Town of Troutman

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System - G. S. Chapter 130-Article 13C)

DATE 3-22-90 PERMIT NO. 3H-311

OWNER OR CONTRACTOR Cleytus Bass Home

PHONE: Business

LOCATION Autumn Leaf Rd off Hwy 215, 1mi on left at end of Pavement

SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO. S. R. No.

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

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 Brn Suitable

Percolation Rate 1" 9" 15" Avg

Topography Level

Depth to Water Table 10 ft

Rock or other impervious formations None

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

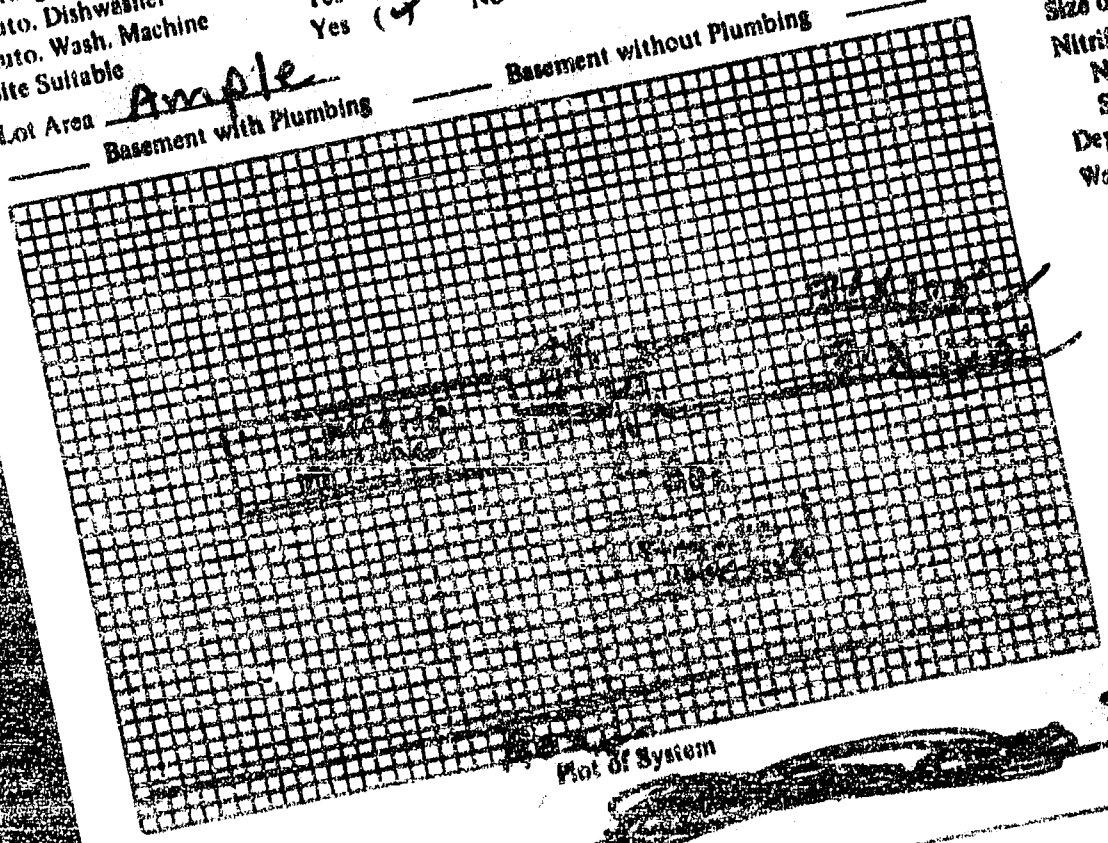
Public ( )

Installed by Wayne Elick

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

Signed:

Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS

CERTIFICATE OF COMPLETION BY DATE 3-22-90

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