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 Jacob Kutschenko DATE MAR 20 '87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 801 N on Rt. across from pit w/ 2362 (Triplett Rd.)

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

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

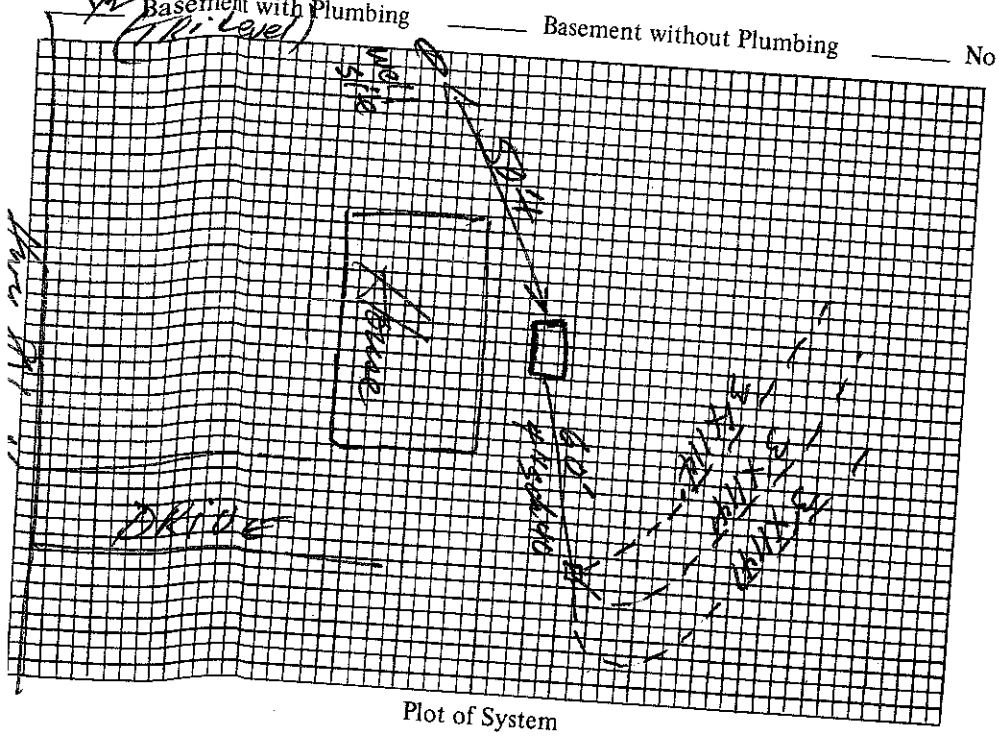
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Clay
Percolation Rate 2.35
Topography 2-6%
Depth to Water Table 41'
Rock or other impervious formations none obs.

Lot Area ~2Ac

Yes Basement with Plumbing (Tri-Level) _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 1028 Linear Ft. 342
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Sterling Church

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Henson, R.S.

EXISTING SYSTEM CHECKED BY: _____ DATE Mar 29, 87

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. DATE _____

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