02996

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 Jaspor Tedder DATE 6/10/85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Buffalo Shoals, Rt on Airport, Rt into Deerfield, Rt on 1st Drive, Lot on Lt ≈ .1 mile S. R. No. _____

SUBDIVISION NAME Deerfield Estates LOT NO. 31 SECTION OR BLOCK NO. _____

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

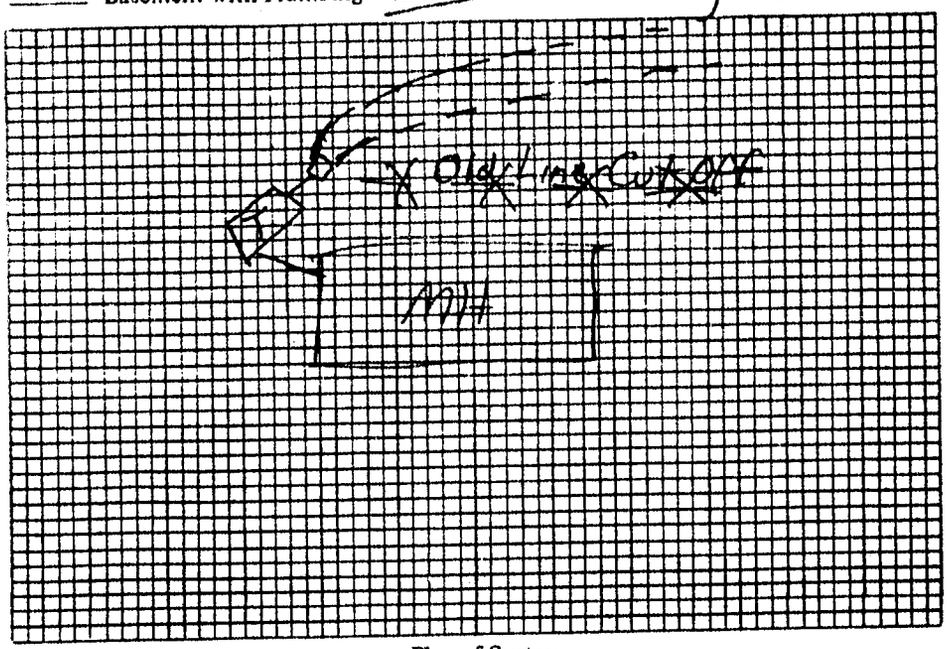
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Repair of system
Percolation Rate Due to Improper Location
Topography of Mobile Home
Depth to Water Table
Rock or other impervious formations

Lot Area _____

_____ Basement with Plumbing New 3'x60' Line _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 180 Linear Ft. 60
Depth of Stone in Lines 12
Water Supply: Individual ( )
Public (✓)

Installed by Ken Chaffin

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: 60' of Old Line Cut Off to Allow for MH to be moved back Eight (8) feet. Gravity fall must be maintained from MH to Tank!!

CERTIFICATE OF COMPLETION BY _____ DATE 6/10/85

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