Statesville
36862

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

Colamco DATE 1-11-90 PERMIT NO. B-15

OWNER OR CONTRACTOR Nolan Boan

PHONE: Business _____ Home _____

LOCATION 70 S on left before Statesville Concrete S. R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

SUBDIVISION NAME _____

House ( ) Mobile Home ( ) Business (X) Other 75 Employee Mfg. Building / 60,000 Sq'

No. Bedrooms _____ No. Bathrooms _____

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

Character & Porosity of Soil Clay loam
Percolation Rate 3 to 120 Mpi
Topography Flat
Depth to Water Table 10 ft
Rock or other impervious formations None

Lot Area 7.49 acres

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Size of Tank 3000 S.T. 3000 P.T. Gals.

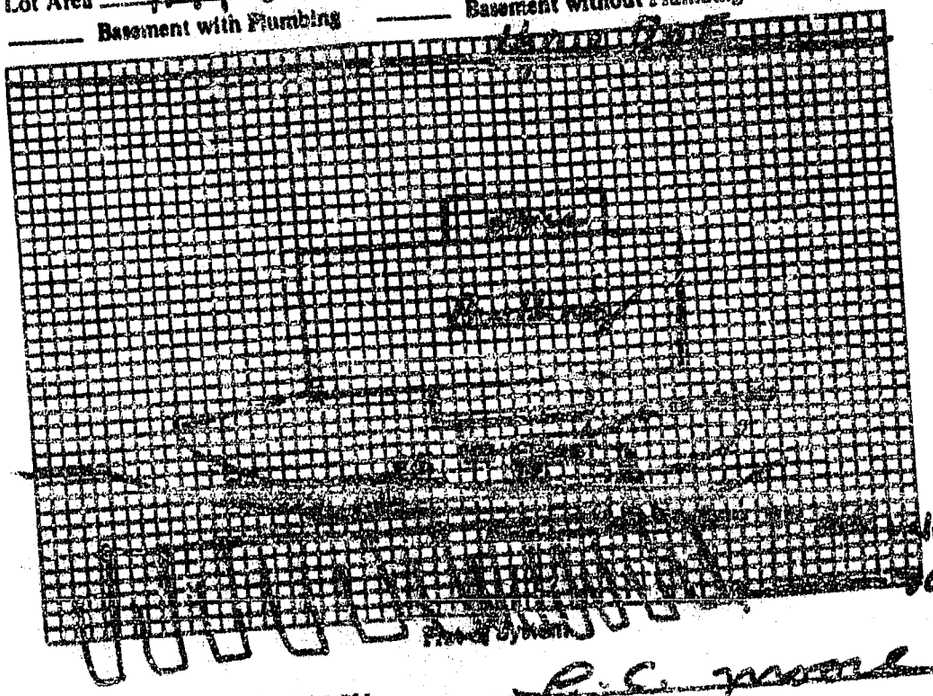
Nitrification Field:
No. of Lines _____
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public (X)
960' 16" T+J Panel

Installed by Ellis Yountz & Sons

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

Signed: _____



IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: Duplex Pumping System 6 lines on each Pumps. 1 Hp pumps on each set Pump No 1 runs 6 lines & lower lines Pump No 2 runs 6 upper lines

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 1-11-90

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