06823

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 TRITON FINANCIAL LTD. DATE 6-16-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 115 N past Brown Creek on left. S. R. No. _____

SUBDIVISION NAME COUNTRY LIFE ESTATES. LOT NO. 39 SECTION OR BLOCK NO. _____

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

DOUBLEWIDE

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 100' X 200'

Character & Porosity of Soil Sandy Loam Prev. Installed.

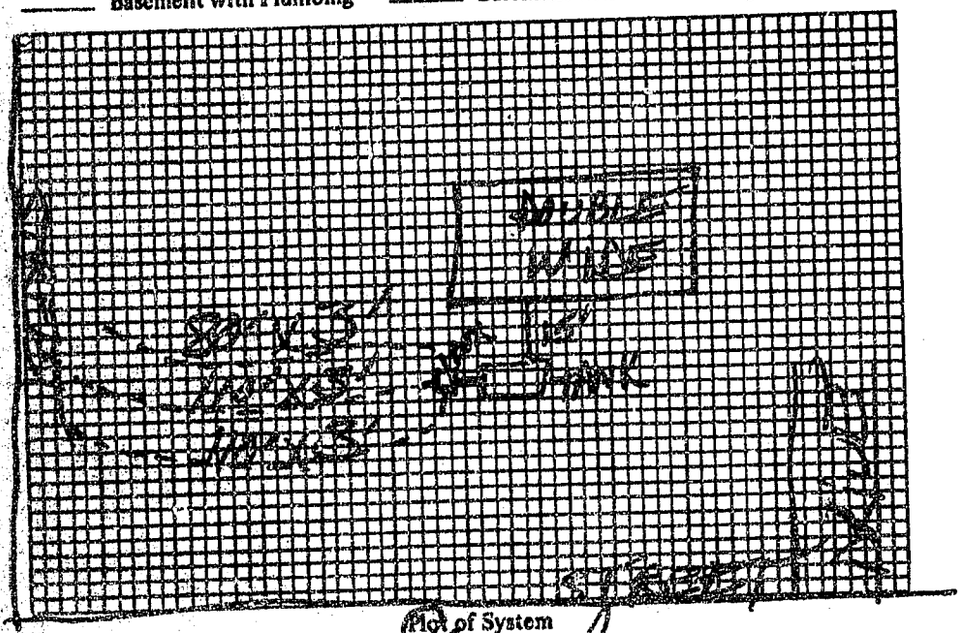
Percolation Rate 4" / 10 min.

Topography 2-6%

Depth to Water Table 10'+ none observed.

Rock or other impervious formations _____

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 300 Linear Ft. 300

Depth of Stone in Lines 24"

Water Supply: Individual ( )
Public (✓)

Installed by Dennis Hellier

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 6-16-87

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