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# IREDELL COUNTY HEALTH DEPARTMENT

1716

## (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Robert Rethus (John Carrigon) DATE 6/21/91 PERMIT NO. 1145

PHONE: Business _____ Home 663-3992

LOCATION 152E, 2 miles on (R) just past 2399, 2 mobile homes on lot

S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Existing System

Percolation Rate _____

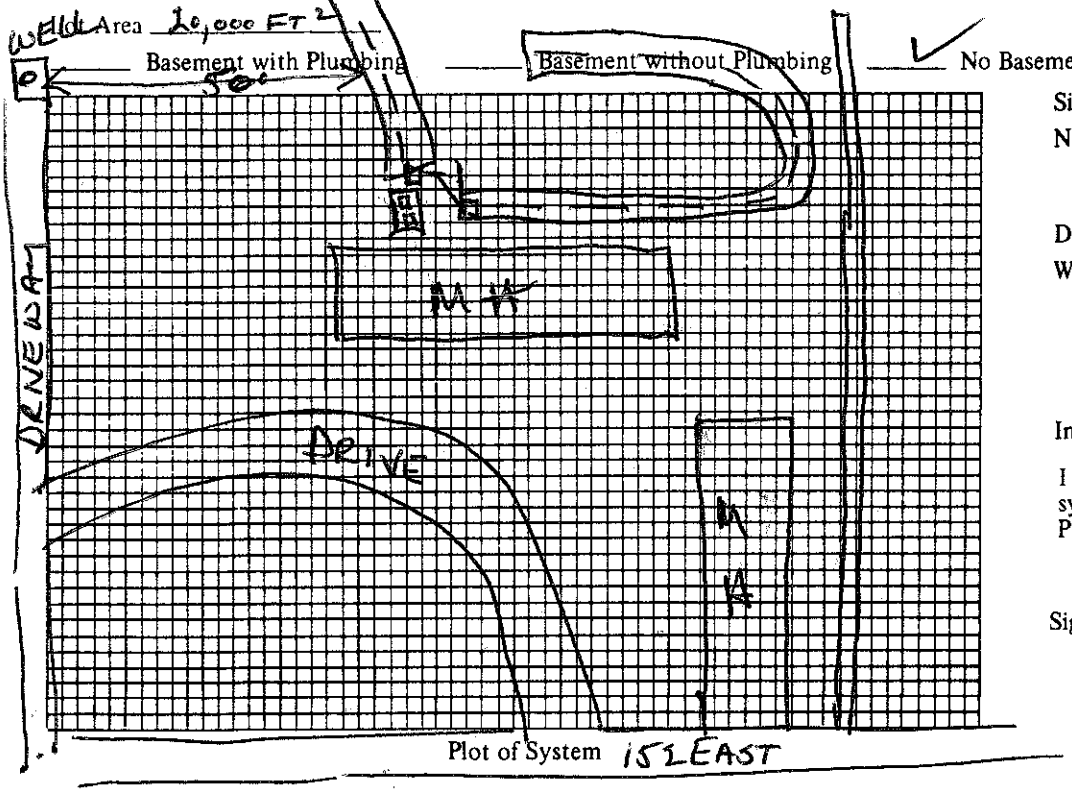
Topography _____

Depth to Water Table _____

Rock or other impervious formations _____

Weld Area 20,000 FT²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement




Plot of System 152 EAST

Size of Tank Existing 1000 Gals.

Nitrification Field:

No. of Lines _____

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual (✓)

Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: No evidence of malfunction on this system.
Double wide trailer to be situated 5' off the septic tank.
John Carrigon - 1982

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Wesley Sparks RS. DATE 6/21/91

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