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IREDELL COUNTY HEALTH DEPARTMENT

31814

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

OWNER OR CONTRACTOR JERRY PRICE

PHONE: Business _____ Home _____ DATE 1-2-90 PERMIT NO. 85-B-394

LOCATION Hwy 64-70 W-T.L. at Tyntsville-T.R. pr Lewisville-Clemmons Rd. go approx 3/4 mi. T.L. at gate-follow rd. left.

SUBDIVISION NAME _____ LOT NO. _____ S. R. No. _____

House ( ) Mobile Home ( ) Business ( ) Other _____ SECTION OR BLOCK NO. _____

No. Bedrooms 3 No. Bathrooms 2.5

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes (X) No ( )

Lot Area 10.5 acres

Character & Porosity of Soil Clay Suitable

Percolation Rate 30 Min/Inch

Topography Level

Depth to Water Table 10'

Rock or other impervious formations Not observed

Basement with Plumbing ____ Basement without Plumbing ____ No Basement ✓

Size of Tank 1000 Gals.

Nitrification Field: No. of Lines 3 Sq. Ft. 225 Linear Ft. 240

Depth of Stone in Lines 12

Water Supply: Individual ( ) Public (X)

Plat of System

Installed by Jerry Pruett

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

Signed: _____

IMPROVEMENTS PERMIT BY Neal Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Neal Brown DATE 1-2-90

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