9248

# 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 Robert Rawls DATE 12-14-88 PERMIT NO. D-11

PHONE: Business _____ Home _____

LOCATION Wentworth Drive S. R. No. _____

SUBDIVISION NAME Shannon Acres LOT NO. 85 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Clay loam

Percolation Rate 1 3 gal/ 55 sec. / inch

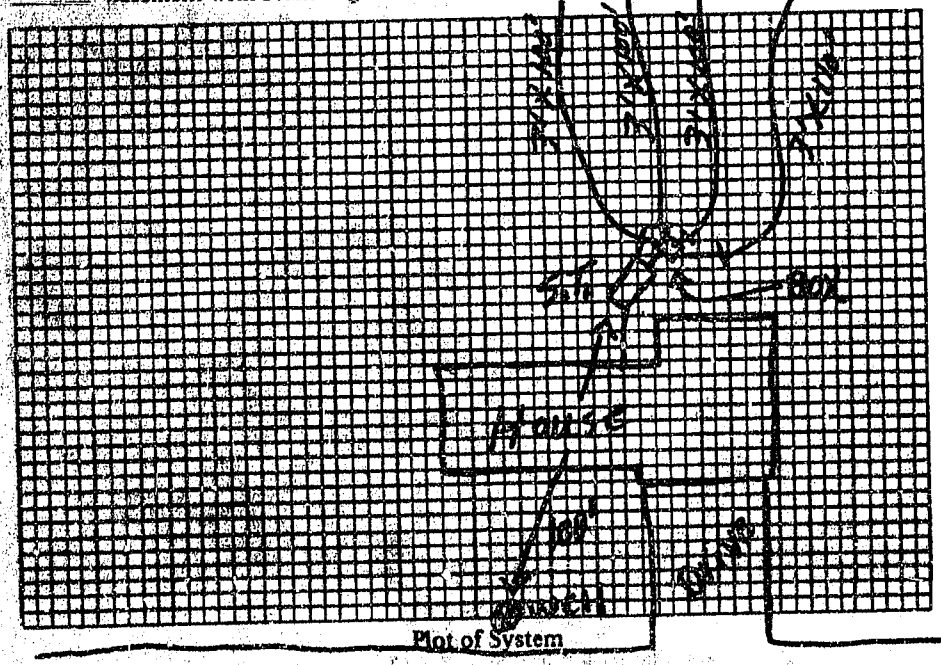
Topography 2 Fo 6%

Depth to Water Table 10'+

Rock or other impervious formations None

Lot Area 1 acre

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement




Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 1200 Linear Ft. 400

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Tommy Frye

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 12-14-88

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 to obtain Improvements Permit.

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