City

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 Gurney + Donna Wike DATE 11-21-91 PERMIT NO. 55-26 A-17

PHONE: Business _____ Home _____

LOCATION East Broad Turn in Dogwood Hills
Corner Trillium + Columbine S. R. No. _____

SUBDIVISION NAME Dogwood Hills LOT NO. 17 SECTION OR BLOCK NO. _____

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

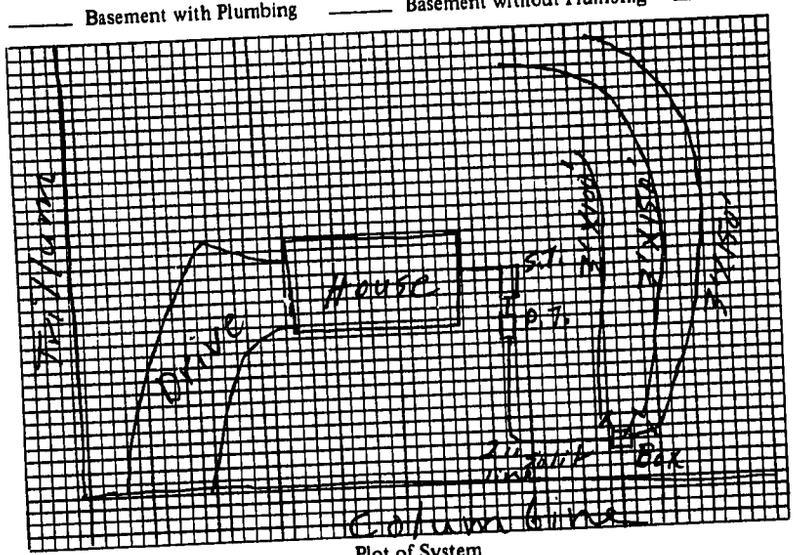
No. Bedrooms 4 No. Bathrooms 3

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

Lot Area approx. 3/4 acre

Character & Porosity of Soil Clayey
Percolation Rate .4 gal/sq ft/day
Topography 2 to 6 %
Depth to Water Table 41+
Rock or other impervious formations none

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 gal S.T. / 1500 gal P.T. Gals.
Nitrification Field:
No. of Lines 3 400
Sq. Ft. 1200 Linear Ft.
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by James Hutler

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

Signed: _____

Landscape so that surface water will not stand over Tanks or Drain lines.

IMPROVEMENTS PERMIT BY Kelly Sheeks

COMMENTS: Wire Pump + Alarm according to Iredell-Statesville Building Insp. Standards
Pump + Alarm on seprate circuit connections outside Pump Tank in Weather Proof nema-4 box

CERTIFICATE OF COMPLETION BY P.C. Moore DATE 11-25-91

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