09773

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 TODD PARLIER DATE 3-28-89 PERMIT NO. 14B

PHONE: Business _____ Home _____

LOCATION Hwy 115 North Hall Rd. west - T.R. into Bastian Heights - go to stop sign T.R. go 2nd left - go 1st T.L. - 100 yards on R.

S. R. No. _____

SUBDIVISION NAME BASTIAN HEIGHTS DEV. LOT NO. _____ SECTION OR BLOCK NO. _____

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

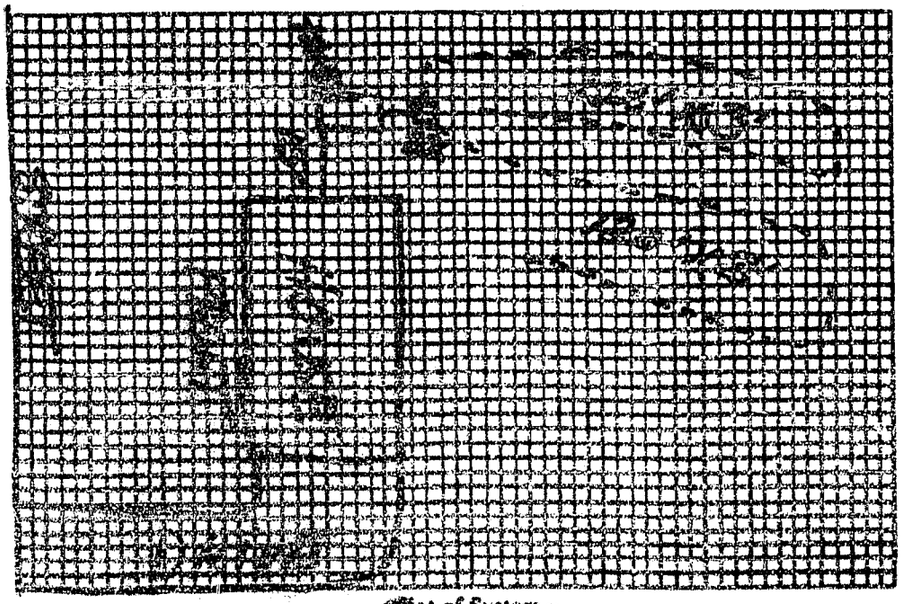
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area Ample.

Character & Porosity of Soil Loam, Suitable.
Percolation Rate 30 min. per in.
Topography Level
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. 120 Linear Ft. 240
Depth of Stone in Lines 12
Water Supply: Individual (✓)
Public ( )

Installed by Andy Daniels

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

Signed: _____

Plot of System

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 3-28-89

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