11902.

37968

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 11(C)

DATE 8-23-90 PERMIT NO 8M-A-151T

OWNER OR CONTRACTOR Johnny Sherrill

PHONE: Business _____ Home _____

LOCATION Island Ford Rd. off Hwy 90 W-T.R. on Lippard Farm Rd. - appx. ½ mi. on left S. R. No. _____

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

House ( ) ~~Double Wide~~ Mobile Home (X) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Character & Porosity of Soil Loam Suitable

Percolation Rate 45 min/in

Topography Rolling

Depth to Water Table 10'+

Rock or other impervious formations None observed

Lot Area Acre. ___ No Basement

___ Basement with Plumbing ___ Basement without Plumbing

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 300 Linear Ft. 300

Depth of Stone in Lines 17"

Water Supply: Individual (X)

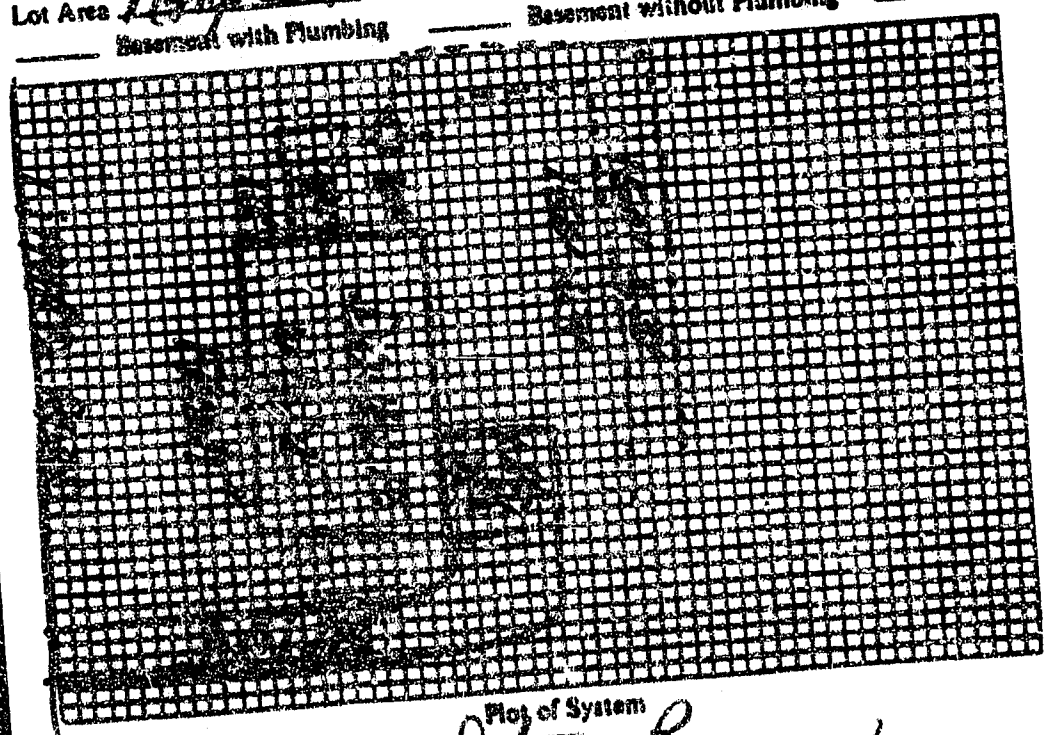
Public ( )

Installed by Jason Hudler

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

Signed: _____

Plot of System



IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 8-23-90.

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