08254

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 John Nash DATE Oct. 14 '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115-21 No. TR 2383 (Shumaker Rd) x Creek

2/mile TL private Street near end on Rt S. R. No. _____

SUBDIVISION NAME J. Bowles tract from Tolbert Est. LOT NO. 16 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ IS Yes (✓) No ( )

Lot Area 2 1/2 Ac

Character & Porosity of Soil clay

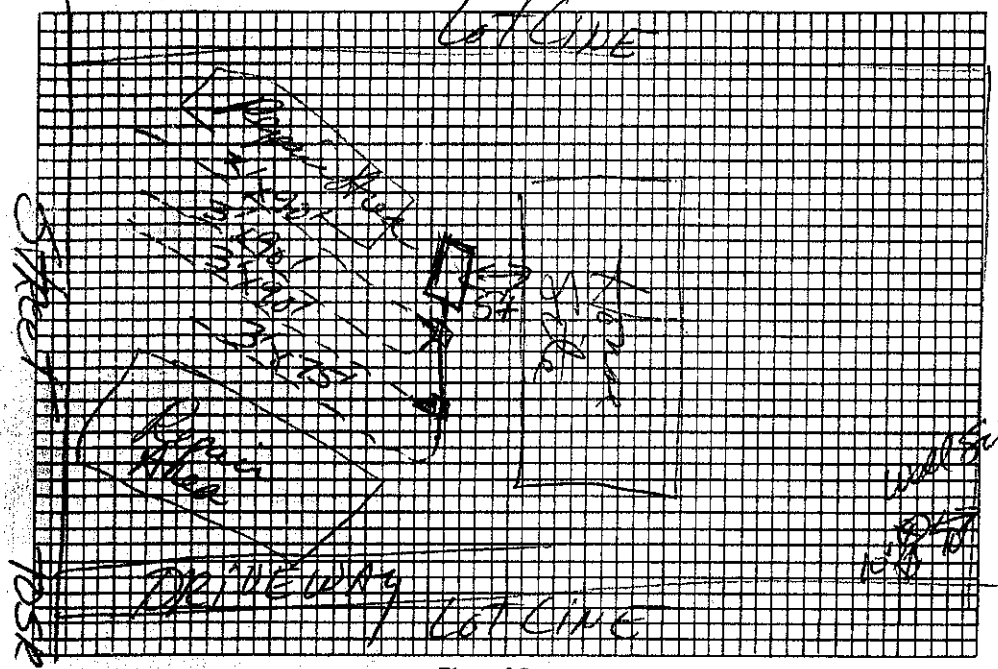
Percolation Rate 35

Topography 2-6%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

1 Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 1035 Linear Ft. 345

Depth of Stone in Lines 21"

Water Supply: Individual (✓)

Public ( )

Installed by D. Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: Well not down.

CERTIFICATE OF COMPLETION BY [signature] Jones, LS DATE 10-14-88

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