07193

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 Tommy LANCASTER DATE 10-2-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Perth Church Rd. from Statesville - T.R. into dev. before Skipper's Landing - 1st on L at end of street. S. R. No. _____

SUBDIVISION NAME PERTHWOOD ESTATES LOT NO. 24+25 SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other May add 2 bedrooms later.

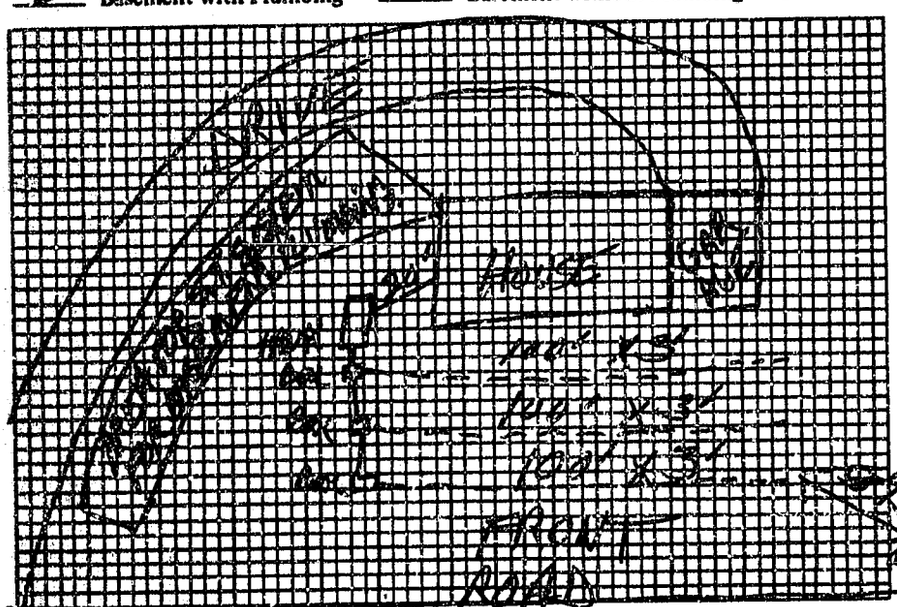
No. Bedrooms 2 No. Bathrooms 2

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 Sandy - Suitable.
Percolation Rate Appl. 1 in 40 ft.
Topography 2-6% slope
Depth to Water Table 10+
Rock or other impervious formations None observed.

(✓) 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 (✓)
Public ( )

Installed by Wayne Dorsett

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Basement plumbing sewage is at this time but S.T. system may be installed later as needed. Main septic for upstairs usage installed at this time & approved.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 10-7-87.

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