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IREDELL COUNTY HEALTH DEPARTMENT

SEPTIC TANK IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION 41049
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 115 N, TL MIDWAY DR, TR LIBERTY HILL RD, ~1-1/2 MI ON (L)

S. R. No. .....

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

Residence (1) Mobile Home (✓) Business ( ) Other .....

No. Bedrooms 2 No. Bathrooms 2 Character & Percents of Soil PS

Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate .6 GPD / FT²

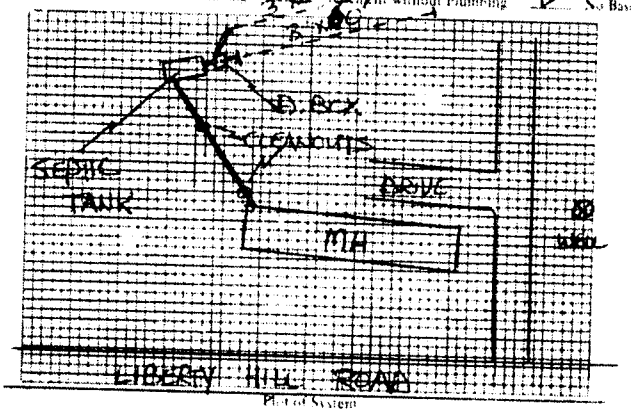
Auto. Dishwasher Yes (✓) No ( ) Topography FLAT

Auto. Washer Machine Yes (✓) No ( ) Depth to Water Table >4'

Site Suitable Yes (✓) No ( ) Rock or other impervious formations NONE

Lot Area 2.6 AC

Basement with Plumbing ..... 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 MENZER

I am familiar with and agree to install septic tank systems in accordance with this Improvements Permit.

Signed .....

SUITABILITY EVALUATED BY STEVE HENDRICK

COMMENTS .....

CERTIFICATE OF COMPLETION STEVE HENDRICK DATE 9/5/91

EXISTING SYSTEM CHECKED BY ..... DATE .....

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS

Caution: VOID if any conditions and/or changes are made in the plans as approved on this Improvements Permit.

White Top Copy - Water Supply Inspection Dept. Copy Yellow Sanitarian's Copy Pink Owner's Copy Gold

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