06411

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 HUBERT WOOTEN DATE 5-12-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 64-70 west - 2.2 miles past white Oak on left - Enter Wind Crest Dev. - 1st lot on R. (corner 64-70 West) S. R. No. _____

SUBDIVISION NAME TRI-FOREST DEV. LOT NO. 3 SECTION OR BLOCK NO. _____

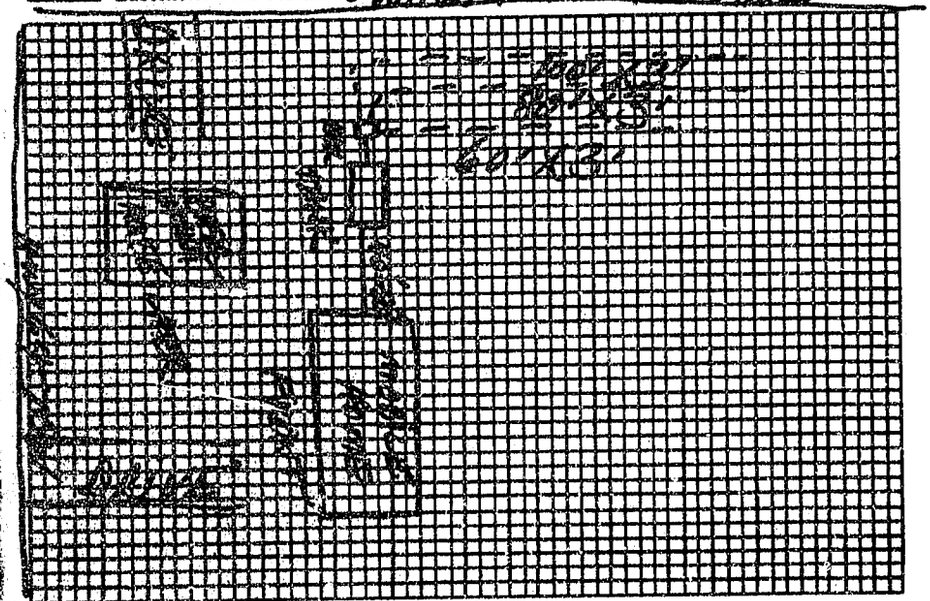
House ( ) Mobile Home (✓) Business ( ) Other May construct Basement House later.

No. Bedrooms 2 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, Sandy Loam, Suitable.
Percolation Rate 5 gal/sq. ft.
Topography 2-6%
Depth to Water Table 10+
Rock or other impervious formations none noted in trenches.

Lot Area Ample

_____ Basement with Plumbing ~~WILL BE~~ Basement without Plumbing ~~TO BE~~ _____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field: 3
No. of Lines
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Donald Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Mobile Home to be removed if Basement House constructed later.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 5-12-87

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