12289

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 John Lindley DATE 1/18/91 PERMIT NO. Part of 4-6-13-62

PHONE: Business _____ Home _____

LOCATION 115N-21, TR 1001 TR 2378 TR 2377 Kendall Rd, TR 1st pond duct, Cul de sac on (R) S. R. No. _____

SUBDIVISION NAME Kendallwood LOT NO. 9 SECTION OR BLOCK NO. _____

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

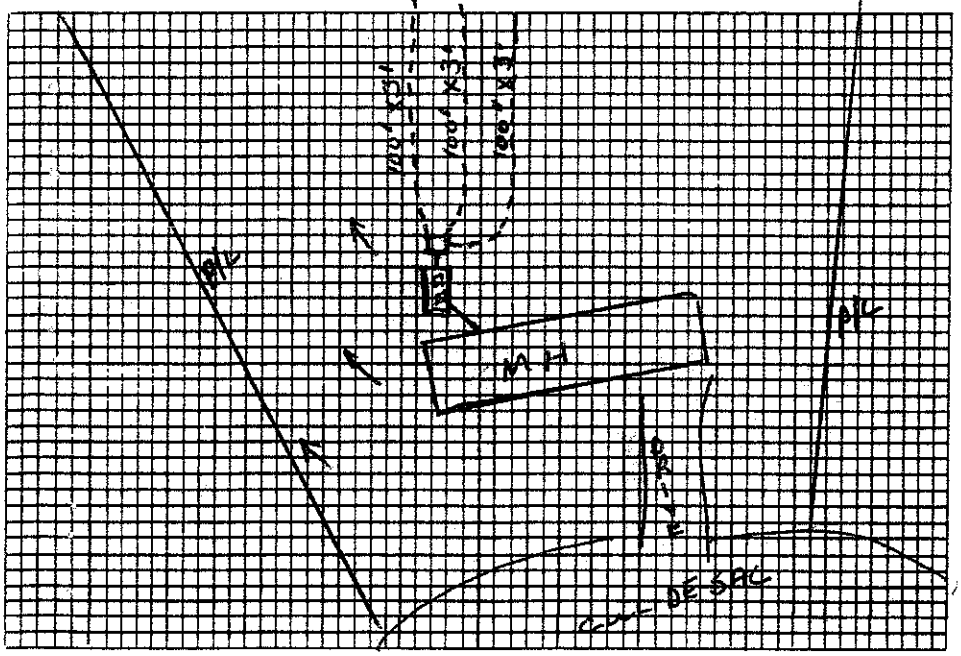
No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil silty clay
Percolation Rate 3'
Topography 4-8%
Depth to Water Table 4'
Rock or other impervious formations none observed

Lot Area 40,000

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 810 Linear Ft. 270
Depth of Stone in Lines 12"
Water Supply: Individual (✓) NOT DRILLED THIS DAY
Public ( )

Installed by Wayne Potts

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. / D.C Hanson EHC DATE 1/18/91

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