35163

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

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

10220

OWNER OR CONTRACTOR Daniel Taylor DATE 9/5/87 PERMIT NO. 810

PHONE: Business _____ Home _____

LOCATION 115 N & Weston R Becker at end Near Left past Chickenbone Rd on hill S. R. No. _____

SUBDIVISION NAME _____ 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 1 Act

Character & Porosity of Soil pro suitable

Percolation Rate 30 min/in

Topography slight slope

Depth to Water Table 10 ft

Rock or other impervious formations None

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

Size of Tank 1000 gals.

Nitrification Field:

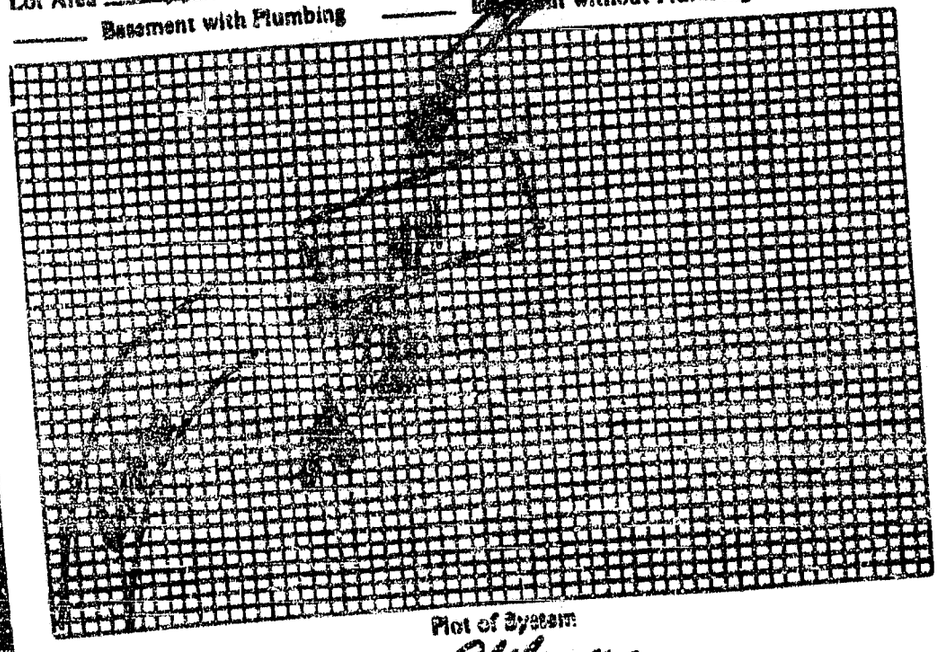
No. of Lines 2

Sq. Ft. 600 Linear Ft. 300

Depth of Stone in Lines 24

Water Supply: Individual (✓)

Public ( )



Plot of System

Installed by Wayne Potts

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

Signed: _____

IMPROVEMENTS PERMIT BY Bill Casey

COMMENTS: _____

DATE 9/5/87

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____

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