10638

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

DATE 6-26-90 PERMIT NO. 26-1-A-17

OWNER OR CONTRACTOR Clifford Eldess

PHONE: Business _____ Home _____

LOCATION 21 N. TR 107 Bethel Rd TL Bethel Park S. R. No. _____

SUBDIVISION NAME Bethel Park LOT NO. 17 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: Yes (✓) No ( )

Character & Porosity of Soil Red Sandy Loam

Percolation Rate 2 49"

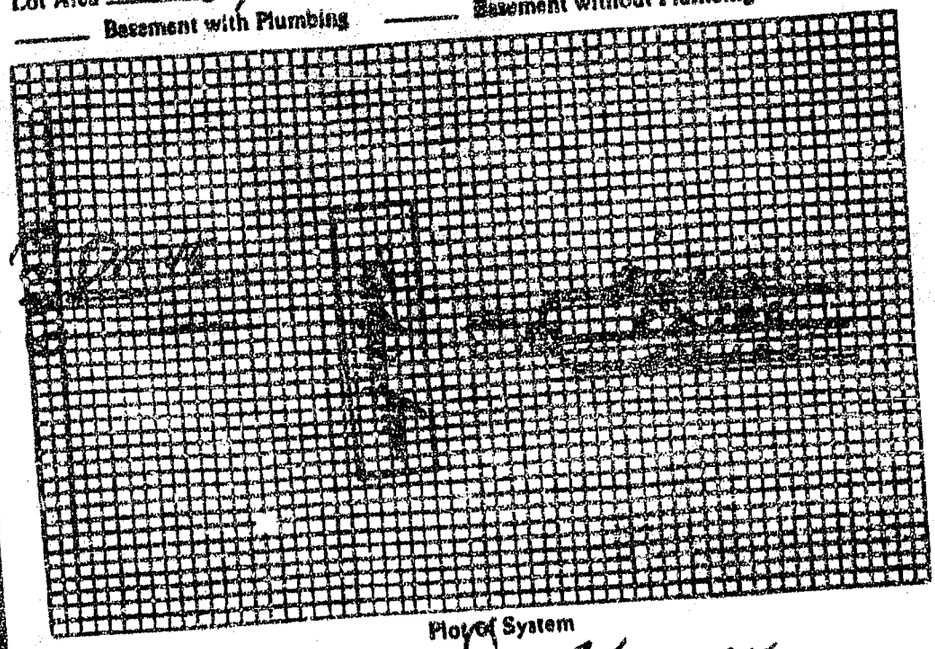
Topography Level

Depth to Water Table 72"

Rock or other impervious formations Encountered

Lot Area 7.39

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gal.

Nitrification Field:

No. of Lines 3

Sq. Ft. 200 Linear Ft. 300

Depth of Stone in Lines 24"

Water Supply: Individual (✓)
Public ( )

Installed by A. J. Barker

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

Signed: _____

IMPROVEMENTS PERMIT BY D. Warner

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 6/26/90

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