City

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~~ Ron Oliphant DATE 6-7-85 PERMIT NO. ______

PHONE: Business ______ Home ______

LOCATION Beverly Drive

______ S. R. No. ______

SUBDIVISION NAME Beverly Heights LOT NO. 85 SECTION OR BLOCK NO. ______

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

No. Bedrooms 3 No. Bathrooms 2 1/2

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Clayey

Percolation Rate .4 gal/sq' /day

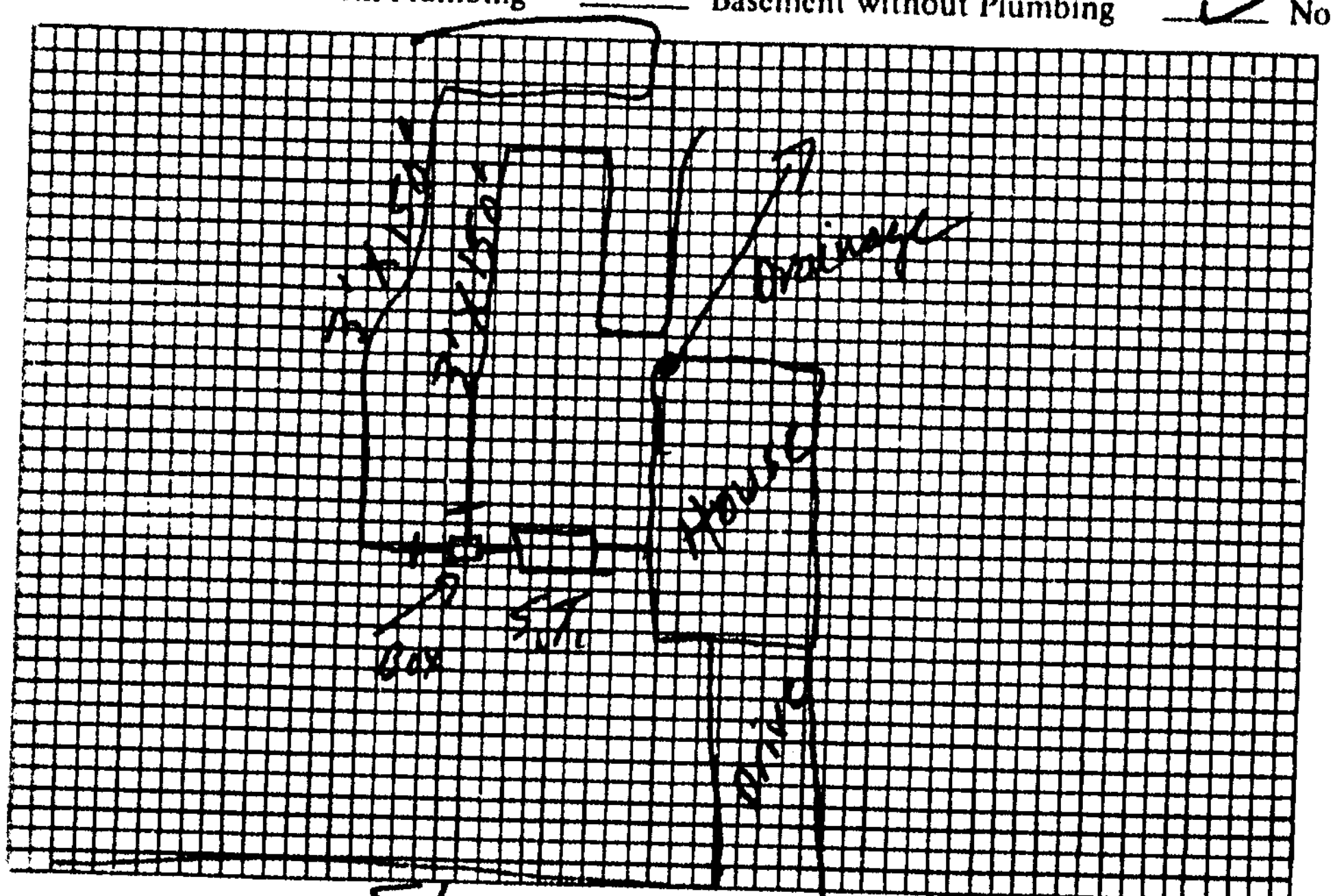
Topography 2 to 6%

Depth to Water Table 10'+

Rock or other impervious formations none

Lot Area approx 18,000 sq'

______ Basement with Plumbing ______ Basement without Plumbing ✓ No Basement



Street

Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Wes ~~[illegible]~~ Lyton

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

Signed: ______

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: ______

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 6-7-85

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