04681

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 Charles Wesley Feimster DATE 12-5-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 115 N - TL on Cowhouse Rd - Then Trinity Ch Rd 60 appx 3/4 Mile - TL Private Dr 1st House on R.

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

Basenajr

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 4.46

Character & Porosity of Soil Gen. Cuthbert

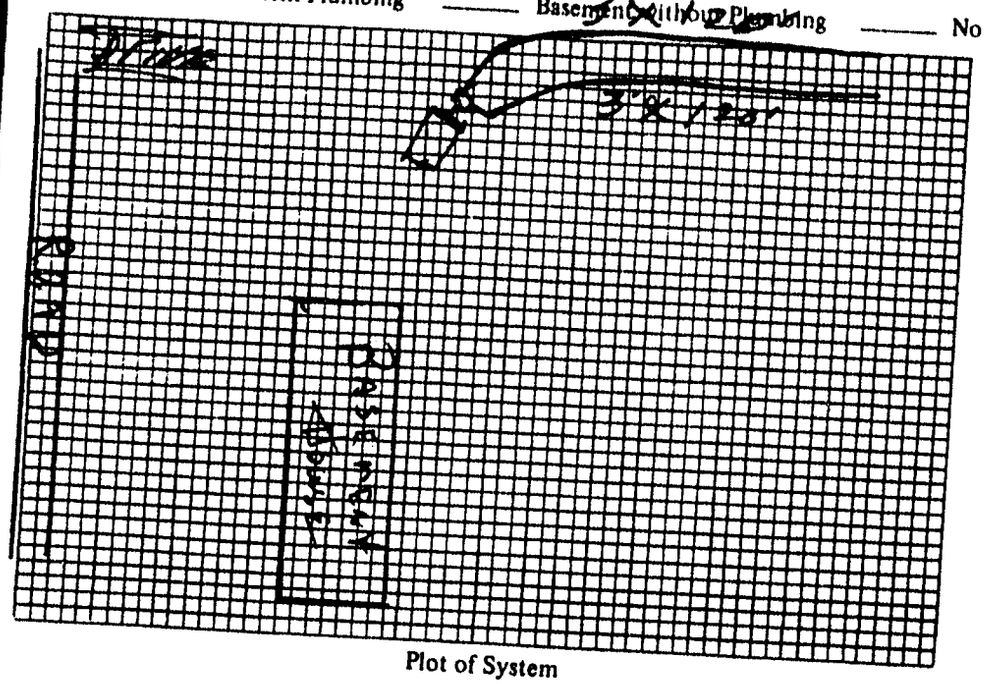
Percolation Rate 5 gals sq ft appl.

Topography 1 x 1 16" Ht

Depth to Water Table 6'7

Rock or other impervious formations None

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by James Hartman

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steven Todd

EXISTING SYSTEM CHECKED BY: _____ DATE 12/5/86

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