14190. 42495

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR JOEY HALL DATE 3-5-92. PERMIT NO. 8J-B-142.

PHONE: Business _____ Home _____

LOCATION Lewis Ferry Rd. off old mtn. Rd. - 3rd driveway on left past Pinedell Acres Rd. - Mobile Home back off rd. S.R. No. _____

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

House ☐ Mobile Home ☑ Business ☐ Other Addition to mobile Home.

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☐ No ☑

Auto. Wash. Machine Yes ☑ No ☐

Lot Area EXISTING.

Soil Characteristics

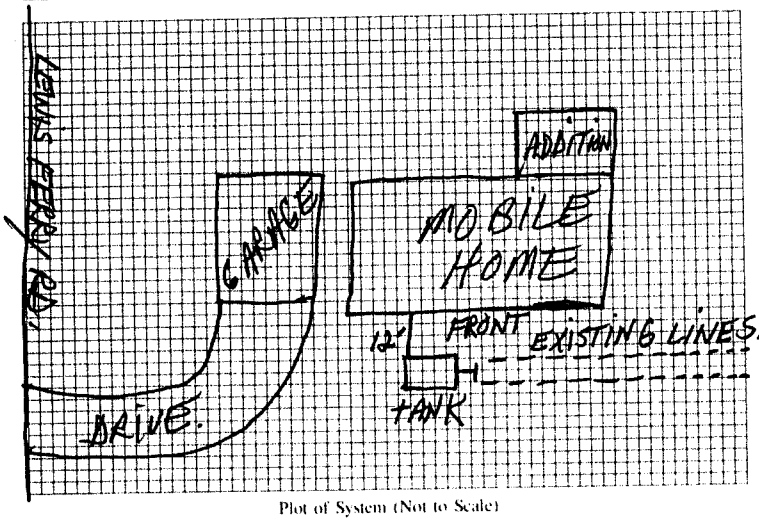
Application Rate EXISTING SEPTIC

Topography

Depth to Water Table TANK SYSTEM.

Rock or other impervious formations

_____ Basement with Plumbing _____ Basement without Plumbing ☑ No Basement _____ Crawl Space



Plot of System (Not to Scale)

Size of Tank EXISTING. Gals.

Nitrification Field:

No. of Lines _____

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual ☑ Public ☐

Installed by _____

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY _____

COMMENTS Existing septic tank system functioning properly at the time of inspection.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY Steve Brown DATE 3-5-92.

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

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