41562

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

11480 OWNER OR CONTRACTOR KENNETH HOPE DATE 2/10/92 PERMIT NO. 14B-1-A-2

PHONE: Business _____ Home _____

LOCATION NC 115 N, TL PISGAH CHURCH ROAD, ~100 YARDS ON (L) _____ S. R. No. _____

SUBDIVISION NAME TREE BARK LOT NO. 2 SECTION OR BLOCK NO. _____

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

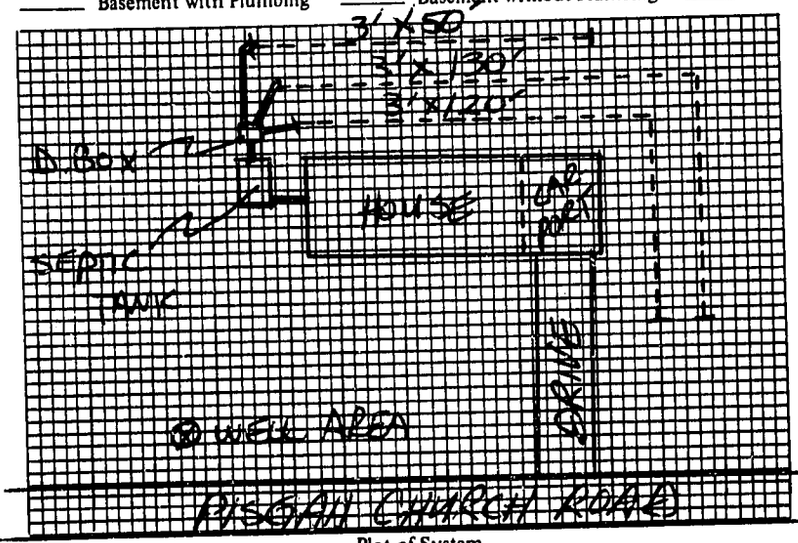
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area AMPLE

Character & Porosity of Soil PS
Percolation Rate .46 GAL / FT²
Topography 2-6%
Depth to Water Table >4'
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 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓) WELL
Public ( )

Installed by ARNIE DUNCAN

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE BROWN

COMMENTS: (1) WELL NOT DUG AT TIME OF INSPECTION.
(2) KEEP WELL MINIMUM 50' FROM SYSTEM.

CERTIFICATE OF COMPLETION BY STEVE HEARICK DATE 2/10/92

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