12288. 39041

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 LAWRENCE HOLTON DATE 1-23-91 PERMIT NO. 8K8-A-15.

PHONE: Business _____ Home _____

LOCATION Old Mtn. Rd. south by White Oaks - T.L. on Bethlehem Rd. - 1/4 mi. on left. S. R. No. _____

SUBDIVISION NAME MOUNTAIN ROAD VILLAGE LOT NO. 15. SECTION OR BLOCK NO. _____

House ( ) ~~Doublewide~~ Mobile Home ( ) Business ( ) Other _____

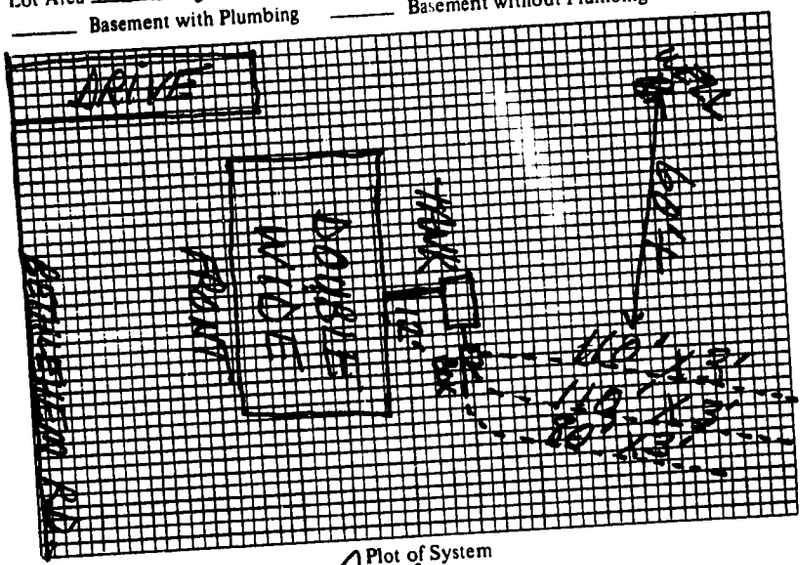
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No ( )
Auto. Dishwasher Yes ( ) No ( )
Auto. Wash. Machine Yes ( ) No ( )
Site Suitable Yes ( ) No ( )

Character & Porosity of Soil Prof. Suitable
Percolation Rate 30 min/1 in.
Topography 2 - Slopes
Depth to Water Table 10'+
Rock or other impervious formations were observed.

Lot Area .59 acres.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.
Nitrification Field: 3
No. of Lines 100 Linear Ft. 300
Sq. Ft. _____
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public ( )

Installed by Dennis Sprinkle

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

Signed: _____

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 1-23-91

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