14254.

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR ROGER DAVIS 3-20-92. PERMIT NO 92-A-36.

PHONE Business ____ Home ____

LOCATION Logan Store Rd. off Salem Church Rd. - go 6 mile N.L. on small dirt street 200 yards on R. S.R. No. ____

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

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal (Yes) (No) Soil Characteristics Prov. Suitable.

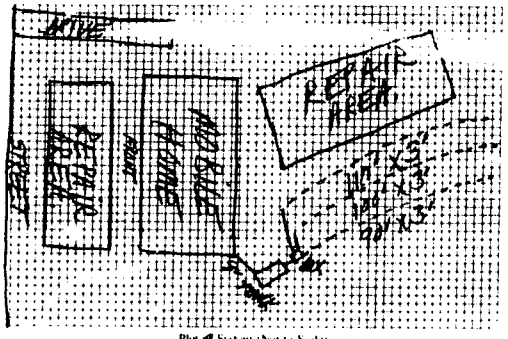
Auto. Dishwasher (Yes) (No) Application Rate 600 lin. ft.

Auto. Wash Machine (Yes) (No) Topography 2-6%

Lot Area Appx. ½ acre. Depth to Water Table 10+

Rock or other impervious formations scattered rock.

( ) Basement with Plumbing ( ) Basement without Plumbing (✓) No Basement ( ) Crawl Space



Plot of System (Not to Scale)

Size of Tank 1000

Stabilization Field 3

Feet of Lines 700 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply (✓) Individual ( ) Public

Installed by Paul Thomas Frye

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 Steve Brown

COMMENTS May put 3 bedr. mobile home on lot later.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 3-20-92

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 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