4740668102

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 James T. Josey DATE 10-31-85 PERMIT NO. 478

PHONE: Business _____ Home _____

LOCATION 115-21 North TL 1312, TL 1316 (Apple Hill Road) on left 4 miles from Oswalt Machine Shop S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes ( ) No (X)

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area Existing

Character & Porosity of Soil _____

Percolation Rate _____

Topography Existing System

Depth to Water Table _____

Rock or other impervious formations _____

6-30 1981

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement

Size of Tank Existing 1000 Gals.

Nitrification Field:

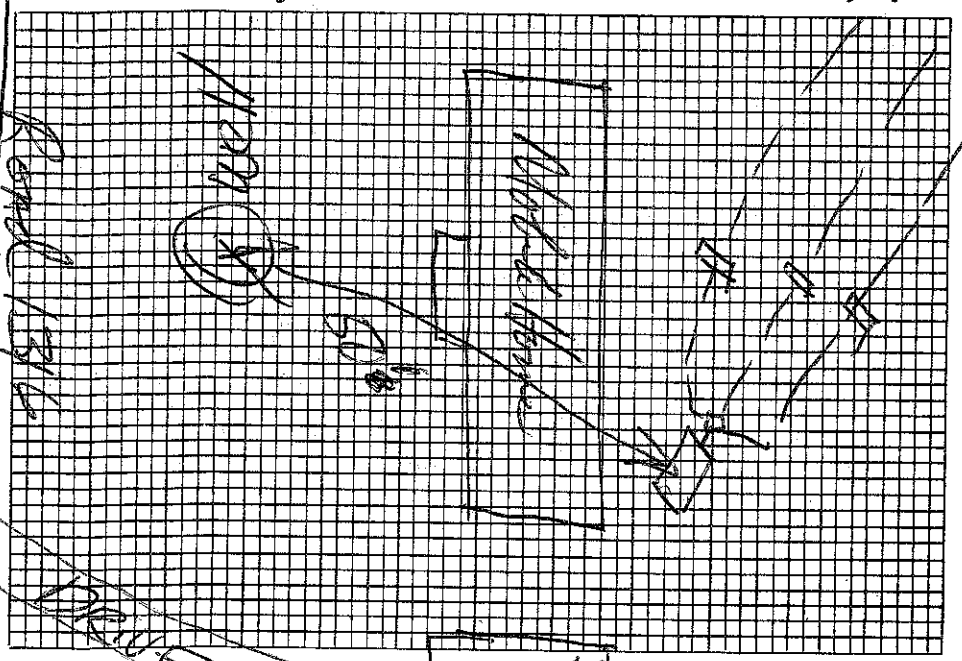
No. of Lines 3

Sq. Ft. 720 Linear Ft. ~~240~~

Depth of Stone in Lines 10"

Water Supply: Individual (X)

Public ( )



Plat of System

6-30-81

Installed by Sam Oswalt

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

Signed: _____

System Checked by D. Ward Hinson 6-30-81

IMPROVEMENTS PERMIT BY: D. Ward Hinson

COMMENTS: Existing System working OK At Time of Inspection

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clanton DATE 10-31-85

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