36779

# IREDELL COUNTY HEALTH DEPARTMENT

## (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

11338

OWNER OR CONTRACTOR RANDY L. FEIMSTER DATE 9/25/90 PERMIT NO. 9J-A-46A

PHONE: Business ______ Home ______

LOCATION NC 90 W, TR ORBIT DRIVEWAY, TR GRAVEL DRIVE ~ 1/2 MILE. S. R. No. ______

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

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 15 AC

Character & Porosity of Soil PS

Percolation Rate .4

Topography 2-6%

Depth to Water Table 10' +

Rock or other impervious formations NONE

______ Basement with Plumbing ✓ Basement without Plumbing ______ No Basement

TP 7-12-90

Size of Tank 1500 Gals.

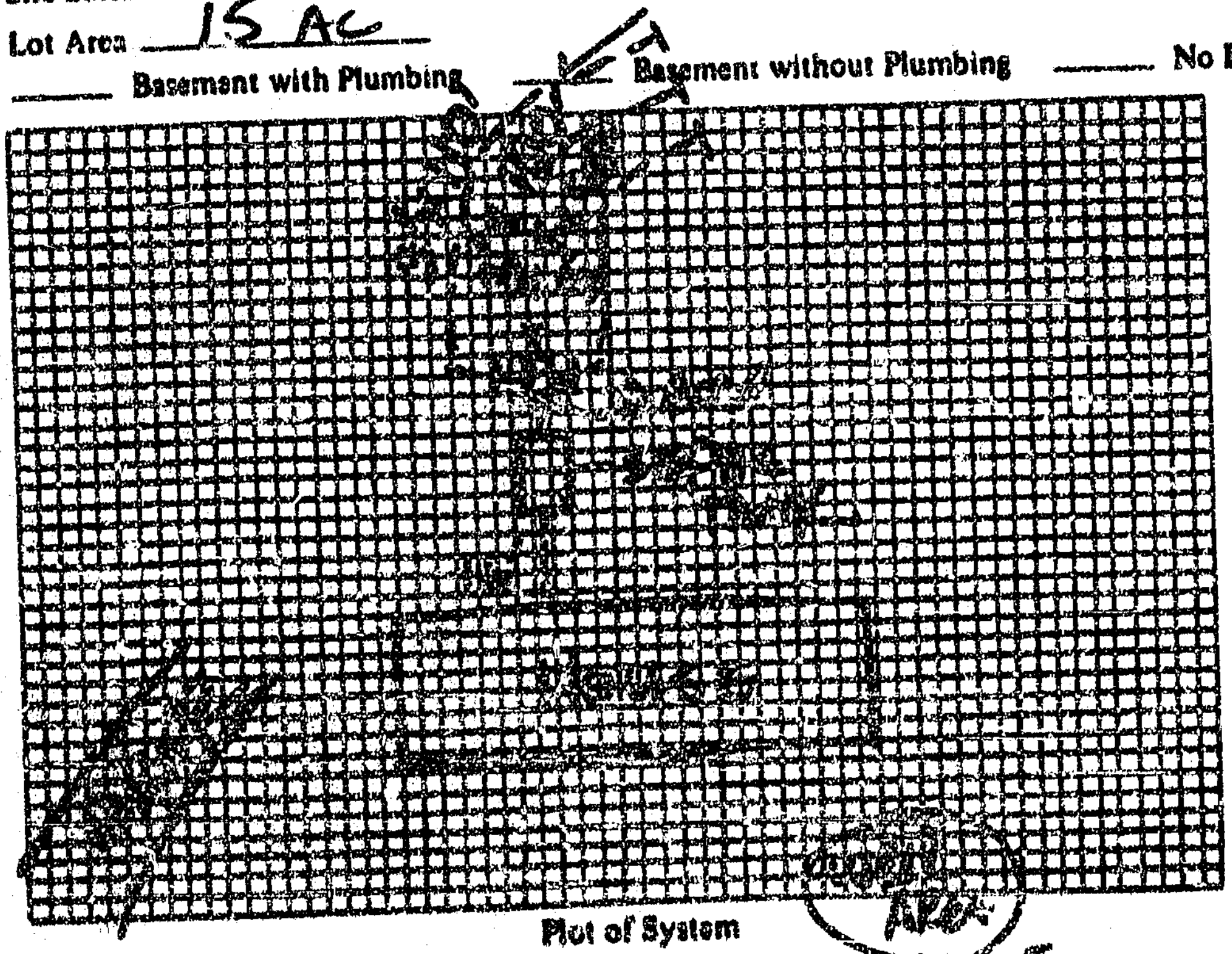
Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓) Public ( )



Plot of System

Installed by JAMES HUDDER

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

Signed: ______

IMPROVEMENTS PERMIT BY GLENN FOX, JR

COMMENTS: ______

CERTIFICATE OF COMPLETION BY STEVE [illegible] DATE 9/25/90

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