04497

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 Phil Stamm DATE 06-16-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Eufola Rd from 64-70 W, TR Carriage Lane, T.R. on gravel Street ¼ mile before end of Carriage Ln., T.R. toward pier access, 1st lot on left

SUBDIVISION NAME Top of the Lake LOT NO. 10 SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2.5

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

Lot Area 20,000 ft²

Character & Porosity of Soil Prov. suitable

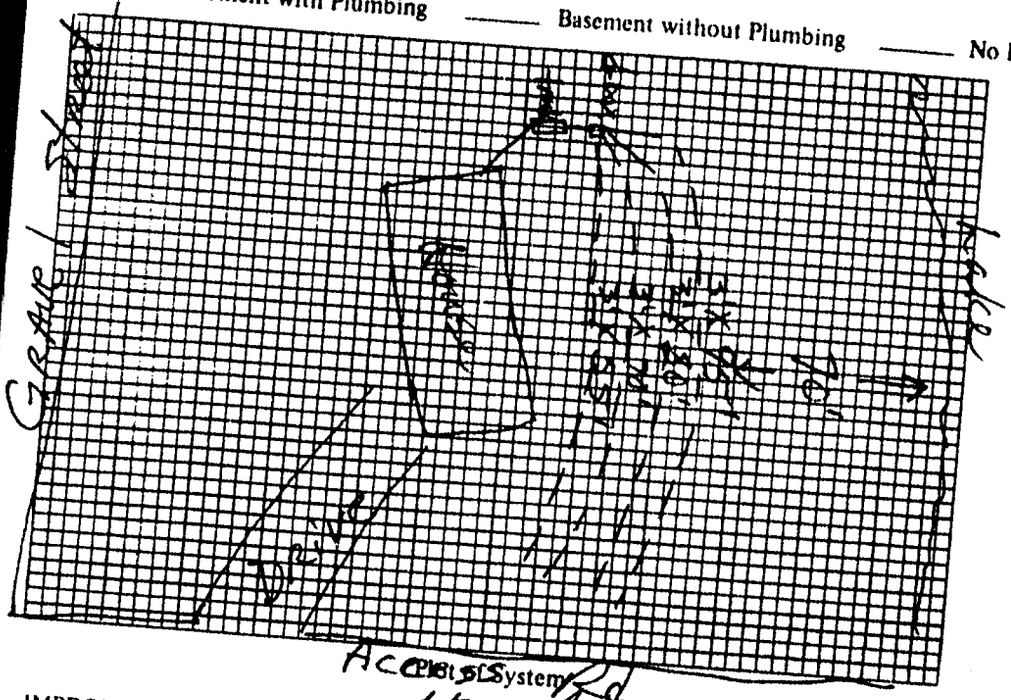
Percolation Rate 0.4 Gal/ft²/day

Topography 6-10% Slope

Depth to Water Table 101+

Rock or other impervious formations none

(✓) Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 400 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Larry Hentle

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Keep well 50'+ from septic tank system

CERTIFICATE OF COMPLETION BY _____ DATE 06-16-86

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