4677613466

IREDELL COUNTY HEALTH DEPARTMENT

1526

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

OWNER OR CONTRACTOR Michael W. Freeze DATE Sept 27 '90 PERMIT NO. LQ-A-9pt.

PHONE: Business _____ Home 664-7857

LOCATION 1150 TR 1153 (Brumley) x Creek (½-1 mile on Right) 2nd House on Right S. R. No. _____

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

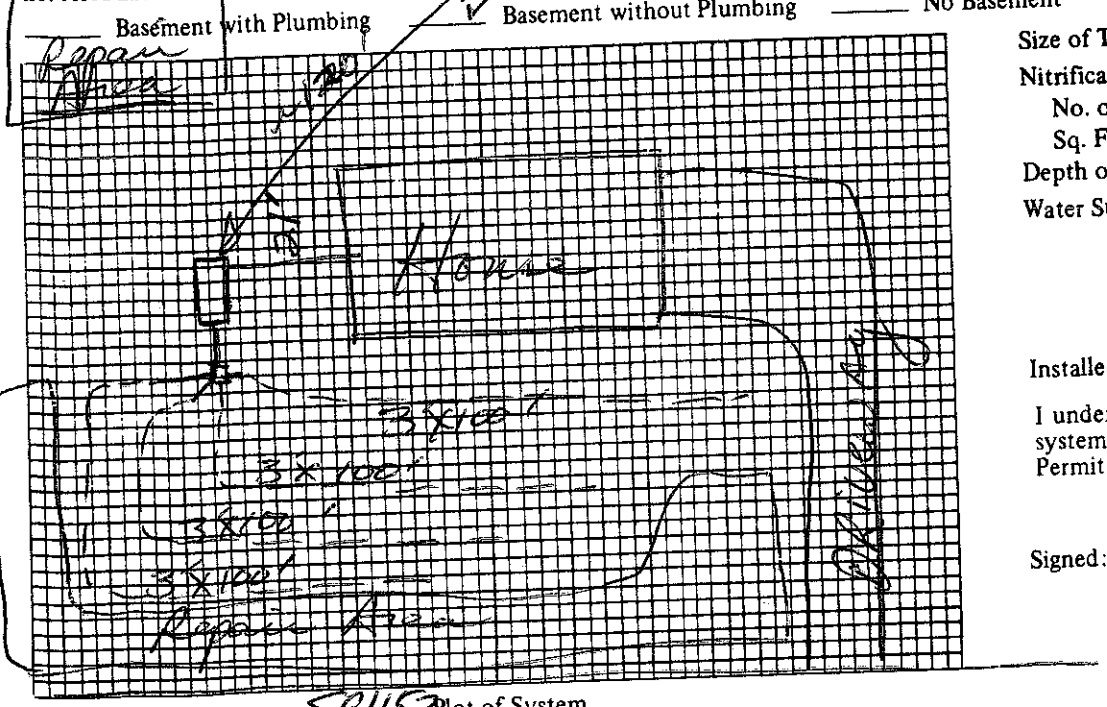
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area Limited 1.5 Ac

Character & Porosity of Soil 25% clay
Percolation Rate 3
Topography 2-4%
Depth to Water Table 3'+
Rock or other impervious formations none obs.



____ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Plot of System

Installed by Jerry Beam

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

Signed: _____

IMPROVEMENTS PERMIT BY SCI

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. R. Henson, EHS DATE 9-27-90

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