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 RALPH G. YOUNT DATE 4-12-84 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40 west, T.R. on Old Mtn. Rd. - 2nd industrial bldg. on left. (Fame Plastics). S. R. No. _____

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

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

No. Bedrooms _____ No. Bathrooms 3

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes ( ) No (✓)

Site Suitable Yes (✓) No ( )

Lot Area Ample

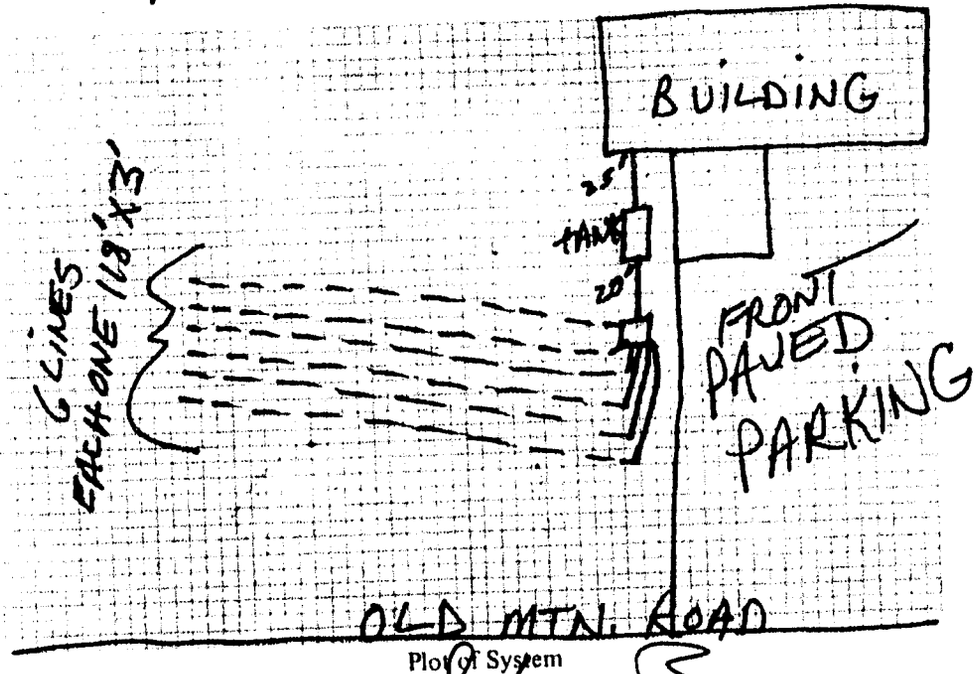
Character & Porosity of Soil Prev. Suitable

Percolation Rate .5gal/sq.ft.

Topography 2-6%

Depth to Water Table 10+

Rock or other impervious formations none observed.



Plot of System

Size of Tank EXISTING 1500 Gals.

Nitrification Field:

No. of Lines 6

Sq. Ft. 2124 Lineal Ft. 708

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Robert Hake

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: System designed for no more than 40 employees. Old drain field abandoned. Tank pumped.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 4-12-84

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