12471

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 T+T Co. DATE 3-12-91 PERMIT NO. SK-6-A-20

PHONE: Business ______ Home ______

LOCATION Lot 93 Forest Acres III

S. R. No. ______

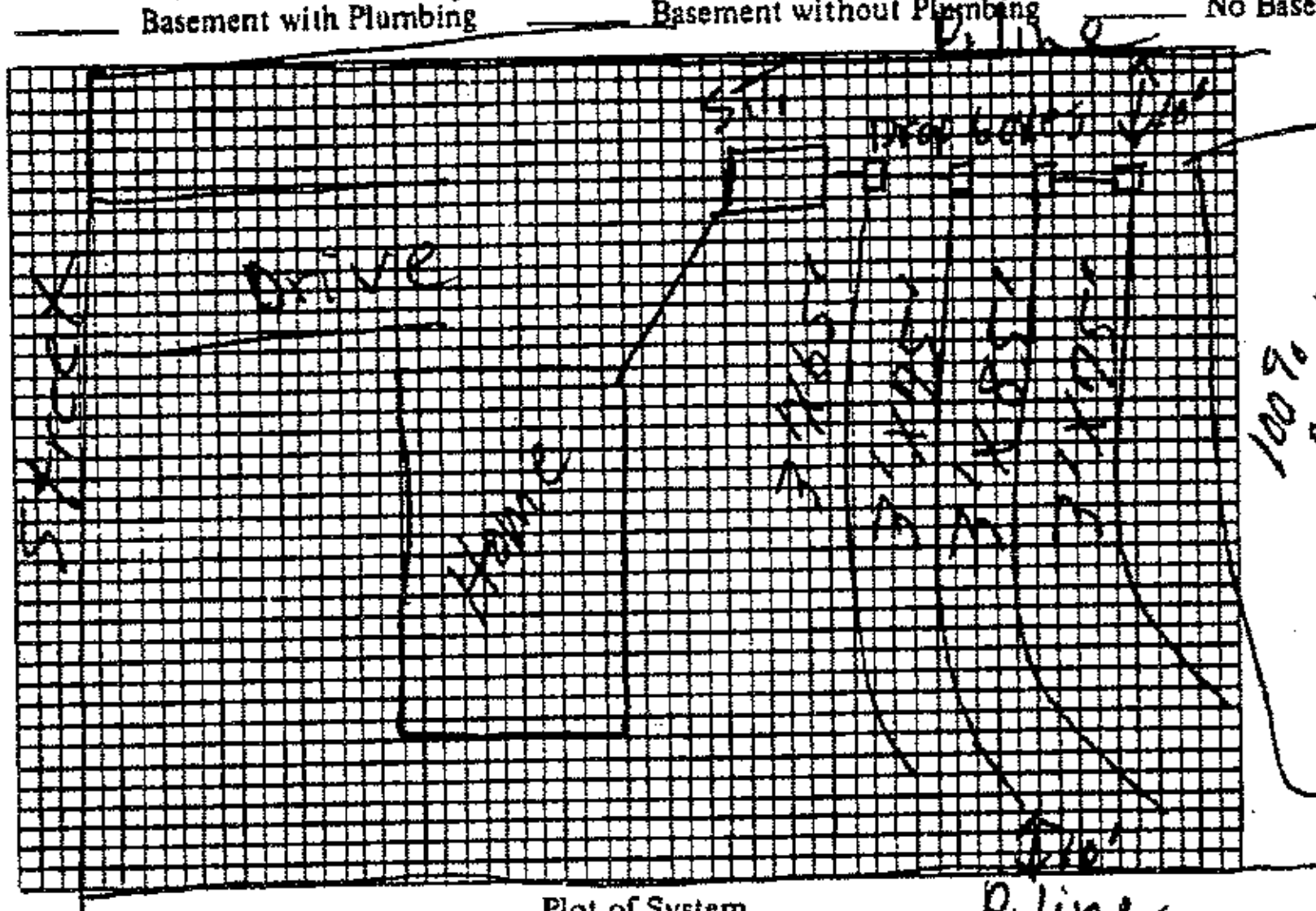
SUBDIVISION NAME ______ LOT NO. ______ SECTION OR BLOCK NO. ______

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

No. Bedrooms 3	No. Bathrooms 2		Character & Porosity of Soil	Clayey
Garbage Disposal Unit	Yes ( )	No (✓)	Percolation Rate	.4
Auto. Dishwasher	Yes ( )	No (✓)	Topography	2 to 10%
Auto. Wash. Machine	Yes (✓)	No ( )	Depth to Water Table	10'+
Site Suitable	Yes (✓)	No ( )	Rock or other impervious formations	none

Lot Area 100' X 284'

____ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Donalt Lackey

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

Signed: ______

IMPROVEMENTS PERMIT BY P. C. Moore

COMMENTS: ______

CERTIFICATE OF COMPLETION BY P. C. Moore DATE 3-12-91

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