14127

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Richard V Compton DATE 2/28/92 PERMIT NO. 3F-12-A-1

PHONE: Business _____ Home 528-6024

LOCATION County Hall Rd., approximately 1/4 mile on (R)

SUBDIVISION NAME N/A S.R. No. _____ 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 ☐

Lot Area 20,000 FT²

Soil Characteristics P-SC-C

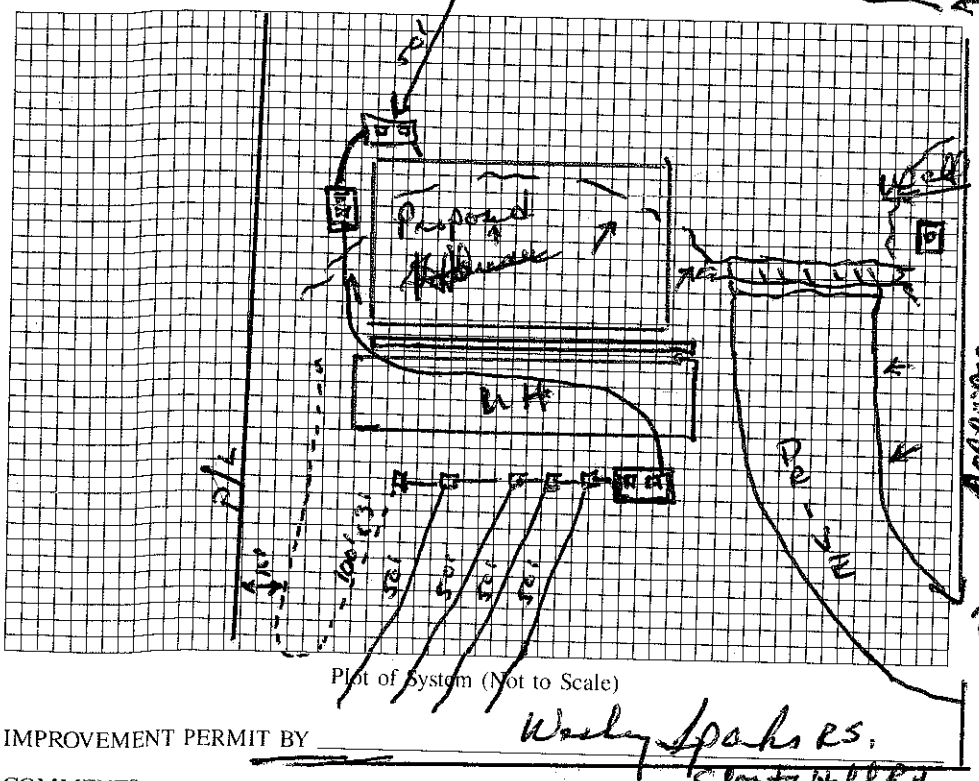
Application Rate .4

Topography 2-3%

Depth to Water Table >48"

Rock or other impervious formations None observed

☑ Basement with Plumbing ☐ Basement without Plumbing ☐ No Basement ☐ Crawl Space



Plot of System (Not to Scale)

Size of Tank 1000 - PT Gals.

Nitrification Field:

No. of Lines 1 - 100'x3'

Sq. Ft. 580 Linear Ft. 500

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐

Installed by _____

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY Wesley Sparks RS, County Hall Rd

COMMENTS Keep trenches shallow as deeper than 30" to trench bottom. use drop boxes in manner shown. Pump should be a grinder pump up to existing septic tank.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold