11-30-12:00

09527

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 Tom Gusler DATE Feb. 3, '89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115-21 N. TR 2383 (Shumville Rd) TL 2382 (Brawley Rd.) ~ 1/4 mile on Right S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ RS Yes (✓) No ( )

Lot Area BAC.

Character & Porosity of Soil Clay

Percolation Rate 2, 3

Topography ~15% Terraced

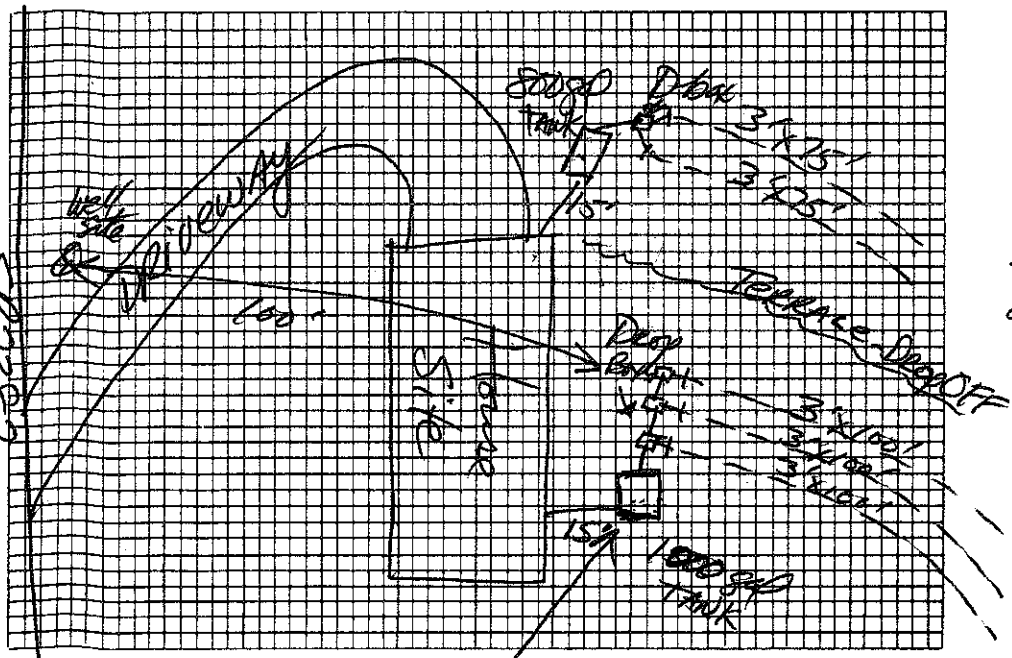
Depth to Water Table 3½'+

Rock or other impervious formations none obs.

Split System

Upper - Main

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Lower - Basement

800 gal tank; 150 lin feet Two 3'x75's

Installed by _____

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

Signed Tom Gusler

IMPROVEMENTS PERMIT BY R. K. Hinson, RS.

COMMENTS: Install all drainfield lines at a depth of 24" to trench bottom. Follow contour, @ well site

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.

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