11342

IREDELL COUNTY HEALTH DEPARTMENT

36884

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

OWNER OR CONTRACTOR Gary Dyson DATE 9-13-90 PERMIT NO. 8H-9-A-15

PHONE: Business [illegible] Home

LOCATION Exits 45 & 151 off north Rd TR into Spring meadows 1st st. TR at end of cul de sac S. R. No.

SUBDIVISION NAME Spring meadows LOT NO. 15 SECTION OR BLOCK NO.

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

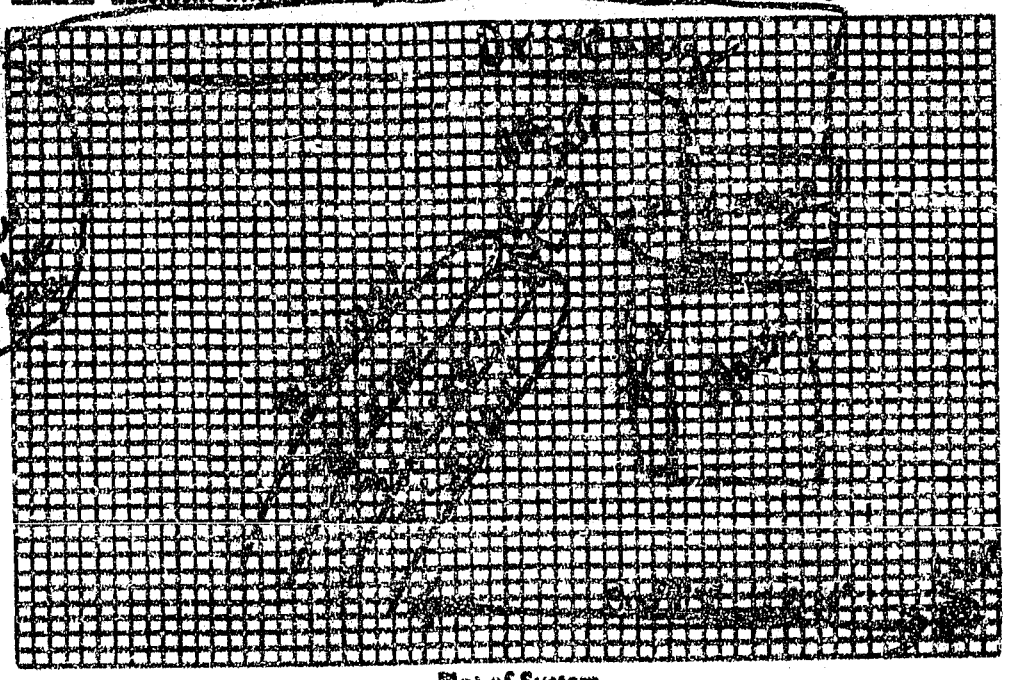
No. Bedrooms 4 No. Bathrooms 4

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

Lot Area 14.5 acres

Character & Porosity of Soil Prev. Suitable
Percolation Rate 14
Topography Z to GS
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 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Wes Lytton

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY R. F. Moore DATE 9-13-90

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