43573

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

14761

OWNER OR CONTRACTOR Timothy P. Hope DATE 1/29/93 PERMIT NO. 9A-8-A-27

PHONE: Business 876-1353 Home

LOCATION NC 115 N, TL Scotts Creek Road, 6th Lot on (R) past Bowman Road (SR 1638) S.R. No.

SUBDIVISION NAME Brookhollow Estates LOT NO. 27 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 ☐

Lot Area 100' x 150'

Soil Characteristics PS

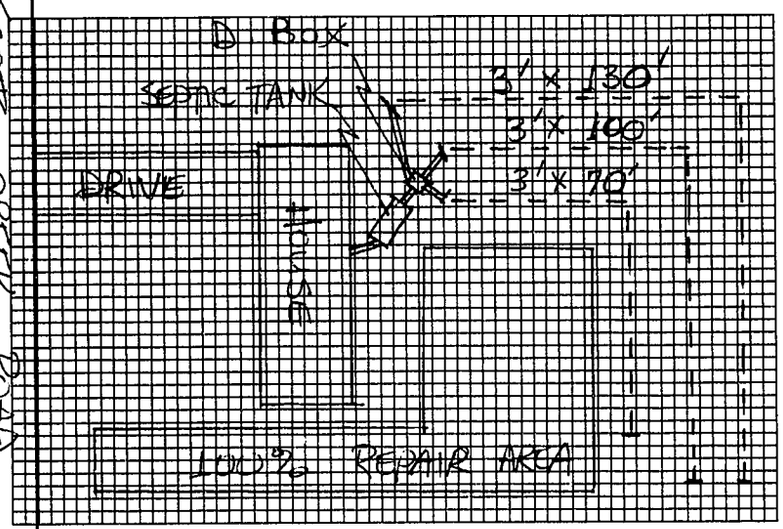
Application Rate 0.40 GPD / FT²

Topography 2-4% LINEAR

Depth to Water Table >4'

Rock or other impervious formations NONE

___ Basement with Plumbing ___ Basement without Plumbing \ No Basement ✓ Crawl Space



Plot of System (Not to Scale)

ACP
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 Harry Reep

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

Signed:

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY Steve Hedrick

COMMENTS Repair area is 100% conventional, gravity-fed

CERTIFICATE OF COMPLETION BY Steve Hedrick DATE 1/29/93

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold