
Percolation Rate .4 gpd/ft²
Topography 4% - 8%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 20000 min Required → 1 ACRES

______ Basement with Plumbing ______ Basement without Plumbing ______ No Basement



Plot of System N.T.S.

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200

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 Rebecca Barco

IMPROVEMENTS PERMIT BY Andre C. Price

COMMENTS: SET TANK 5' MINIMUM OFF MOBILE HOME. RUN LINES ON CONTOUR.. SHALLOW. (30" to bottom of ditch) KEEP CONSISTENT COVER ON DRAIN FIELD.
CALL IF ANY QUESTIONS.

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