05519

# 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 FANNIE LOVE DATE 10-22-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 70 west - T.L. on Sippard Town Rd. - go approx. 3/4 mi. T.R. into dev. & bear left - 150 yards on left. S. R. No. _____

SUBDIVISION NAME HAPPY ACRES LOT NO. 28 SECTION OR BLOCK NO. _____

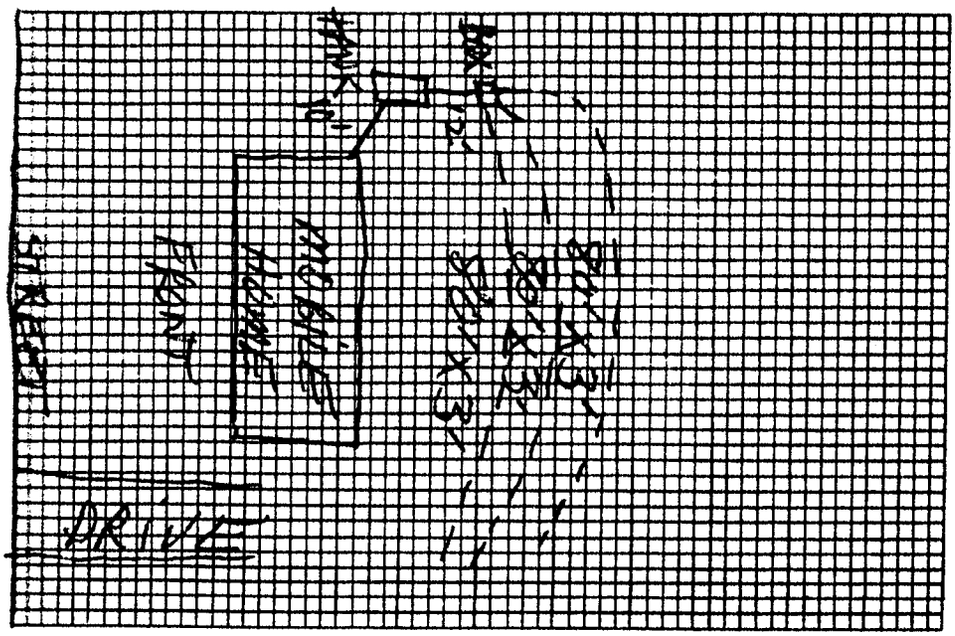
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2-3 No. Bathrooms 1-2

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 Prov. Suitable.
Percolation Rate .5 gal./sq. ft.
Topography 2-6%
Depth to Water Table 10'+
Rock or other impervious formations none observed.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ 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 Dennis Hallibee

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Landscape over S.T. system.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 10-22-86.

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