4679 13 6673

8731

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 Raymond C. Honbarger DATE 4/28/88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115 North JR on 2395 Mazeppa Cross Triplett. 1/4 mi on left. S. R. No. 2395

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

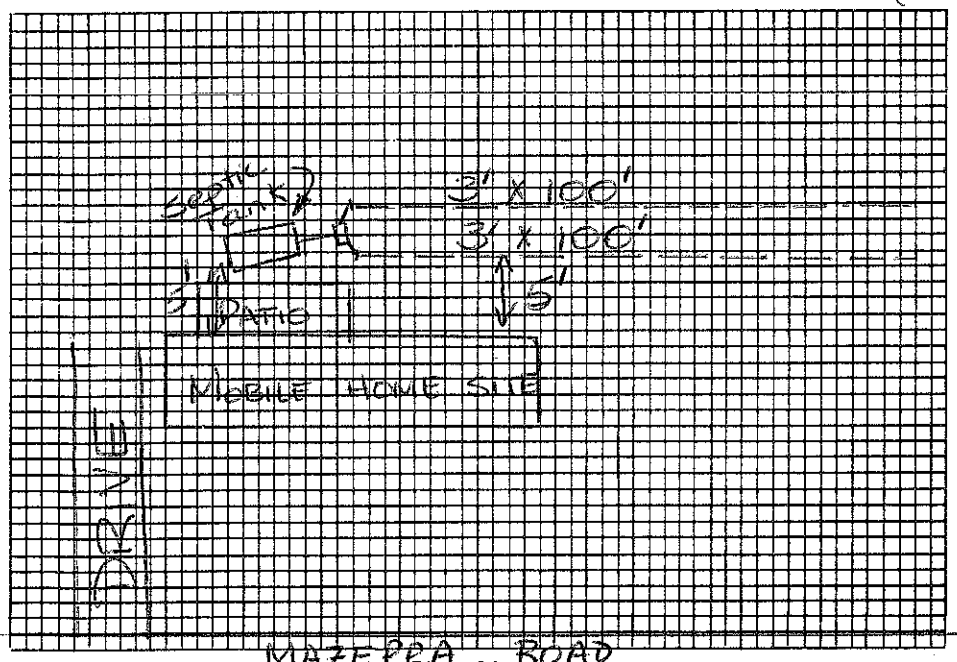
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (~~X~~)
Auto. Dishwasher Yes ( ) No (~~X~~)
Auto. Wash. Machine Yes (~~X~~) No ( )
Site Suitable Yes (~~X~~) No ( )
~~Lot Area~~ _____

Character & Porosity of Soil clay loam from completion 4/10/78
Percolation Rate 75 min/inch.
Topography 2%
Depth to Water Table 10'+
Rock or other impervious formations none.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System → Not to Scale

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual (X)
Public ( )

Installed by Wayne Orbison

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

Signed: _____

~~IMPROVEMENTS PERMIT BY~~ J.C. Moore (completion on 4-10-78)

COMMENTS: No sign of sewage seen on ground surface at the time of this inspection. - (4-28-88)

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Audie C. Price DATE ~~4/28/88~~ ACP 4/28/88

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

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 Raymond Honbarger DATE 4-10-78 PERMIT NO. _____

PHONE: Business _____ Home 663-0384

LOCATION 115 North TR on 2395 crosses at Triple Church ¼ mi Past church on left S. R. No. 2395

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 1 acre

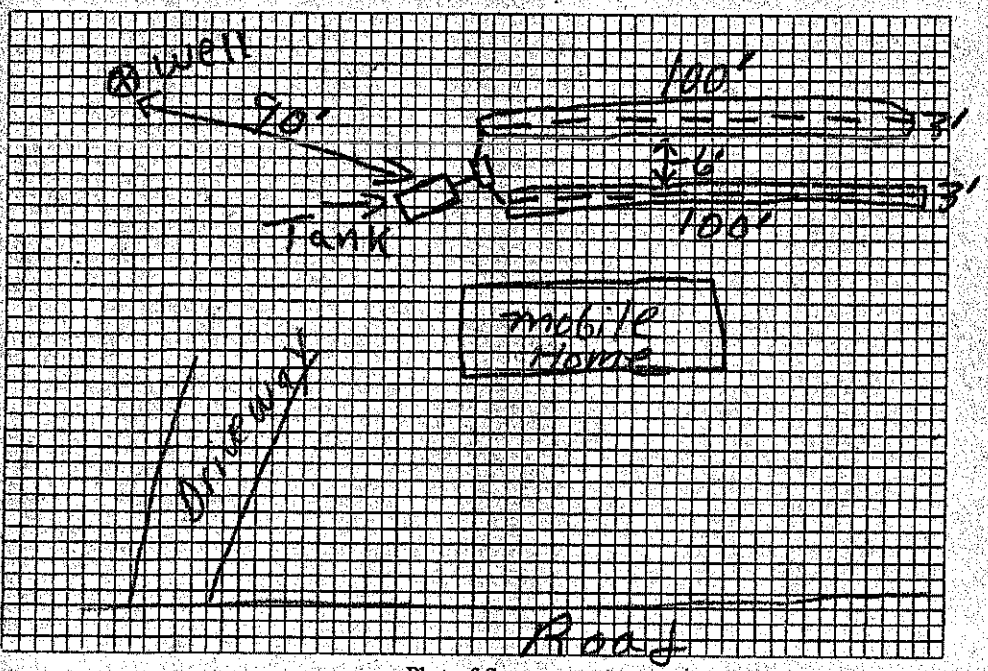
Character & Porosity of Soil Clay loam

Percolation Rate 75 min 1 inch

Topography 2% Slope

Depth to Water Table 10'+

Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 600 Linear Ft. 200

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Wayne Orbison

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 4-10-78

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

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold