Not on Computer

IREDELL COUNTY HEALTH DEPARTMENT

10919

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

OWNER OR CONTRACTOR MARK THOMAS DATE 8/3/90 PERMIT NO 9D-12-A-49

PHONE: Business _____ Home _____

LOCATION 90W TO LITTLE FARM 2ND ENTRANCE TO CEDARLEDGE
1ST DRIVE ON (L)

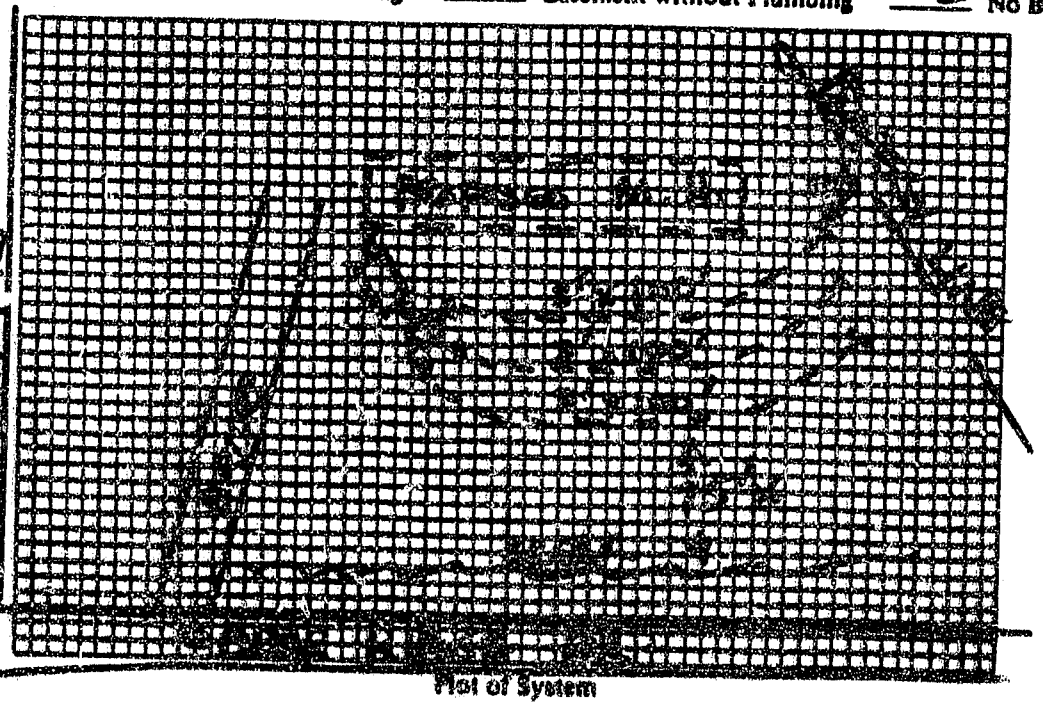
SUBDIVISION NAME CEDARLEDGE LOT NO. 49 SECTION OR BLOCK NO. 2 S. R. No. _____

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

No. Bedrooms _____ No. Bathrooms _____
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 1.6 AC

Character & Porosity of Soil PROV. SUITABLE
Percolation Rate .4
Topography 2-15%
Depth to Water Table 10'+
Rock or other impervious formations NONE

_____ Basement with Plumbing _____ Basement without Plumbing (✓) No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by KEN DELLINGER

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

Signed: _____

IMPROVEMENTS PERMIT BY D WEAVER

COMMENTS: _____

CERTIFICATE OF COMPLETION BY STEVE HENDRICK / GLENN BOX, JR DATE 9/18/90

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