IREDELL COUNTY HEALTH DEPARTMENT

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

12265

OWNER OR CONTRACTOR JAMES WINEBARGER DATE 12/13/90 PERMIT NO. 13H-A-137

PHONE: Business _____ Home _____

LOCATION I-77 N, EXIT RIGHT ON TOMLIN MILL, TL JOSEY ~ 1/2 mi TR PRIVATE DR ~ 1/4 mi ON (L) S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 2 SECTION OR BLOCK NO. _____

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

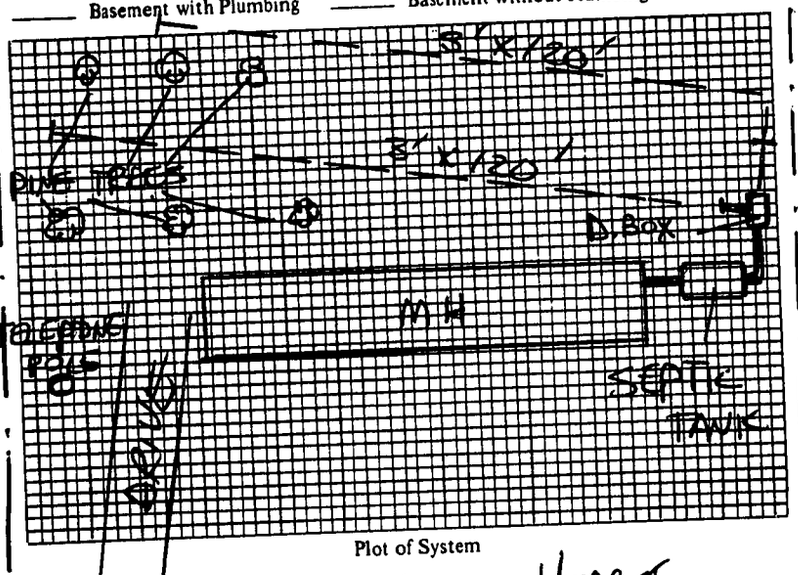
No. Bedrooms 2 No. Bathrooms 2

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

Character & Porosity of Soil PS
Percolation Rate .4 GPD/FT2
Topography 2-4% LS
Depth to Water Table >4'
Rock or other impervious formations NONE

Lot Area 0.71 AC

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (✓) WELL
Public ( )

Installed by _____

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

Signed: James R Winebarger

IMPROVEMENTS PERMIT BY STEVE HEDRICK

COMMENTS: ① KEEP SYSTEM MINIMUM 5' FROM M.H. & 10' FROM PROPERTY LINE.
② INSTALL LINES ON CONTOUR, NO DEEPER THAN 24", 9' ON CENTER. BOTH LINES MAY BE INSTALLED BETWEEN PINE ROWS IF DESIRED, SPACE PERMITTING.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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. THIS PERMIT IS VALID FOR 60 MONTHS AFTER ISSUE.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold