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 RONALD ROBINSON (FLAKE PRATT) DATE 8-18-83 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90 west to Loray, T.L. on Loray Lane (muddy lane), go .8 mi. + T.R. on grave/drive at Don West house, house at end of drive.

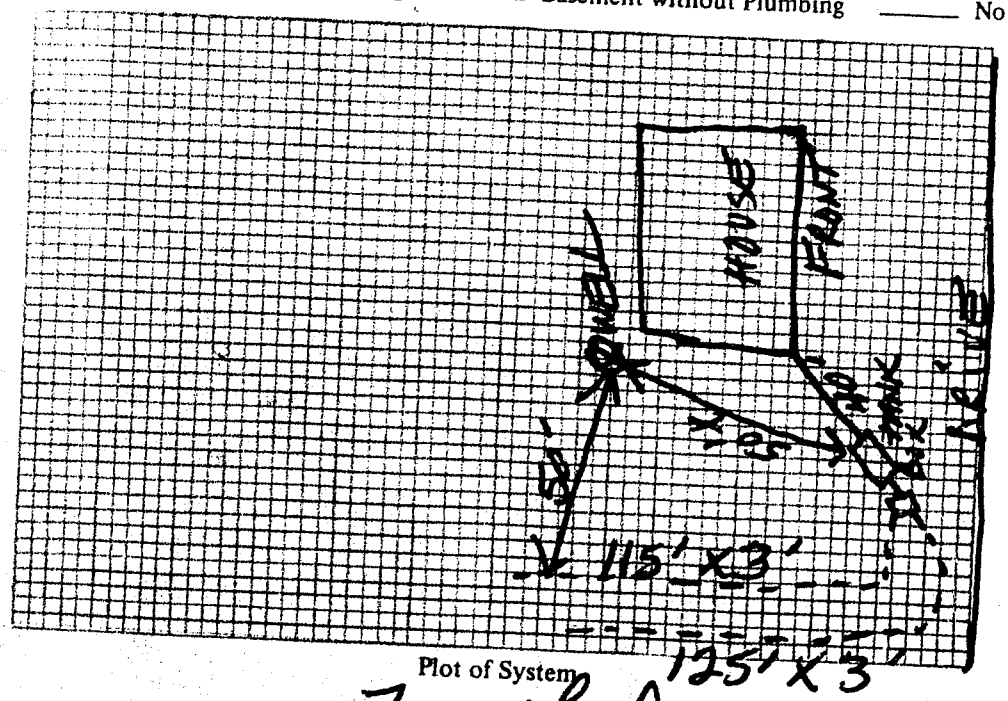
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2.5

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Prev. Suitable	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	5 gal/sq.ft.	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-6%	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'+	
Lot Area 1.5 acres			Rock or other impervious formations	none observed.	

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by J.C.'s Backhoe

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

Signed: _____

IMPROVEMENTS PERMIT BY Terry L. Pierce

COMMENTS: Landscape over S.T. system to facilitate surface drainage. Do not drive over tank or drain lines!

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Steve Brewer DATE 8-18-83

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