4750-98-6224

14626

# IREDELL COUNTY HEALTH DEPARTMENT

## IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Crown Ventures Inc. DATE 6/9/92 PERMIT NO. ____

PHONE: Business ____ Home ____

LOCATION Weathers Creek Rd. -

S.R. No. ____

SUBDIVISION NAME Pleasant Run LOT NO. 21 SECTION OR BLOCK NO. II

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 - c / c trans

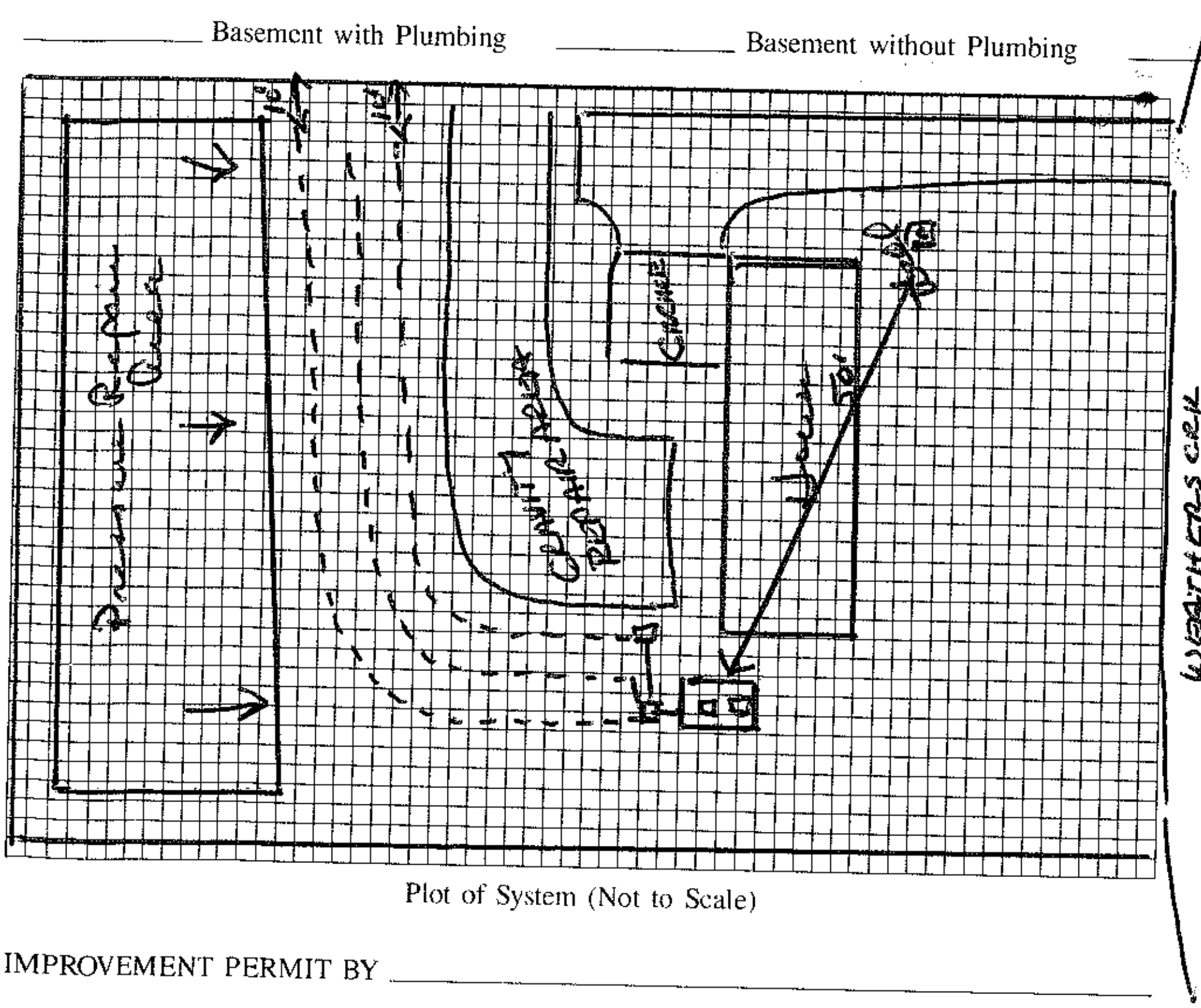
Application Rate P .3 (.4, .5P)

Topography P - 2%

Depth to Water Table S - >48"

Rock or other impervious formations S - None observed

____ Basement with Plumbing ____ Basement without Plumbing ✓ No Basement ✓ Crawl Space



Plot of System (Not to Scale)

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3 @ 133' x 3'

Sq. Ft. 1200 Linear Ft. 400

Depth of Stone in Lines 12"

Water Supply: Individual ☑ Public ☐ (AWS 6/9/92)

Installed by BB&C Concord

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 ____

COMMENTS ____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 6/9/92

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