12837

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 WILLIAM P. BREWER DATE 9/17/91 PERMIT NO. 12H-A-41

PHONE: Business ________ Home ________

LOCATION US 21 N, TL BEL-AIRE DR JUST BEFORE HARMONY CHIROPRACTIC, 2ND LOT ON (L) S. R. No. ________

SUBDIVISION NAME HARMONY MEADOWS LOT NO. 10 SECTION OR BLOCK NO. I

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area .495 AC

Character & Porosity of Soil PS

Percolation Rate .4 GPD/FT2

Topography 6-8%

Depth to Water Table >24'

Rock or other impervious formations NONE

____ Basement with Plumbing ____ Basement without Plumbing ✓ No Basement

ACP 8/6/91

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 600 Linear Ft. 200

Depth of Stone in Lines 12"

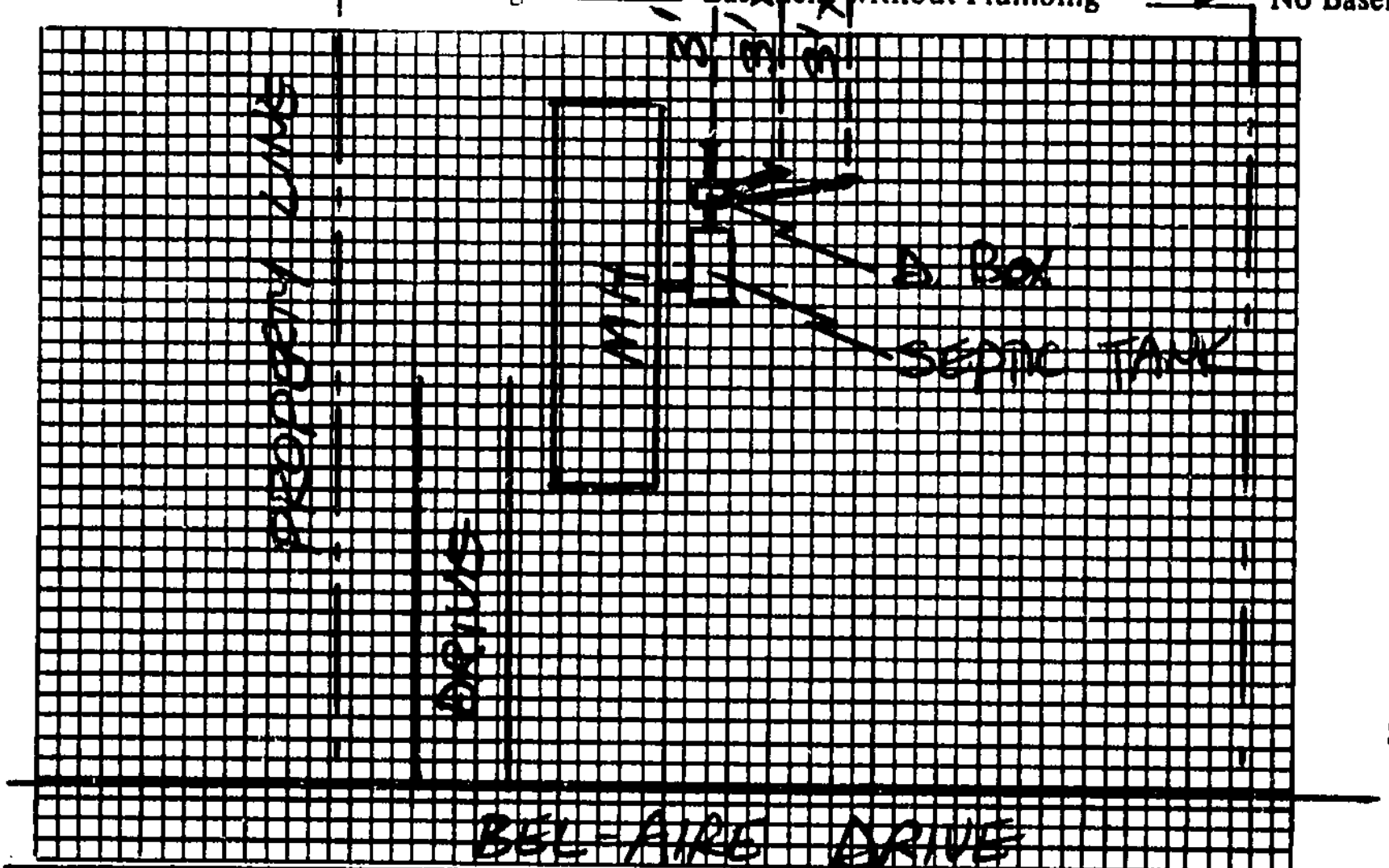
Water Supply: Individual ( )

Public (✓)

Installed by A-1 BACKHOE

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

Signed: ________



Plot of System

IMPROVEMENTS PERMIT BY STEVE HEDRICK

COMMENTS: ________

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 9/17/91

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