4686 II 3427

IREDELL COUNTY HEALTH DEPARTMENT

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

10626

OWNER OR CONTRACTOR Kenneth Baxter DATE Feb. 7, '91 PERMIT NO. IF-A-8 pt.

PHONE: Business _____ Home _____

LOCATION 1150 (Linwood Rd.) TL 1143 (Atkerson Farm Rd.) TL near Co. line onto gravel road (Juniper Rd.) ~300' on Right S. R. No. _____

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

House ( ) Mobile Home ( ) Business (✓) Other Bar 40 seats → 800 gal/day flow No food service

No. Bedrooms — No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes ( ) No (✓)

Site ~~Suitable~~ PS Yes (✓) No ( )

Lot Area 2 AC

Character & Porosity of Soil Clay

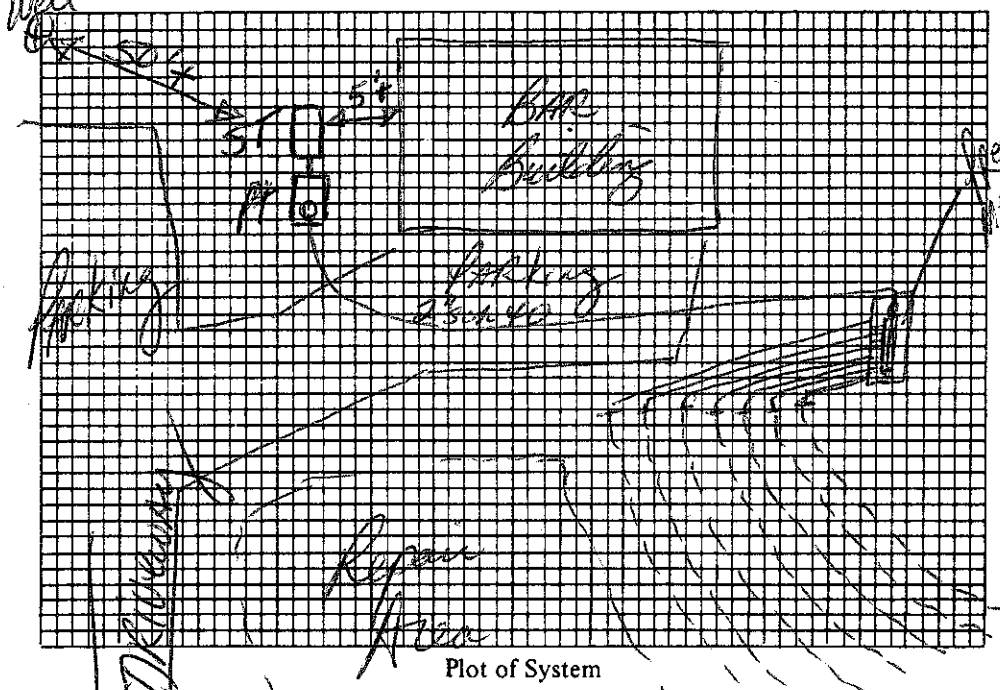
Percolation Rate 3-35

Topography 6-10%

Depth to Water Table 4'+

Rock or other impervious formations None ft.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



1500 g.t.

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 7
Sq. Ft. 2520 Linear Ft. 840
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Benchmarke Const. & Richard Abernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY _____ DRT

COMMENTS: Juniper Road

Drainfield checked 11/29/90 by K R Shanks

CERTIFICATE OF COMPLETION BY Operation permit Jarrod R. Hanson, EHS DATE Feb. 7, '91

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