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 Robert L. Critcher DATE 3-27-85 PERMIT NO. 97

PHONE: Business ______ Home ______

LOCATION 115 421N TR Oswalt Amity Hill go about 2 miles past the bridge on R down the hill ½ mile past over each Rd at dirt road S. R. No. ______

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

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

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

Site Suitable Yes (X) No ( )

Lot Area 20,000 ft²

Character & Porosity of Soil clay

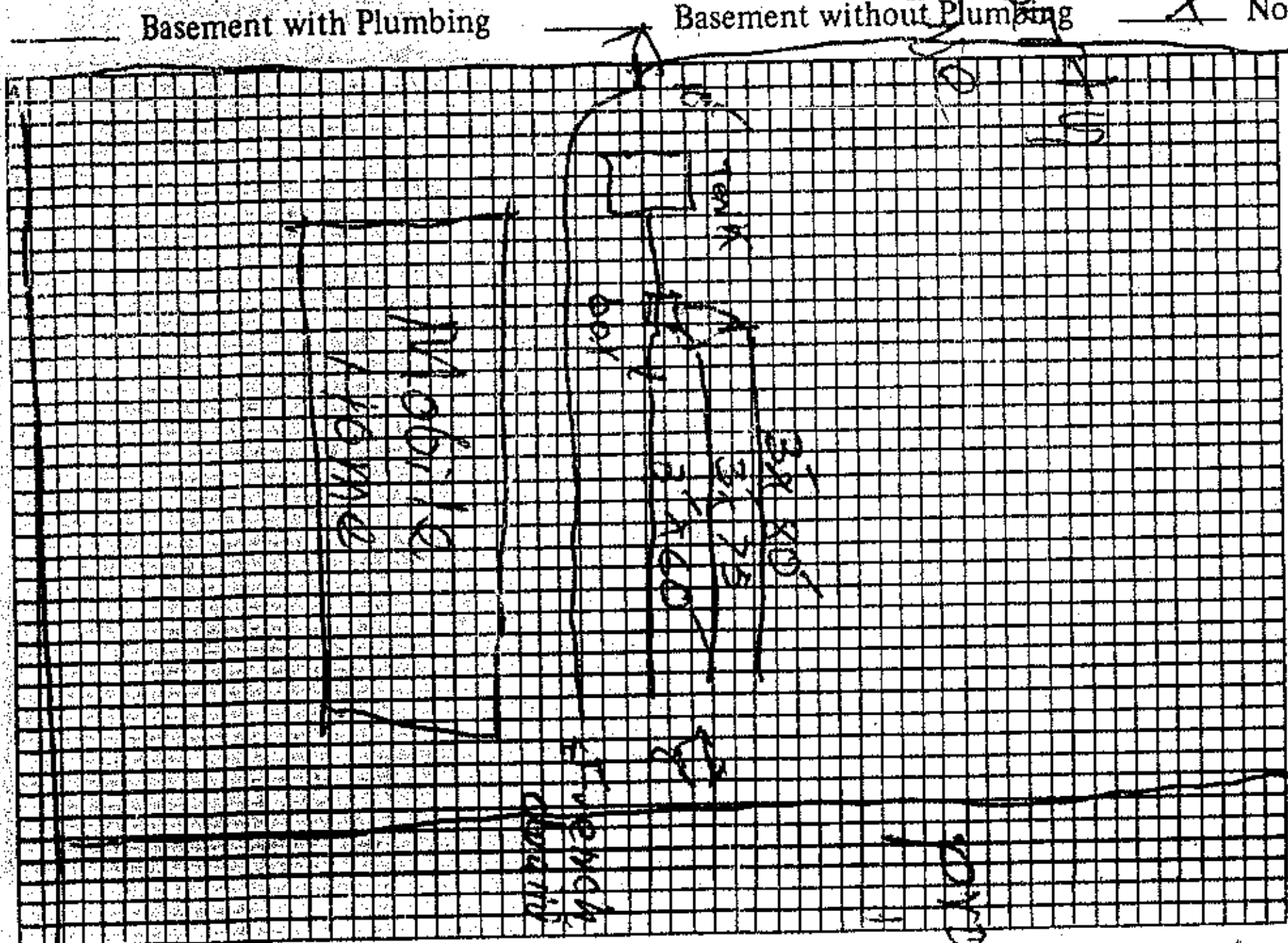
Percolation Rate 0.4 gal/ft²/day

Topography 2-10%

Depth to Water Table 4'

Rock or other impervious formations none observed

______ Basement with Plumbing ______ Basement without Plumbing X No Basement



Plot of System

property line

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 630 Linear Ft. 210

Depth of Stone in Lines 12"

Water Supply: Individual (X) next door
Public ( )

Installed by Donald Lackey

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

Signed: ______

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: ______

CERTIFICATE OF COMPLETION BY Charles K Barnett DATE 3-27-8

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