IREDELL COUNTY HEALTH DEPARTMENT

09536

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Lebron Corporation DATE March 20, '91 PERMIT NO. 4K-2-A-11

PHONE: Business _____ Home _____

LOCATION 21N TR 1001 (Amity-Ostwalt) TR Overcash TL into Windbrook on Right near end S. R. No. _____

SUBDIVISION NAME Windbrook LOT NO. 10 & 11 Combined SECTION OR BLOCK NO. _____

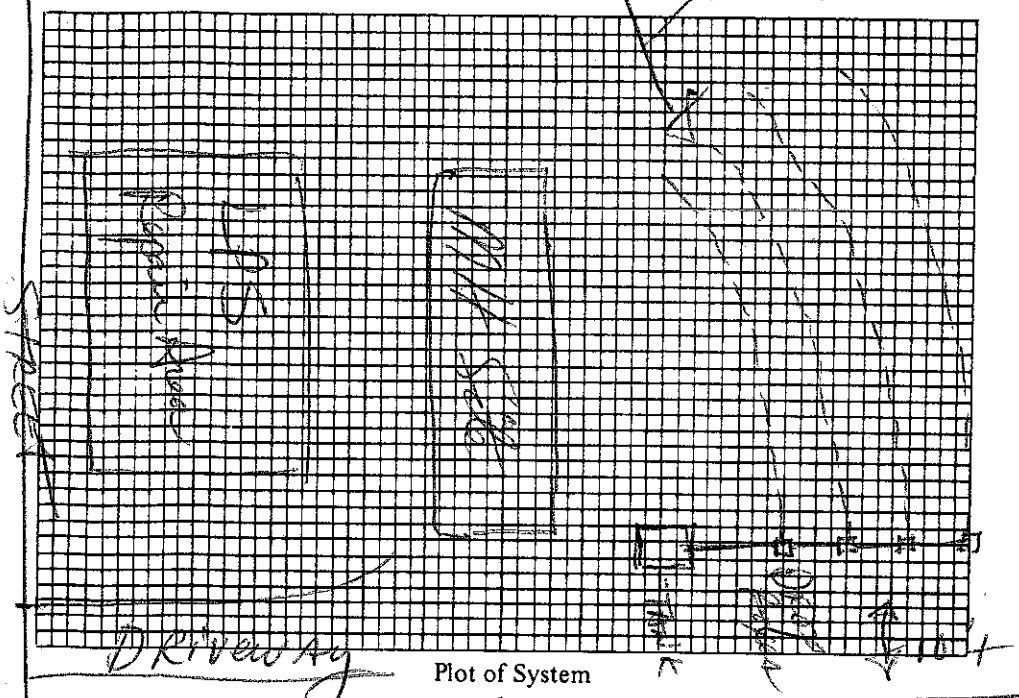
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2 well site

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil: sl clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate: 1:35
Auto. Wash. Machine	Yes (✓)	No ( )	Topography: 4-6%
Site Suitable RS	Yes (✓)	No ( )	Depth to Water Table: 4'+
			Rock or other impervious formations: none obs.

Lot Area ± 1 Ac

_____ Basement with Plumbing _____ Basement without Plumbing ___/___ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Dellinger S.I.

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: Well not installed as of this date. It must be located so as not to interfere with repair area in front yard.

CERTIFICATE OF COMPLETION BY David R. Hunter, EHC DATE 3/20/91

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