IREDELL COUNTY HEALTH DEPARTMENT

41047

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

13277
OWNER OR CONTRACTOR DANNY C. DYRE DATE 9/5/91 PERMIT NO. 90-A-7A

PHONE: Business _____ Home _____

LOCATION NC 115N, TL MIDWAY DR, TR LIBERTY HILL RD, ~1-1½ Mi on (L) S. R. No. _____

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

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

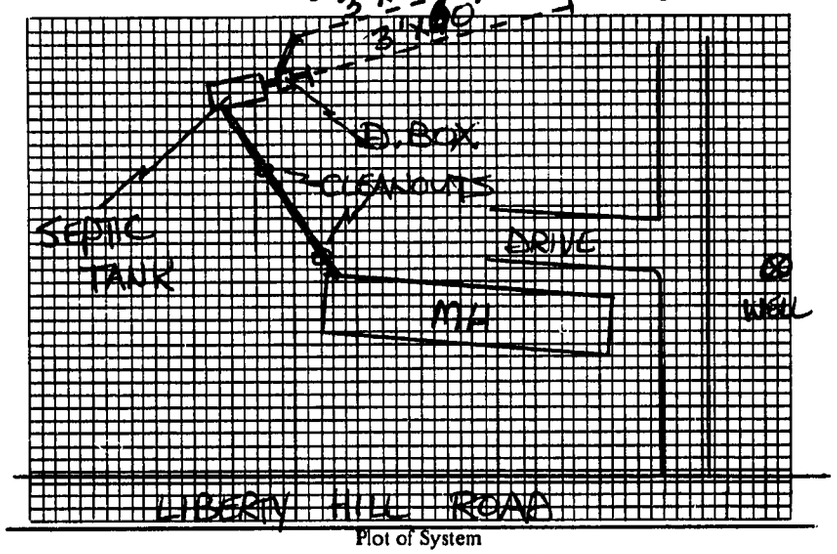
No. Bedrooms 2 No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil PS
Percolation Rate .6 GPD / FT² @ 4"-60"
Topography
Depth to Water Table >4'
Rock or other impervious formations NONE

Lot Area 26 AC

_____ Basement with Plumbing 1400' Basement without Plumbing ✓ No Basement

TP 5/21/91



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 420 Linear Ft. 140
Depth of Stone in Lines 12"
Water Supply: Individual (✓) WELL
Public ( )

Installed by JOHN MENSCER

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HEDRICK

COMMENTS: _____

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 9/5/91

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