41370

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

13579 OWNER OR CONTRACTOR JENKINS & WILLIAMS DATE 12/17/91 PERMIT NO. 9B-13-A-40

PHONE: Business _____ Home _____

LOCATION NC 90 W, TR MONTICELLO AR, TL MILLER FARM ROAD, TL BEECH BROOK 9TH LOT ON (L) S. R. No. _____

SUBDIVISION NAME PINEY OAKS LOT NO. 40 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3

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 PS

Percolation Rate .35 GPD / FT2

Topography 2-4% LS

Depth to Water Table >4'

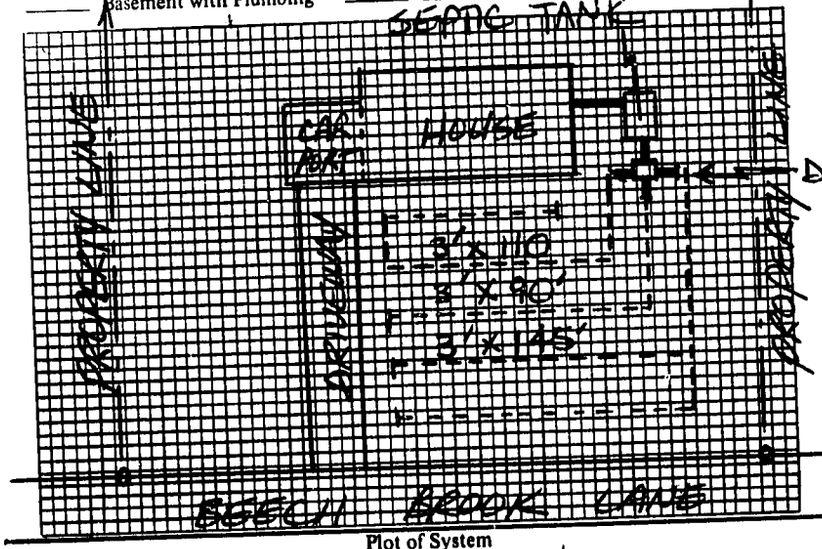
Rock or other impervious formations NONE

REPAIR AREA

TP 9/26/91

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

SEPTIC TANK



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1035 Linear Ft. 345

Depth of Stone in Lines 12"

Water Supply: Individual ( ) Public (✓)

Installed by TOMMY FRYE

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HEDRICK

COMMENTS: _____

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 12/17/91

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