22842

IREDELL COUNTY HEALTH DEPARTMENT

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

7442

OWNER OR CONTRACTOR JL Hope DATE 12390 PERMIT NO 5M-6-A-62

PHONE: Business _____ Home _____

LOCATION 705 & Beaver Rock 500' on Rt

S. R. No. _____

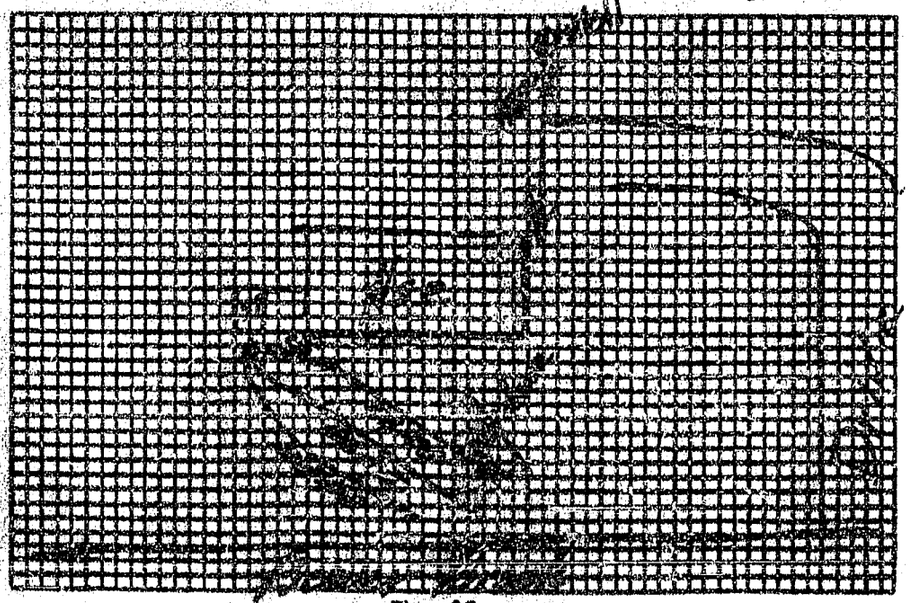
SUBDIVISION NAME Beaver Farm LOT NO. 12 SECTION OR BLOCK NO. _____

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

No. Bedrooms 2	No. Bathrooms 1½	Character & Porosity of Soil	Clayey
Garbage Disposal Unit	Yes ( ) No (✓)	Percolation Rate	3
Auto. Dishwasher	Yes ( ) No (✓)	Topography	Rolling
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	10'
Site Suitable	Yes (✓) No ( )	Rock or other impervious formations	None

Lot Area ½ Ac

_____ Basement with Plumbing ___✓___ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 810 Linear Ft. 270
Depth of Stone in Lines 24

Water Supply: Individual (✓)
Public ( )

Installed by JL Hope

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

Signed: _____

IMPROVEMENTS PERMIT BY JC Moore

COMMENTS: Keep out of back 50' from Septic System

CERTIFICATE OF COMPLETION BY DMeans DATE 12390

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