10986.

36456

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 PIEDMONT FARM SYSTEMS DATE 5-1-90 PERMIT NO. 9E-A-62.

PHONE: Business _____ Home _____

LOCATION Hwy 90 W-T.L. Carlton Rd. at Forney - 200 yards on R.

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

House ( ) Mobile Home ( ) Business (4) Other 4 full time employees 4 part time employees.

No. Bedrooms _____ No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (4)

Auto. Dishwasher Yes ( ) No (4)

Auto. Wash. Machine Yes ( ) No (4)

Site Suitable Yes (4) No ( )

Lot Area 5.15 acres.

Character & Porosity of Soil Fair Suitable.

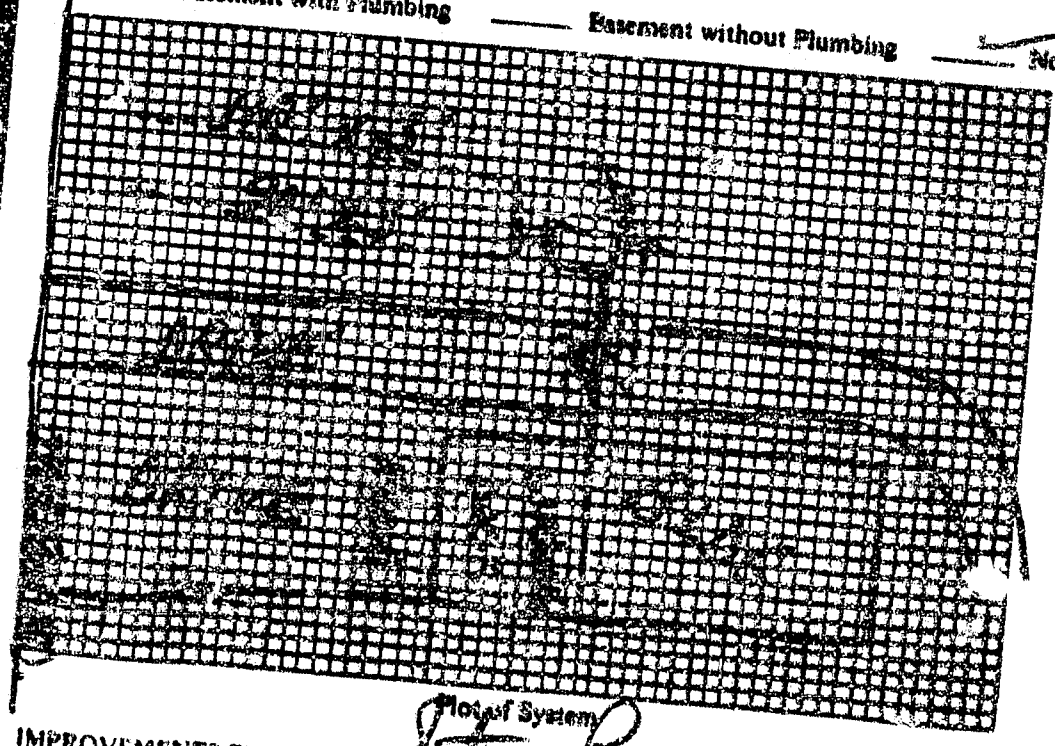
Percolation Rate Not tested.

Topography Rolling

Depth to Water Table 10'+

Rock or other impervious formations None observed.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 400 Linear Ft. 200

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (4)

Plot of System

Installed by James Hudler

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Flow divider used.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 5-1-90

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