6921

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 Paul Swaney DATE 2-5-88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Baymount Drive S. R. No. _____

SUBDIVISION NAME Baymount LOT NO. 84 SECTION OR BLOCK NO. II

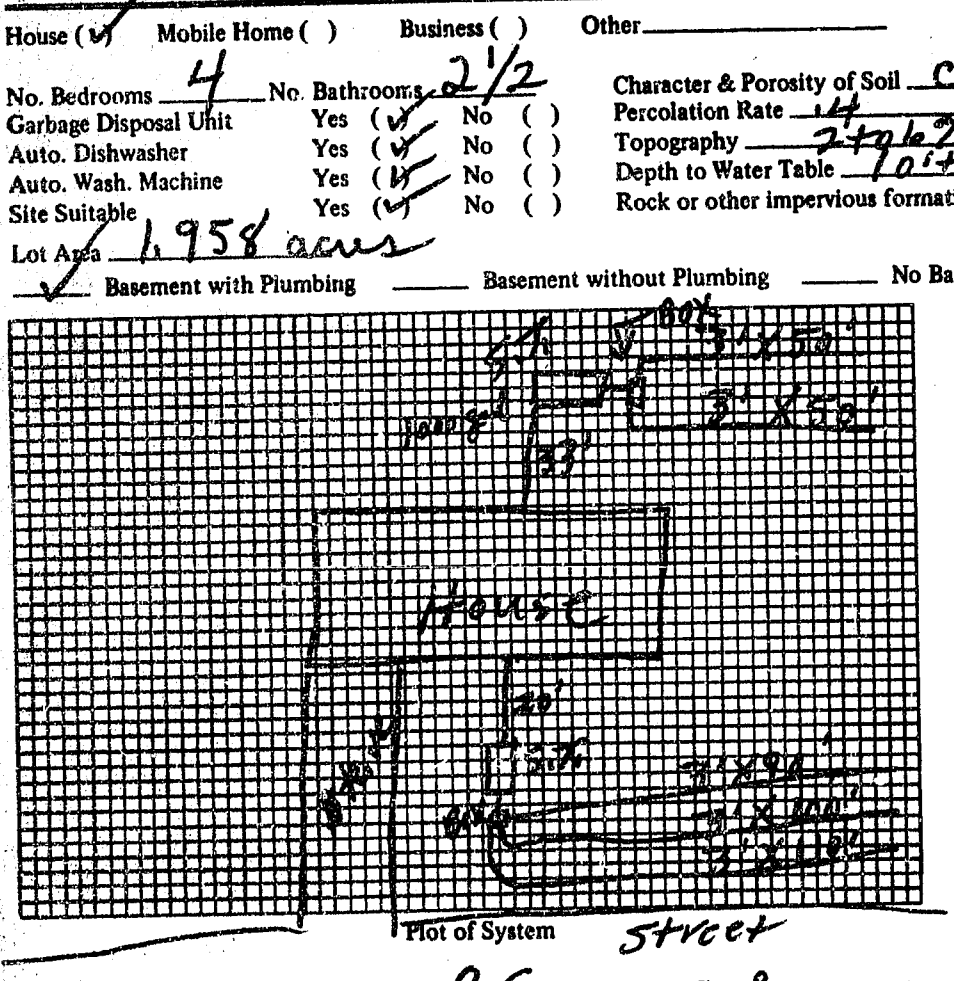
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 2 1/2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	14
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	slight slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10 ft
			Rock or other impervious formations	none

Lot Area 1.958 acres

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



1250 gal upper
Size of Tank 1000 lower Gals.

Nitrification Field:
No. of Lines 5
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by James Hudler

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

Signed: _____

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 2-5-88

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